





# 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	29/01/2021 16:51 (SGT)
Date of Accident	13/01/2021 14:25 (SGT)
Exact Location of Accident	Marina Boulevard, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA6945Z
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANDREW LEE
NRIC No	SXXXX609E
Email Address	andrew81643@gmail.com
Mobile Phone No	(Phone) +65-97305070
Alternative Phone No	+65-97305070

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	320i
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 - Reporting only
Vehicle Category	Private car

### INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5077131380-04
Cover Note Number	-

### DRIVER

Name of Driver	ANDREW LEE
NRIC No	SXXXX609E

Date Of Driving Pass .....	08/06/2001
Driving experience .....	19 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97305070
Alt. Phone Number .....	+65-97305070
Email Address .....	andrew81643@gmail.com
Address .....	38B JALAN MAT JAMBOL #02
Address complement .....	-
Postcode .....	-
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

#### 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 .....	SLS8444H
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	GUAH BOON LEONG
NRIC No .....	SXXXX609E
Contact Number .....	(Phone) +65-97938228
Address .....	-
Address complement .....	-

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



## 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  
29/1/2021

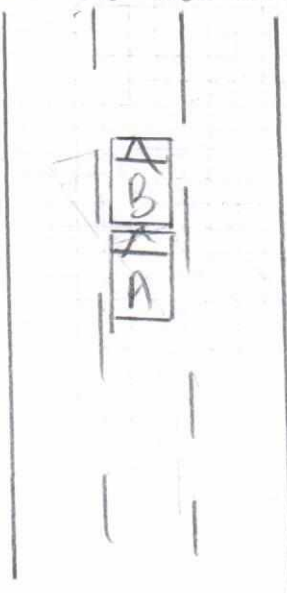
Sketch Plan

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

Witnessed by Reporting Centre Personnel  
29/01/2021

MARINA BOULEVARD

Time: 10.30 am



A) SKA 6545Z

B) SLS 8444H




Describe Circumstances of the Accident

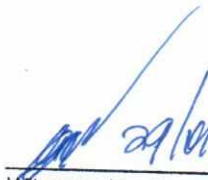
I WAS DRIVING DOWN MARINA  
BOULEVARD APPROACHING THE  
TRAFFIC LIGHT THAT WAS RED.  
AS I NOTICED THAT THE  
TRAFFIC LIGHTS ON THE  
~~CROSS~~ INTERSECTION ROAD  
WAS HAD TURNED ORANGE AND  
SO GOING TO TURN RED AND  
SO I STOPPED DECELERATING AS  
I EXPECTED THE FRONT CAR  
TO START ACCELERATING.  
AT THAT MOMENT, I WAS  
WAS DISTRACTED AND WHEN  
I LOOKED UP, THE FRONT CAR  
HAD NOT MOVED FORWARD  
QUICKLY ENOUGH SO I RAN  
INTO ITS REAR CAUSING  
MINOR DAMAGE TO ITS BUMPER  
BAR.

Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date &  
Time  
24/1/2021  
10:30 am

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

  
24/1/2021  
Witnessed by Reporting Centre  
Personnel



## ACCIDENT STATEMENT

ACCIDENT DATE: 15/1/2021 (DD/MM/YYYY), TIME: 14:30 (HH:MM)

LOCATION: MARINA BOULEVARD

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKA 69457  
b) INSURANCE COMPANY: NTUC INCOME  
c) POLICY NUMBER: 5077131380-04  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: BMW  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- A) NAME: ANDREW LEE (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S6968609E CONTACT: 97305070  
c) ADDRESS: #02-20, JALAN MAT JAMBOL

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

#### DRIVER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 20/4/1969 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) ACCOUNTANT

f) DATE OF DRIVING PASS 1987

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: SELF OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) CLEAR

b) ROAD SURFACE: (DRY / WET / OTHERS) DRY

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

### 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLS 8444 H MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: QUAH BODN LEONG  
c) NRIC/FIN/PASSPORT: S6968609E CONTACT: 97938228

