

# 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 ..... 23/02/2021 15:55 (SGT)  
Date of Accident ..... 22/02/2021 18:10 (SGT)  
Exact Location of Accident ..... KPE, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLN2059C

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LIM HAN WEI  
NRIC No ..... SXXXX509C  
Email Address ..... IVANO850@HOTMAIL.COM  
Mobile Phone No ..... (Phone) +65-98295587  
Alternative Phone No ..... +65-98295587

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... Forte  
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 ..... Liberty Insurance  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... SI20V04745/VPE/R01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... LIM HAN WEI  
NRIC No ..... SXXXX509C  
Date Of Birth ..... 20/03/1985  
Occupation ..... Outdoor

Date Of Driving Pass .....	18/01/2011
Driving experience .....	10 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-98295587
Alt. Phone Number .....	+65-98295587
Email Address .....	IVANO850@HOTMAIL.COM
Address .....	BLK 50 ANCHORVALE CRESCENT #06-04
Address complement .....	-
Postcode .....	544629
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) .....	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 2

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 3

Name .....	UNKNOWN
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bedok North Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002449999
Alt. Police Station Phone No .....	(Fax) +65-62447258
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210223/2037

#### 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 ..... SLJ3052K  
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) ..... -

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person ..... UNKNOWN  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... HEAD  
Injured person in which vehicle? ..... SLN2059C  
Were seat belts worn? ..... No  
Was this injured conveyed to hospital by ambulance? ..... No

SKETCH PLANIMPORTANT 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.

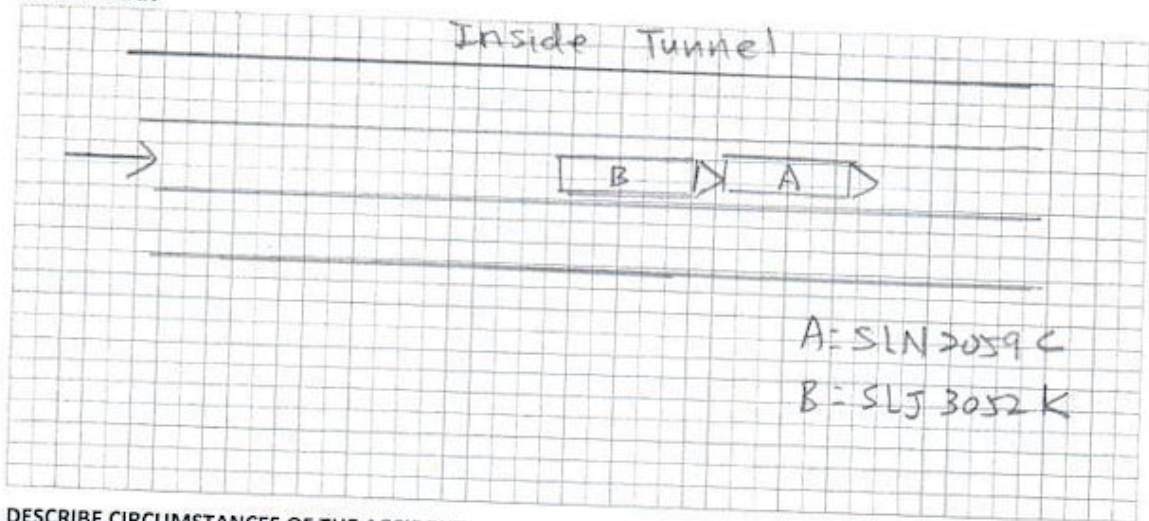
Policyholder's Signature  
Date & Time: 23/2/2021

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

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



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS per Police Report No. T/20210223/2037.

DECLARATION

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

Policyholder's Signature  
Date & Time:

23/2/2021

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

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























**SINGAPORE  
POLICE FORCE**



T/20210223/2037

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

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Report No. T/20210223/2037

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/02/2021 13:04	Vide Report No.:	Station Diary No.: 42
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**Informant's Particulars**

Name of Informant: LIM HAN WEI			Address: APT BLK 50 ANCHORVALE CRESCENT #06-04 SINGAPORE 544629		
ID Type / ID No.: NRIC NO / S8508509C			Contact No.: Home/Office: Mobile: 98295587		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 35	Date of Birth: 20/03/1985	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES EXECUTIVE			Driving Licence Information: Class: 2B,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/02/2021 18:10	Type of Location: Straight Road
Location:  KALLANG PAYA LEBAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SLJ3052K	Car	CHEVROLET		White	Slightly Damaged	1
SLN2059C	Car	KIA	K3	Grey	Slightly Damaged	4

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLJ3052K	NTUC Income Insurance Co-Operative Limited			



**SINGAPORE  
POLICE FORCE**



T/20210223/2037

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

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Report No: T/20210223/2037

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLN2059C	LIBERTY INSURANCE PTE LTD			

**Brief Details.**

On 22/02/2020 at about 6.12pm, I was driving my vehicle (Grey coloured Kia Forte K3, Registration No: SLN2059C) along Kallang-Paya Lebar Expressway (KPE) towards Tampines Expressway (TPE). I was inside the tunnel when the vehicle in front of me started to slow down. I did the same and put on the brakes to slow down. Suddenly, the vehicle behind me hit the rear of my vehicle as the driver could not stop on time.

The vehicle behind me is one White coloured Chevrolet (Registration No: SLJ3052K). There were 3 other passengers in my vehicle (my mother-in-law, my wife and my 5-month old son). My son was seated in the baby seat throughout our journey from Ubi, but at that point of time, my mother-in-law was carrying him as she had to feed him. There was no other passengers inside the white Chevrolet.

We stopped our vehicles a few metres forward to assess the damage on our vehicles. There are scratches on the bottom rear bumper of my vehicle and left rear side plate of the body was slightly damaged. The white Chevrolet vehicle's license plate was dislodged and a piece of it was stuck on my vehicle.

We exchanged particulars and left the place shortly afterwards. There was no damage to any government property and no ambulance or police were at scene.

No one was injured at that point of time. However, I noticed that there were some redness of the left side of my son's cheek which could have happened due to the impact of the accident. We then brought him to Parkway Pantai Hospital and his discharge diagnosis was a "Superficial injury of head, part unspecified, contusion".

I wish to state that there are 2 in-car camera inside my vehicle, one facing the front and one facing the rear. I have a video recording of the incident.



**SINGAPORE  
POLICE FORCE**



T/20210223/2037

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Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

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Report No. T/20210223/2037

**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 MIMI NURDALILAH SARI BINTE  
SAMSURI

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
23/02/2021 13:04

Officer In Charge Of Case:  
TP / AEIT /  
SSI TAY CHUN KEEN  
Contact No.: 65476229

Classification Of Case:

Authentication Stamp  
NP168