

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 11/03/2021 09:26 (SGT)
Date of Accident 10/03/2021 10:20 (SGT)
Exact Location of Accident Singapore
Additional Location Information SERANGOON AVENUE JUNCTION
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX3369L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner FREDA POH YA HUI
NRIC No SXXXX925A
Email Address FREDAAPOH@GMAIL.COM
Mobile Phone No (Phone) +65-90275748
Alternative Phone No +65-90275748

VEHICLE PARTICULARS

Manufacturer Kia
Model KIA / CERATO K3 1.6A SUNROOF
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 5120776253
Cover Note Number -

DRIVER

Name of Driver FREDA POH YA HUI
NRIC No SXXXX925A
Date Of Birth 04/11/1993
Occupation Indoor

| | |
|--|---|
| Date Of Driving Pass | 12/09/2013 |
| Driving experience | 7 YEARS AND 6 MONTHS |
| Gender | Female |
| Mobile Number | (Phone) +65-90275748 |
| Alt. Phone Number | +65-90275748 |
| Email Address | FREDAAPOH@GMAIL.COM |
| Address | 509 CANBERRA DRIVE #02-22 CANBERRA RESIDENCES |
| Address complement | - |
| Postcode | 768128 |
| 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 | Ang Mo Kio Division Headquarters |
| Police Station Phone No | (Phone) +65-18002180000 |
| Alt. Police Station Phone No | (Fax) +65-64814246 |
| Police Station Address | 51 Ang Mo Kio Avenue 9 Singapore 569784 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT No.F/20210311/762;

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 | SFK7071U |
| Vehicle Manufacturer | Subaru |
| Vehicle Model | SUBARU / FORESTER 2.0I-L CVT AWD SR |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | NG CHEE SEONG |
| NRIC No | SXXXX170D |

| | |
|---|----------------------|
| Contact Number | (Phone) +65-96862170 |
| 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 | FREDA POH YA HUI |
| Address | 509 CANBERRA DRIVE #02-22 CANBERRA RESIDENCES |
| Address Complement | - |
| Post Code | 768128 |
| Approximate Age Years Old | 27 |
| Injuries Sustained | - |
| Injured person in which vehicle? | SMX3369L |
| 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 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.

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

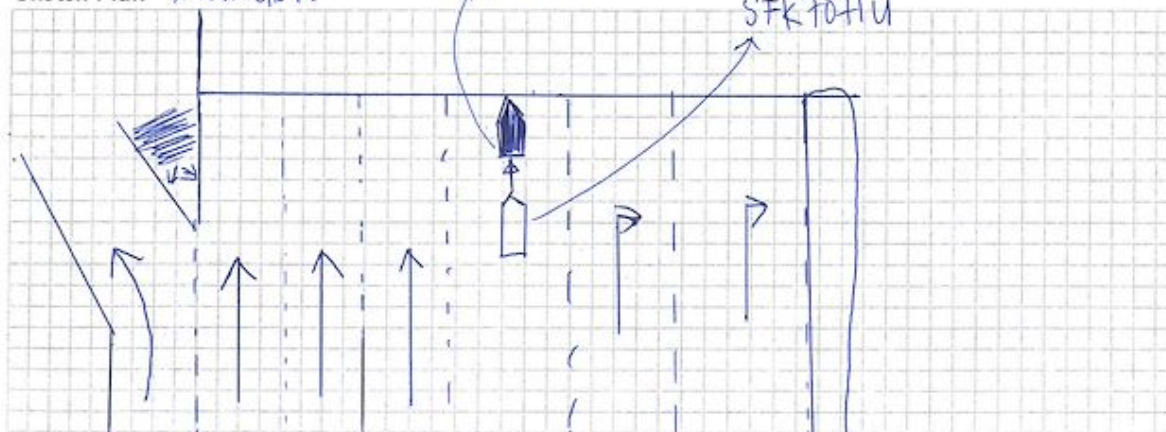
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

11 MAR 2021

Sketch Plan x Junction



Describe Circumstances of the Accident

On 10/3/2021, Was driving along Serangoon North Ave 1, towards the traffic junction at about 10:20am when the traffic lights turned amber then red, I slowed down and stopped my car. However, the vehicle behind car plate SFK 7071U which was still quite a distance away, apparently did not slow down at all, which he eventually e-brake and ran into the back of my car. My car moved forward quite a bit due to the big impact and I was almost in the middle of the junction.

Driver of SFK 7071U then alighted his car to check if anyone is injured. Neither my dog or myself was injured in this accident.

Declaration

We declare the foregoing particulars are true in every respect.



