

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	15/05/2019 14:17
Date Of Accident	15/05/2019 08:25
Exact Location Of Accident	BRADDELL ROAD TOWARDS BARTLEY ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	EN3288J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOH GIM SENG
NRIC No	S1452309Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92995951
Alternative Phone No	OFFICE-92995951

### Vehicle Particulars

Manufacturer	LEXUS
Model	LEXUS ES300H CVT
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28718075 QMY (COMP)
Cover Note Number	

### Driver

Name of Driver	GOH GIM SENG
NRIC No	S1452309Z
Date Of Birth	18/11/1960
Occupation	OUTDOOR
Date Of Driving Pass	07/01/1979
Driving Experience	40 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92995951
Fax Number	
Contact Number	OFFICE-92995951
EEmail Address	NOEMAIL

Address	BLK 131B LORONG 1 TOA PAYOH #14-542
Postcode	312131
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	VAY2308 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : GOH GIM HOON GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 629 BEDOK RESERVOIR ROAD #01-1620 , <b>POSTCODE:</b> 470629 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4439999 - <b>FAX NO:</b> 62444376
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJF5697G
Vehicle Make/Model/Colour	VOLKSWAGEN SCIROCCO 1.4L AT TSI 1372Q5
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number                      VAY2308  
Vehicle Make/Model/Colour                      BMW  
Details Of Properties  
Vehicle Category                                      PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**SKETCH PLAN**

**IMPORTANT NOTICE**

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**8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

15 MAY 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

**IDAC KAKI BUKIT (VAC)**  
**23 Kaki Bukit Ave 4**  
**Singapore 415933**

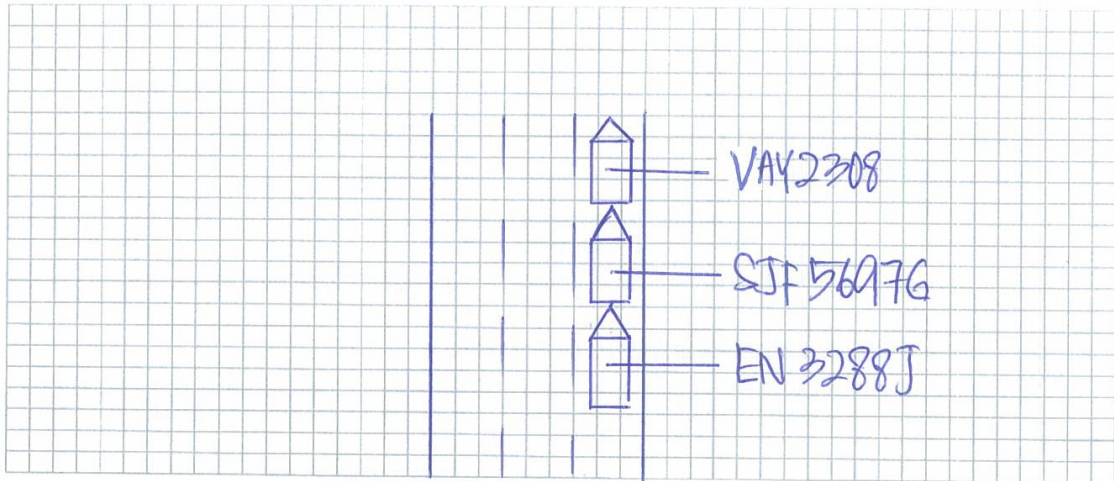
**Tel: 67416697 Fax: 67492305**

**Email: [workb@singnet.com.sg](mailto:workb@singnet.com.sg)**

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to  
police Report

DECLARATION

I/We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature

Date & Time:

15 MAY 2019

GIARVC SketchPlanForm\_v3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

**IDAC KAKI BUKIT (VAC)**

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: [vackb@singnet.com.sg](mailto:vackb@singnet.com.sg)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20190515/2117

Police Station Of Origin:  
Eunos NPP  
629 Bedok Reservoir Road #01-1620  
SINGAPORE 470629  
Tel No: 1800-4439999

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Report No. T/20190515/2117

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/05/2019 15:03	Vide Report No.:	Station Diary No.: 17
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### Informant's Particulars

Name of Informant: GOH GIM SENG	Address: APT BLK 131B LORONG 1 TOA PAYOH #14-542 SINGAPORE 312131		
ID Type / ID No.: NRIC NO / S1452309Z	Contact No.: Home/Office: Mobile: 92995951		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 58	Date of Birth: 18/11/1960	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Company director	Driving Licence Information: Class: 3,4 Date of Expiry:		

### General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 15/05/2019 08:25	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BRADDELL ROAD BARTLEY ROAD BRADELL ROAD TOWARDS BARTLEY ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EN3288J	Car	LEXUS	E300H	Grey	Slightly Damaged	1
SJF5697G	Car	VOLKSWAGO N	SCIROCCO 1.4L AT TSI 1372Q5	Black	Slightly Damaged	0
VAY2308	Car	BMW		Grey	Slightly Damaged	1

# Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20190515/2117

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Police Station Of Origin:  
Eunos NPP  
629 Bedok Reservoir Road #01-1620  
SINGAPORE 470629  
Tel No: 1800-4439999

Report No. T/20190515/2117

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GOH GIM SENG	ID No.	S1452309Z
Related Vehicle	EN3288J (Car)	Contact No.	92995951
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 15/05/2019 at around 0825hrs, I was travelling along the right most lane of Braddell Road towards Bartley Road in my vehicle (EN3288J). As the traffic was heavy, I followed behind the car (SJF5697G) when it suddenly braked hard. I jammed my brake as well however was unable to stop the car in time and in turn collided onto the rear of the vehicle. The vehicle in front of me also in turn collided onto another vehicle (VAY2308). There was very minor damages on all our cars and we took photos before leaving the scene. I then reported the accident to my insurance company however they informed me to lodge a Police report.

## Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20190515/2117

Police Station Of Origin:  
Eunos NPP  
629 Bedok Reservoir Road #01-1620  
SINGAPORE 470629  
Tel No: 1800-4439999

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Report No. T/20190515/2117

CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 2 LIEW CHONG XIANG, VINCENT

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

15/05/2019 15:03

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt MOHAMAD ZULFAZDLI BIN  
ABDULLAH

Contact No.: 65476204

Classification Of Case:

Authentication Stamp

NP168



POLICE FORCE

SIGNATURE



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

