

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 11/01/2021 11:01 (SGT)
Date of Accident 09/01/2021 14:55 (SGT)
Exact Location of Accident Singapore
Additional Location Information PAN ISLAND EXPRESSWAY LAMP POST NO: 722
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFF4442D

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SLOW YON FONG
NRIC No SXXXX764F
Email Address YFSIOW@HOTMAIL.COM
Mobile Phone No (Phone) +65-98240902
Alternative Phone No +65-98240902

VEHICLE PARTICULARS

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

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5054306594-8
Cover Note Number -

DRIVER

Name of Driver LIM SOO CHING
NRIC No SXXXX828I
Date Of Birth 26/02/1967
Occupation Indoor

Date Of Driving Pass	26/01/1994
Driving experience	27 YEARS
Gender	Female
Mobile Number	(Phone) +65-96739009
Alt. Phone Number	-
Email Address	YFSIOW@HOTMAIL.COM
Address	BLK 141 BEDOK RESERVOIR ROAD #07-1525
Address complement	-
Postcode	470141
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	DRIZZLING
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	Eunos Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004439999
Alt. Police Station Phone No	(Fax) +65-62444376
Police Station Address	Blk 629 Bedok Reservoir Road #01-1620 Singapore 470629
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

SEE ATTACHED SKETCH PLAN AND POLICE REPORT NO: T/20210109/2106

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBQ8804G
Vehicle Manufacturer	Mercedes
Vehicle Model	200e
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SEAH JUN HAO
NRIC No	SXXXX374F

Contact Number	(Phone) +65-96349208
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	SKB9073P
Vehicle Manufacturer	Volkswagen
Vehicle Model	Golf
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JOSEE SEAH
NRIC No	SXXXX071A
Contact Number	(Phone) +65-96888964
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	SJT8248B
Vehicle Manufacturer	Subaru
Vehicle Model	Forester
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	SEAH JUN HAO
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SBQ8804G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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.
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.



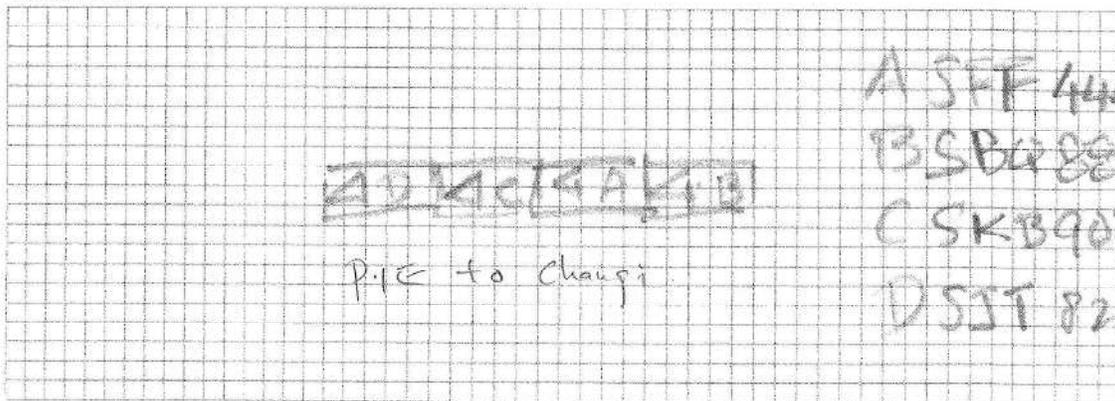
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

Sketch Plan



ADKCBAB

pic to change

A JFF 44420
 B SBC 8804G
 C SKB 9073P
 D SIT 8248B

Describe Circumstances of the Accident

See attached police report no: T/26216109/2106

Declaration

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

Witnessed by Reporting Centre
Personnel


**SINGAPORE
POLICE FORCE**


T/20210109/2106

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

1 of 4
Report No. T/20210109/2106

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/01/2021 18:52	Vide Report No.: G/20210109/0172	Station Diary No.: 26
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Informant's Particulars

Name of Informant: LIM SOO CHING		Address: APT BLK 141 BEDOK RESERVOIR ROAD #07-1525 SINGAPORE 470141	
ID Type / ID No.: NRIC NO / S1833828I		Contact No.: Home/Office: Mobile: 96739009	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 53	Date of Birth: 26/02/1967	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Other special education teachers		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/01/2021 14:55	Type of Location: Flyover
Location: PAN-ISLAND EXPRESSWAY				
Lamp Post Number: 722				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Dual Carriage 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
SBQ8804G	Car	MERCEDES BENZ	200E AT	Gold	Totally Damaged	0
SFF4442D	Car	TOYOTA	CAMRY 2.4 AUTO ABS AIRBAG	Silver	Seriously Damaged	0
SJT8248B	Car	SUBARU	FORESTER 2.0I-L CVT ABS D/AIRBAG AWD S/R	Silver		0


**SINGAPORE
POLICE FORCE**


T/20210109/2106

2 of 4

Report No. T/20210109/2106

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

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKB9073P	Car	VOLKSWAGO N	NEW GOLF 1.4 AT 5K13G5	Gold	Slightly Damaged	0

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	SEAH JUN HAO			ID No.	S9101374F
Related Vehicle	SBQ8804G (Car)			Contact No.	96349208
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	Serious	
Driver					
Name	LIM SOO CHING			ID No.	S1833828I
Related Vehicle	SFF4442D (Car)			Contact No.	96739009
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	JASEE SEAH			ID No.	S7617071A
Related Vehicle	SKB9073P (Car)			Contact No.	96888964
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	

**POLICE FORCE**

T/20210109/2106

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

3 of 4

Report No. T/20210109/2106

CONTINUATION OF REPORT**Brief Details.**

On the 09/01/2021 at 1450pm I was travelling along the right most lane which is lane one of Pan-Island Expressway (PIE). I was travelling in the direction heading towards changi just before Kim Keat Flyover and the traffic was very heavy, me and the vehicle (SKB9073P) in front of mine had come to a stop. Suddenly I felt an impact from the back, another vehicle (SBQ8804G) had collided into the rear of my vehicle causing me to jerk forward and collide into the vehicle in front of mine. The vehicle in front of mine had also jerked forward colliding into the rear of the vehicle (SJT8248B) in front of them. All of us stopped and exited our respective vehicles, I then went to make a check with the drivers in front before going to the driver behind to make a check to see if they were okay. Me and the driver behind had then exchanged particulars as well as contact number, took photos of our respective vehicles and the driver behind me kept apologizing to me. But then he told me he was not feeling so well, as such he went to seat inside his car. I then quickly called for the ambulance, as I was calling for the ambulance the two vehicles in front then drove off before ambulance arrived. Shortly the paramedics arrived, subsequently the vehicle (SKB9073P) in front of mine also came back and we managed to exchange particulars. The paramedics then made a check on all of us, thereafter the driver who was in the vehicle behind mine was conveyed to the nearest hospital. The traffic police had also came down and took all our in car camera SD card as well as advising us to lodge a police report immediately.



**SINGAPORE
POLICE FORCE**



T/20210109/2108

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

4 of 4

Report No: T/20210109/2108

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 LIM SHAO WEI, CLARENCE	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / GIT / Sgt 2 DAVID YAP Contact No.: 96192349	

Signature Of Informant:	
Date/Time: 09/01/2021 18:52	
Classification Of Case:	

Authentication Stamp
NP168



SIGNATURE