11/03/2021

Policyholder's Signature / Date & Time

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

Witnessed by Reporting Centre
Personnel

11/03/2021



















**SINGAPORE
POLICE FORCE**



F/20210311/7062

1 of 2

POLICE REPORT (NP299)

Report No. F/20210311/7062

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2180000

| | | |
|--|---|---------------------|
| Date/Time Report Made 11/03/2021 22:12 | Vide Report No. | Station Diary No. |
| Name Of Informant FREDA POH YA HUI | Address 509 CANBERRA DRIVE #02-22 SINGAPORE 768128 | |
| ID Type / ID No. NRIC NO / S9341925A | Contact No. Home/Office: | Mobile: 90275748 |
| Nationality SINGAPORE CITIZEN | Email Address FREDAAPOH@GMAIL.COM | |
| Occupation Other insurance representatives | Sex Female | Age 27 |
| Institution/School Name | Date of Birth 04/11/1993 | Race Chinese |
| Date/Time Of Incident 10/03/2021 10:20 - 10/03/2021 10:20 | Location Of Incident ANG MO KIO AVENUE 3 | |

Brief details.

On 10/3/2021, I, Freda Poh Ya Hui S9341925A, Vehicle SMX3369L Was driving along Serangoon North Ave 1, towards the traffic junction at about 10:20am when the traffic lights turned amber then red, I slowed down and stopped my car. However, the vehicle behind car plate SFK 7071U which was still quite a distance away, apparently did not slow down at all, which he eventually e-brake and ran into the back of my car. My car moved forward quite a bit due to the big impact and I was almost in the middle of the junction.

Driver of SFK 7071U then alighted his car to check if anyone is injured. Initially, I did not feel anything on

| | |
|--|--|
| Signature Of Officer Recording The Report: Not applicable | Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter: Not applicable | Date/Time: 11/03/2021 22:12 |
| Officer In-Charge Of Case: | Classification Of Case: |

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20210311/7062

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20210311/7062

the same day of the accident. However, the following morning 11/03/2021, I woke up with neck, shoulder and lower back pain and vomited twice. I also could not sleep well the night before as I was traumatized by the accident and kept having nightmares of having a car collision. So I decided to go Khoo Teck Phuat hospital A&E to have a proper check done. I am suppose to go for my x-ray however the doctor told me that one of the tests conducted shows that I'm pregnant and could not proceed to have an X-ray done. I was given 3 days MC to rest as i could not sit in the same position for a long time as my back and neck hurts.

| Subjects Involved | | | |
|-------------------|---------------------------------|---------------------------|---|
| Victim | | | |
| Person Name | FREDA POH YA HUI | | |
| ID Type | NRIC NO | ID No | S9341925A |
| Gender | Female | Age | 27 |
| Race | Chinese | Language | English |
| Occupation | Other insurance representatives | Address | 509 CANBERRA DRIVE #02-22 SINGAPORE 768128 |
| Mobile No | 90275748 | Is Informant A Victim? | Yes |
| | | | |
| Person Name | FREDA POH YA HUI (Informant) | | |

| | |
|--|--|
| Signature Of Officer Recording The Report: Not applicable | Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter: Not applicable | Date/Time: 11/03/2021 22:12 |
| Officer In-Charge Of Case: | Classification Of Case: |
| Authentication Stamp | |



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: _____ Vehicle Registration No: SMX3369X

Name (as shown in NRIC): Freda Poh Ya Hui NRIC/FIN/Passport No: S9341925A

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: 509 Canberra Drive #02-22 Singapore (768128)

Contact (Tel): _____ Mobile No.: 90275748

Email Address: Fredaaapoh@gmail.com

Date of Accident: 10/03/2021 Time of Accident: 10.20am

Place of Accident: Along Ang Mo Kio Ave 3 and Serangoon North Ave 1 Cross Junction

Insurance Company: NTUC Income

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Additional Information which I had made in a police report on 11/03/2021: I did not feel anything on the same day of the accident. However, the following morning 11/03/2021, I woke up with neck, shoulder and lower back pain and vomited twice. I also could not sleep well the night before as I was traumatised by the accident and kept having nightmares of having a car collision. So I decided to go to Khoo Teck Phuat Hospital A&E to have a proper check done. I was suppose to have x-ray done however the Doctor told me one of the tests conducted shows that I'm pregnant and could not proceed to have an x-ray done. I was given 3 Day MC to rest as I could not sit in the same position for a long time as my back and neck hurts.

Policyholder / Driver's Signature
Date: 12/03/2021

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

Reporting Centre Personnel's Signature
Name: _____

12 MAR 2021