

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 19/01/2021 17:24 (SGT)
Date of Accident 18/01/2021 16:30 (SGT)
Exact Location of Accident Near Eng Neo Flyover, Singapore
Additional Location Information PIE TOWARDS CHANGI AIRPORT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT5100C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ZEE WAY KEONG
NRIC No S8022148G
Email Address ADRIANZEE@YMAIL.COM
Mobile Phone No (Phone) +65-98232022
Alternative Phone No (Home) +65-98232022

VEHICLE PARTICULARS

Manufacturer Lexus
Model LEXUS IS300 EXECUTIVE
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 Great Eastern
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2020-V0113422-VDP
Cover Note Number -

DRIVER

Name of Driver ZEE WAY KEONG
NRIC No S8022148G
Date Of Birth 13/07/1980
Occupation Indoor

Date Of Driving Pass	10/06/1999
Driving experience	21 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98232022
Alt. Phone Number	(Home) +65-98232022
Email Address	ADRIANZEE@YMAIL.COM
Address	BLK 684C EDGEDALE PLAINS #15-649
Address complement	-
Postcode	823684
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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	Punggol Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18006049999
Alt. Police Station Phone No	(Fax) +65-64468015
Police Station Address	Blk 21A Tebing Lane Singapore 828837
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	SH9940K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	MR YEO
Contact Number	(Phone) +65-96633451

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	ZEE WAY KEONG
Address	BLK 684C EDGEDALE PLAINS #15-649
Address Complement	-
Post Code	823684
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMT5100C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

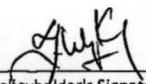
SKETCH PLAN

IMPORTANT NOTICE

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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.



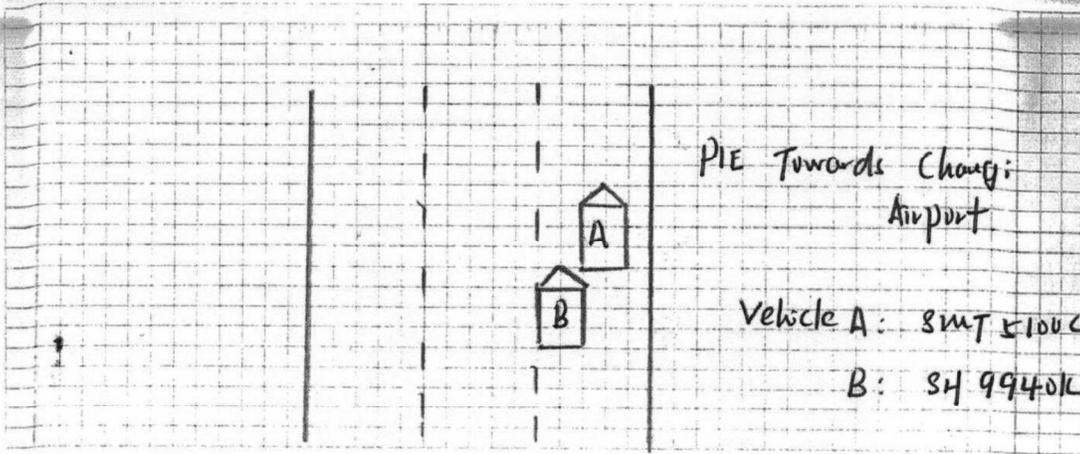
 Policyholder's Signature
 Date & Time:

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



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

SKETCH PLAN



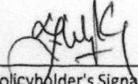
PIE Towards Changi Airport
 Vehicle A: SMT 510UC
 B: SH 9940K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

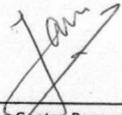
I was travelling along PIE towards Changi at about 4.30pm. Traffic was slow moving with stops in between. When the car in front of me slowed down and stopped, I did the same but noticed that a taxi, SH 9940K was attempting to filter to the middle lane and did not notice. I tried to move in more towards the right in order to give him more clearance but he still did not manage to filter out without clipping me on the left rear bumper.

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**



T/20210119/2086

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20210119/2086

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/01/2021 17:01	Vide Report No.:	Station Diary No.: 64
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Informant's Particulars

Name of Informant: ZEE WAY KEONG		Address: APT BLK 684C EDGEDALE PLAINS #15-649 SINGAPORE 823684	
ID Type / ID No.: NRIC NO / S8022148G		Contact No.: Home/Office: Mobile: 98232022	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 40	Date of Birth: 13/07/1980	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SALES EXECUTIVE		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/01/2021 16:30	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
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
SH9940K	Car				Slightly Damaged	2
SMT5100C	Car	TOYOTA	LEXUS IS300 EXECUTIVE	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20210119/2086

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

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Report No. T/20210119/2086

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMT5100C	OVERSEAS ASSURANCE CORPORATION LIMITED	V0113422	13/08/2020	12/08/2021

Brief Details.

On 18/01/2021 at around 1630hrs, I was traveling at the extreme right lane of the PIE expressway (3 lanes) heading towards Changi.

Suddenly, the vehicle in front of me came to a halt and I manage to stop my vehicle SMT5100C in time. However, the vehicle, SH9940K at my rear which was about to change his lane to his left, while filtering to the next lane, his vehicle hit on to the rear of my vehicle.

Both of us alighted from our vehicles and exchanged particulars. No ambulance or police was at scene.

On the same day, I went to the private clinic, 'One Doctors' in Punggol Waterway Point at around 1800hrs and I was given a 01 day MC valid on 19/01/2021. Last night I experienced some pain at the back hence, later today I went to the same clinic at around 1500hrs and I was being issued 04 days from 19/01/2021 - 22/01/2021 MC no: OP0000041175. I suffered neck and shoulder sprain after the incident as verified by the doctor.

There is an in-car camera footage and I have submitted the footage to my insurance company Great Eastern.

The purpose of lodging this police report is to make vehicle and medical insurance claim.



SINGAPORE
POLICE FORCE



T/20210119/2086

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

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Report No. T/20210119/2086

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 Phua Yuying	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/01/2021 17:01
Officer In Charge Of Case: TP / AEIT / Insp BOON YEN KIAN Contact No: 65476172  Authentication Stamp NP168  SN 158 SIGNATURE	Classification Of Case: