

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	05/11/2020 17:09
Date Of Accident	05/11/2020 14:40
Exact Location Of Accident	PIE TOWARDS TUAS - BEF DUNEARN EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA3288G
Insured/Policyholder	
Name Of Registered Owner	TAN KIM TECK
NRIC No	SXXXX471B
Email Address	MELISSAHO@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96354779
Alternative Phone No	OFFICE-96354779

Vehicle Particulars

Manufacturer	PORSCHE
Model	911 CARRERA S 3.8 A

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 THIRD PARTY

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	S12V00025/VPS/R05
Cover Note Number	

Driver

Name of Driver	HO MEE FOONG
NRIC No	SXXXX398C
Date Of Birth	28/09/1970
Occupation	INDOOR
Date Of Driving Pass	03/08/2010
Driving Experience	10 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97684779
Fax Number	
Contact Number	
Email Address	MELISSAHO@SINGNET.COM.SG

Address	242 WESTWOOD AVE #08-50
Postcode	648365
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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: : NICHOLAS GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN AND STATEMENT

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	GBB4182Y
Vehicle Make/Model/Colour	NISSAN URVAN
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NG CHEE SHENG
NRIC/Passport Number	SXXXX367B
Contact Number	98157147

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

DETAILS OF INJURED PERSON 1

Name HO MEE FOONG
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKA3288G
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

Address

Postcode

DETAILS OF INJURED PERSON 2

Name NICHOLAS
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKA3288G
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

Address

Postcode

SKETCH PLAN

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

I understand, acknowledge, agree and consent that:

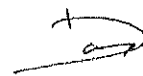
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my Insurer (collectively the "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:



Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

A: SKA 328FG
B: GBB 118DY

ME-TUR

ROAD WORK

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached statement

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:


ON 05/11/2020 AT AROUND 1440 HRS, I WAS TRAVELLING WITH MY VEHICLE (**SKA3288G**) ALONG PIE TOWARDS TUAS AT LANE 2. WHILE THERE IS ROAD WORKS ON THE 1ST LANE.

WHILE TRAVELLING STRAIGHT, ALL OF THE SUDDEN A VEHICLE IN FRONT OF ME JAMMED BRAKE, HENCE I DOES THE SAME AND KEPT MY DISTANCE.

ALL OF THE SUDDEN I FELT A HUGE IMPACT ON THE REAR, VEHICLE (**GBB4182Y**) FAILED TO STOP IN TIME AND COLLIDED ONTO MY REAR PORTION OF MY VEHICLE

THE IMPACT WAS HUGE THAT MY SAFETY ROD AT THE REAR WAS DEPLOYED.

ME AND MY PASSENGER WILL PROCEED TO GO FOR MEDICAL CHECK-UP REGARDS TO THIS ACCDIENT.


S 7034398/c

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20201105/2154

1 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20201105/2154

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/11/2020 22:40	Vide Report No.:	Station Diary No.: 121
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Informant's Particulars

Name of Informant: HO MEE FOONG			Address: 242 WESTWOOD AVENUE #08-50 SINGAPORE 648365	
ID Type / ID No.: NRIC NO / S7034398C			Contact No.: Home/Office: Mobile: 97684779	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 50	Date of Birth: 28/09/1970	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Housewife			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

General Information of the Incident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/11/2020 14:40	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
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
GBB4182Y	Van				Slightly Damaged	0
SKA3288G	Car				Seriously Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT Pg. 2



**SINGAPORE
POLICE FORCE**



T/20201105/2154

2 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No; 1800-7929999

Report No. T/20201105/2154

CONTINUATION OF REPORT

Driver			
Name	NG CHEE SHENG		ID No. S9522367B
Related Vehicle	GBB4182Y (Van)		Contact No. 98157147
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HO MEE FOONG		ID No. S7034398C
Related Vehicle	SKA3288G (Car)		Contact No. 97684779
Hospital/Clinic	GLENEAGLES HOSPITAL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	05/11/2020	Date Discharge	05/11/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	TAN ZHEN RONG NICHOLAS		ID No. T0034970J
Related Vehicle	SKA3288G (Car)		Contact No. 93629738
Hospital/Clinic	GLENEAGLES HOSPITAL		Class of Driving Licence & Expiry Date Class: 3A Date of Expiry: NIL
Date Treatment	05/11/2020	Date Discharge	05/11/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the 05/11/2020 at about 1440hrs, I was driving my vehicle bearing plate number: SKA3288G on the second lane of PIE towards Tuas, before Dunearn Exit and One lane was undergoing road works. While I was driving, a vehicle in front of me jammed brake and stopped which resulted in me braking together and was able to stop with a distance in front of me, avoiding any collisions with stationary vehicles in front of us. However, a vehicle behind bearing plate number: GBB4182Y was unable to stop in time and the front of his vehicle collided onto the rear of my vehicle. As a result, my vehicle suffered damages to the rear and my roll over protection system was deployed. I do not know the extent of my damage but the car could no longer be driven. We then stopped our vehicles there and alighted to exchange our particulars as well as take photos of the damages to the vehicles. I then contacted the towing company from my workshop. The tow truck from my workshop arrived at 1515hrs and sent my car to the workshop. My passenger and I followed the tow truck to the workshop. After settling the paperwork at the workshop, my



**SINGAPORE
POLICE FORCE**



T/20201105/2154

Police Station Of Origin:
Nanyang N.P.C
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649482
Tel No: 1800-7929999

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Report No. T/20201105/2154

CONTINUATION OF REPORT

passenger and I decided to see a doctor as we felt pain on our body after the accident. Both of us were given 03 days of MC after visiting Gleneagles A&E.
I am lodging this traffic report for Insurance claims purposes.

[illegible]

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Report No. T/20201105/2154

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: J / Sgt 2 CHUA JING HAO VICTOR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/11/2020 22:40
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
Authentication Stamp NP168	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 471B

Vehicle Details

Vehicle No.: SKA3288G
Vehicle to be Exported: No
Intended Deregistration Date: 05 Nov 2020
Vehicle Make: PORSCHE
Vehicle Model: 911 CARRERA S 3.8 A
Primary Colour: White
Manufacturing Year: 2012
Engine No.: MA103C08068
Chassis No.: WP0ZZZ99ZCS145760
Maximum Power Output: 294.0 kW (394 bhp)
Open Market Value: \$159,857.00
Original Registration Date: 27 Jul 2012
First Registration Date: 27 Jul 2012
Transfer Count: 1
Actual ARF Paid: \$159,857.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 26 Jul 2022
PARF Rebate Amount: \$87,921.00

Intended COE Rebate Details

COE Expiry Date: 26 Jul 2022
COE Category: E - Open Category
COE Period(Years): 10
QP Paid: \$92,010.00
COE Rebate Amount: \$15,680.00
Total Rebate Amount: \$103,601.00

The information contained herein is correct as at 05 Nov 2020

OK