

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 Submission 29/12/2020 16:12 (SGT)
Date of Accident 27/12/2020 15:50 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GW3811C

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner GEE BENG TRADING
Company Reg No 5XXXX600M
Email Address LESTERRR88@HOTMAIL.COM
Mobile Phone No (Phone) +65-96306608
Alternative Phone No +65-96306608

VEHICLE PARTICULARS

Manufacturer Toyota
Model Hiace
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5054181346-08
Cover Note Number -

DRIVER

Name of Driver LEE GEE BENG
NRIC No SXXXX626D
Date Of Birth 27/05/1960
Occupation Outdoor

Date Of Driving Pass	16/01/1978
Driving experience	42 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96306608
Alt. Phone Number	-
Email Address	LESTERRR88@HOTMAIL.COM
Address	BLK 218A BOON LAY AVE #07-261
Address complement	-
Postcode	641218
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201227/2089

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	GBB6126Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLS7259H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHF512M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	GBG8716E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEE GEE BENG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	GW3811C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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

I understand, acknowledge, agree and consent that:

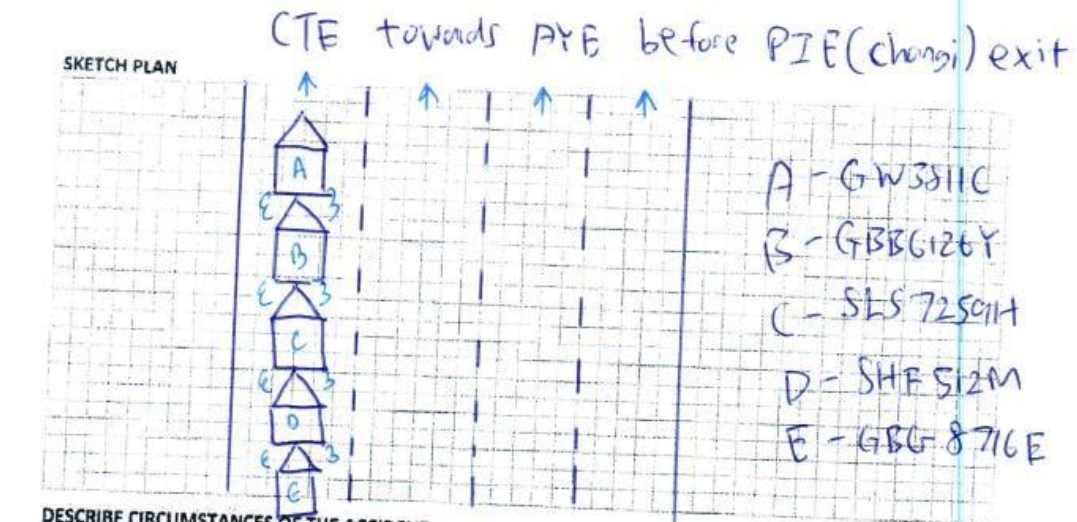
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the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

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

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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REF x0 Police Report

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.:















**SINGAPORE
POLICE FORCE**



1/20201227/2089

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 3

Report No: T/20201227/2089

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SHF512M	TAXI	RENAULT	LATITUDE 2.0L DCI AUTO D/AB 4DR	Red	Totally Damaged	0
SLS7259H	Car	HONDA	VEZEL HYBRID 1.5X AUTO	Silver	Totally Damaged	0

Brief Details.

On 27/12/2020 at 1550hrs, I was driving my vehicle bearing the plate number V1) GW3811C along CTE towards Changi PIE. My vehicle was in a stationary position as there was a jam ahead of me. Suddenly, I heard a loud bang from the back and my vehicle got hit by V2) GBB6126Y. I went down to take a look and discovered damages on the rear of my vehicle. The rear door was dented and it cannot be opened.

At that point of time, I realized that I got into a chain collision involving 5 vehicles involving V2) GBB6126Y, V3) SLS1259H, V4) SHF512M and V5) GBG8716E. We all checked on one another and no one was injured. Thereafter, we took photographs of the vehicle plate number and I exchanged particulars with V2's driver namely Charles John Peter, G7886243U, HP: 85156841. I then left the scene as a passerby told me that I can leave as no one was injured.

Shortly after, I received a call from traffic police and I was told that V4's driver complaint that he is having heart pain and I had to return.

When I arrived back at scene, I met up with the traffic police and I received a case card report number: E/20201227/0146. Investigation Officer in-charge is Roizman, Tel: 65476131.



SINGAPORE POLICE FORCE

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20201227/2089

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Report No. T/20201227/2089

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/12/2020 22:08 Vide Report No.: E/20201227/0146 Station Diary No.: 155

Informant's Particulars

Name of Informant: LEE GEE BENG Address: APT BLK 218A BOON LAY AVENUE #07-261 SINGAPORE 641218
ID Type / ID No.: NRIC NO / S1442626D Contact No.: Home/Office: Mobile: 96306608
Nationality: SINGAPORE CITIZEN Email:
Sex: Male Age: 60 Date of Birth: 27/05/1960 Type of Informant: Driver
Race: Chinese Language: Mandarin Institution / School Name:
Occupation: DELIVERYMAN Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:

General Information of the Accident

Type of Accident: Injury Attended by Police Drink Drive: No Date/Time of Accident: 27/12/2020 15:50 Type of Location: T-Junction
Location: CENTRAL EXPRESSWAY
Weather: Sunny 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: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB6126Y	Lorry	TOYOTA	DYNA 150 MANUAL 3SEATER	Silver	Seriously Damaged	1
GBG8716E	Lorry	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5	Silver	Seriously Damaged	1
GW3811C	Van	TOYOTA	HIACE DIESEL	Green	Seriously Damaged	0

Report No. T/20201227/2089 2 of 3

700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

**SINGAPORE
POLICE FORCE**

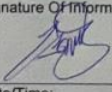

T/20201227/2089

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Report No. T/20201227/2089

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: J / Sgt 2 KARINA SEAH JIA LING	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 27/12/2020 22:08
Officer In Charge Of Case: TP / GIT / Staff Sgt TAN JUN YAN Contact No.: 65476311 SN 126	Classification Of Case:
Authentication Stamp MP168 Signature:  Singapore Police Force	