### 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email = andrew81643@gmail.com  
VIDEO



**SINGAPORE  
POLICE FORCE**

Traffic Police  
Singapore Police Force  
10, Ubi Avenue 3  
Singapore 408865  
Tel : 6547 0000  
Fax : 6547 6259

Date : 20 Jan 2021

Your Ref :  
Our Ref : TP/IP/03337/2021

000017

ANDREW LEE  
38B JALAN MAT JAMBOL  
#02-20  
SINGAPORE 119520



Dear Sir / Madam,

**CASE OF TRAFFIC ACCIDENT INVOLVING SKA6545Z ALONG MARINA BOULEVARD ON 13 JAN  
2021 @ 2.25 PM**

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

2 IF you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (<http://www.police.gov.sg/epc>).

3 Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.

4 You may contact the Investigation Officer MD RIZWAN BIN KAMALUDIN at his / her office number: 65476185 or the supervisor YIP YEW SENG NELSON at 65476182 if you have any further queries.

5 Thank you.

Yours faithfully,

PUTEH BTE SHARIFF (SUPT)  
CHIEF INVESTIGATION OFFICER  
INVESTIGATION BRANCH  
TRAFFIC POLICE

This is computer generated and does not require a signature.



## Claim Handling

## Accident MT/1117847

Policy No.	5077131380-04	Vehicle No.	SKA6945Z	GST Registration No.
Certificate No.				
Policyholder Name	ANDREW LEE			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire

## ▼ Accident Details

Report Date	19/01/2021 07:43	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	13/01/2021	Time of Accident hh:mm	14:26	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	JUNCTION OF MARINA BOULEVARD AND SHEARES AVE			

## ▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	600.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0			
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00	

## ▼ Benefits

## ▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	38B JALAN MAT JAMBOL	Address 2	#02-20 ISLAND VIEW	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5077131380-04	

## ▼ OI Driver Info

Driver Name	ANDREW LEE	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	F0136783T	Driver DOB
Register Date of Driver License	01/01/2000	Driver Age	51	Driving Experience
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)
Address 1		Address 2		Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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## Modification History

Claim 002

New

Claim Type *	OD-MX	Insured Name	ANDREW
Contact No.(Mobile)	97305070	Contact No. (Home)	6345315
Email Address		Vehicle Number	SKA6945
Claim Description	SKA6945Z / SLS8444H ON 13 Jan 2021		
Preferred Workshop	Yes	Insured Liability	Fully at Fault
Contact No. Finalisation		Repair Option	Preferred Workshop, Name unknown
Date Registered	29/01/2021 17:51	GIA report	Received
		Claim Close Date	

Report Taken By

ROS LI WAHAB

☒ Print AK letter

Save Submit

## Attachment

Accident No. MT/1117847 Claim No. 002  
 Last Doc. Received ☒ Yes ☐ No Upload Date 29/01/2021 17:59

















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Category \* Confidential  
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## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:59	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:59	Photos	Normal	Photos 2
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:59	Photos	Normal	Photos 2
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:55	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:55	Photos	Normal	Photos 2
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:51	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:51	Photos	Normal	Photos 2
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:51	NRIC/ Driving License	Y	NRIC/ Driving Li
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2021 17:51	SAS	Normal	SAS 20



Video List

Uploaded By/Date	Folder Date	File Name	
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Display in New Window

Scan and uploading

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5077131380-04

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SKA6945Z**  
Chassis Number : WBAPG56060NM26323
2. Name of Policyholder : ANDREW LEE
3. Effective Date of Insurance : 25 Mar 2020
4. Expiry Date of Insurance : 24 Mar 2021
5. Persons or Classes of Persons entitled to drive#  
(a) The Policyholder.  
(b) Any other person who is driving on the Policyholder's order or with his/her permission.  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.


# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: ANDREW LEE
NAMED DRIVER (1)	: YIDA LEE
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : TELESALLES-DIRECT MARKETING (00000601661)  
Date of Issue : 28 Feb 2020 20:57 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive