

## 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 ability.
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	15/05/2018 16:50
Date Of Accident	11/05/2018 21:50
Exact Location Of Accident	PIE TOWARDS CHANGI BESIDE JLN EUNOS EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2179Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CVT (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 HIRE

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD17V11639/VPZ/R02
Cover Note Number	

### Driver

Name of Driver	LIM JUN WEI
NRIC No	S9119904A
Date Of Birth	31/05/1991
Occupation	OUTDOOR
Date Of Driving Pass	23/07/2011
Driving Experience	6 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82228242
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 148 GANGSA ROAD #11-285
Postcode	670148
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	NO
Number of vehicles involved in the accident	
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: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PAYA LEBAR NPP
Police Station Address	ROAD: 114 HOUGANG AVE 1 #01-1270 , POSTCODE: 530114 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT NO.:T/20180514/2082

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKL2890R
Vehicle Make/Model/Colour	
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 SLH6740Z  
Vehicle Make/Model/Colour  
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 3

Vehicle Registration Number SHC6218P  
Vehicle Make/Model/Colour  
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 INJURED PERSON 1

Name LIM JUN WEI  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SKX2179Z  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance?  
Address BLK 148 GANGSA ROAD #11-285  
Postcode 670148

## Sketch Plan

### SKETCH PLAN


#### IMPORTANT NOTICE


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6. The 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 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.: 15/5/18 4.45 pm

### Sketch Plan #2

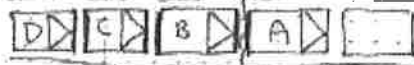
### SKETCH PLAN

VEHICLE A - SKX 71792

WHICH Q - SKL 2870R

U2141002 C - 6214 67402

VEHICLE D - SHC 621713



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT

REPORT NUMBER:  
T/20180912/2077

VEHICLE A - SKX 2179Z  
VEHICLE B - SIEL 2890R  
VEHICLE C - SLH 6740Z  
VEHICLE D - SHC 6218P

## DECLARATION

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



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

Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/ID No. 15/5/18 4

Name: \_\_\_\_\_  
NRIC/FIN No. 15/5/18 4.45 pm



**SINGAPORE  
POLICE FORCE**



T/20180514/2082

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Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

Report No: T/20180514/2082

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/05/2018 13:42		Vide Report No.:		Station Diary No.: 13	
<b>Informant's Particulars</b>					
Name of Informant: LIM JUN WEI			Address: APT BLK 148 GANGSA ROAD #11-285 SINGAPORE 670148		
ID Type / ID No: NRIC NO / S9119904A			Contact No.: Home/Office: Mobile: 82228242		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 26	Date of Birth: 31/05/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/05/2018 21:50	Type of Location:
Location: Along Road 1. PAN ISLAND EXPRESSWAY Towards Changi near exit Jalan Eunos				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC6218P						2
SKL2890R						0
SKX2179Z					Slightly Damaged	1
SLH6740Z						2



**SINGAPORE  
POLICE FORCE**



T/20180514/2082

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1.#01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

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Report No: T/20180514/2082

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	KUEK CHONG	ID No.	S6910333B
Related Vehicle	SHC6218P	Contact No.	96571863
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Name	YU JIN HUA	ID No.	S7979669G
Related Vehicle	SKL2890R	Contact No.	90886056
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LIM JUN WEI	ID No.	S9119904A
Related Vehicle	SKX2179Z	Contact No.	82228242
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	12/05/2018	Date Discharge	12/05/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight





**SINGAPORE  
POLICE FORCE**



T/20180514/2082

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

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Report No. T/20180514/2082

**CONTINUATION OF REPORT**

Name	YEAP CHOON LEONG	ID No.	S9079989D
Related Vehicle	SLH6740Z	Contact No.	94882952
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 11/05/2018 at about 2150hrs, I was driving my car SKX2179Z with a passenger along PIE towards Changi. I was at lane 1 near Jalan Eunus exit. There was a car that was in front of my vehicle and the car brakes were applied suddenly. I managed to stop my car on time. The car SKL2890R that was behind my vehicle managed to stop in time. We were stationed for few seconds and heard a bang. A car SLH6740Z knocked onto the rear of the car of SKL2890R which then knocked onto the rear of my vehicle. A taxi SHC6218P knocked onto the rear of the car SLH6740Z. I'm unsure which car started the collision. In my car, my passenger was not injured. I sprained my neck. No one injured in the car SKL2890R. One passenger from car SLH6740Z was injured. She just said she was in pain and took a taxi that was passing by to hospital. No one was injured in the car SHC6218P. Ambulance arrive but no one was conveyed as one of the passenger who was in pain took a taxi and left to hospital. I exchange particulars with the drivers. I was told by an LTA officer to move off. The rear of my car is slightly cracked and the boot could not be closed.

On 12/05/2018 at about 0035hrs, I went to see a doctor at Ng Teng Fong Hospital and was given 4 days MC.

I wished to state that earlier, I had lodge a report T/20180512/2077 however there is some error to it thus I am lodging a new report as my insurance need it.





**SINGAPORE  
POLICE FORCE**



T/20180514/2082

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

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Report No. T/20180514/2082

**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:  
F /  
Sgt 2 MUHAMMAD SYAFIQ BIN ROSMANJA

Signature Of Informant:

Signature Of Interpreter:  
Not applicable.

Date/Time:  
14/05/2018 13:42

Officer In Charge Of Case:  
TP / AEIT /  
Sgt 2 YEO KIA HUAT  
Contact No.: 65476325

Classification Of Case:

Authentication Stamp  
NP168



Signature:

Singapore Police Force