

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 19/03/2021 10:07 (SGT)
Date of Accident 18/03/2021 08:47 (SGT)
Exact Location of Accident SLE, Singapore
Additional Location Information ALONG SLE TOWARDS BKE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDD131L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner GUI KIAN HOE
NRIC No SXXXX367J
Email Address HILD77@HOTMAIL.COM
Mobile Phone No (Phone) +65-97937790
Alternative Phone No +65-97937790

VEHICLE PARTICULARS

Manufacturer Nissan
Model X-trail
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
Transmission Auto
CC 1997

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number PNPV2020-00006373
Cover Note Number 29/05/2020 - 28/05/2021

DRIVER

Name of Driver GUI KIAN HOE
NRIC No SXXXX367J

Date Of Birth	28/02/1977
Occupation	Indoor
Date Of Driving Pass	01/06/2000
Driving experience	20 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97937790
Alt. Phone Number	+65-97937790
Email Address	HILD77@HOTMAIL.COM
Address	308C PUNGGOL WALK
Address complement	#08-348
Postcode	823308
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SAMANTHA
Gender	Female

PASSENGER 2

Name	KYAN GUI
Gender	Male

PASSENGER 3

Name	KYROS GUI
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE SKETCH PLAN BY DRIVER

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? Yes
 Reasons for not uploading a video of the accident CAMERA WITH TRAFFIC POLICE
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLB1369C
 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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number UNKNOWN
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Motorcycle
 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) -

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number UNKNOWN
 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 RIDER

Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	ABRASION
Injured person in which vehicle?	UNKNOWN
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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:

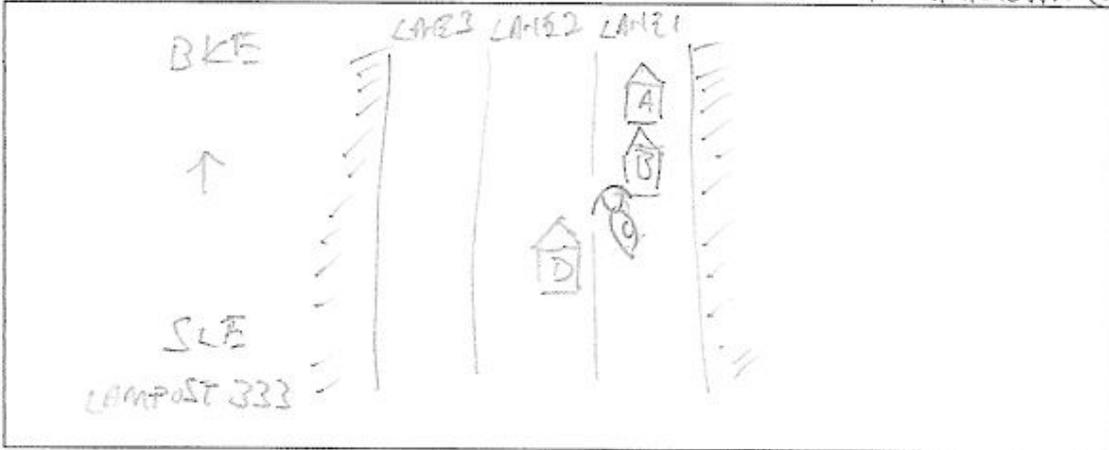
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 19/12/21 16:00hrs

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


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

Date of accident: 18/03/21 Time: 047 Location: Mony SLG
 My Vehicle A: SDD131L Vehicle B: PLB136AC Vehicle C: UNKNOWN (M3)
 SKETCH PLAN P: UNKNOWN (CAR)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DATE : 18/03/21
 TIME : 0847 hrs.
 I AM THE DRIVER OF VEHICLE SDD131L, A NISSAN X-TRAIL.
 I WAS TRAVELING ON SLE TOWARDS BKE, ON THE LANE 1.
 THE VEHICLES AHEAD OF ME SUDDENLY STOPPED, AND I MANAGED TO
 BRAKE IN TIME, HOWEVER, THE VEHICLE BEHIND ME ~~WAS~~ HIT
 ONTO MY VEHICLE.
 THE THIRD MOTORCYCLE THEN HIT ONTO THE SECOND CAR AND THE
 MOTORCYCLE SWING TO LEFT AND HIT ANOTHER VEHICLE.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks : Please forward a copy of my efile accident report to :
 My workshop :
 Email address :
 & myself :
 Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time: 18/03/21
1630hrs

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

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



AHLIMMOTOR COMPANY









































**SINGAPORE
POLICE FORCE**



T/20210318/7034

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210318/7034

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/03/2021 20:12	Vide Report No.: L/20210318/0040	Station Diary No.:
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Informant's Particulars

Name of Informant: GUI KIAN HOE		Address: 308C PUNGGOL WALK #08-348 SINGAPORE 823308	
ID Type / ID No.: NRIC NO / S7705367J		Contact No.: Home/Office: Mobile: 97937790	
Nationality: SINGAPORE CITIZEN		Email: hild77@hotmail.com	
Sex: Male	Age: 44	Date of Birth: 28/02/1977	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Operations officer (except transport operations)		Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/03/2021 08:45	Type of Location: Straight Road
Location: SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: Two 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	Conditio	No of
SDD131L	Car	NISSAN	X-TRAIL 2.0 CVT	Black	Slightly Damaged	4

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDD131L	FWD Singapore Pte. Ltd	PNPV2020-00006373	29/05/2020	28/05/2021



**SINGAPORE
POLICE FORCE**



T/20210318/7034

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210318/7034

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GUI KIAN HOE	ID No.	S7705367J
Related Vehicle	SDD131L (Car)	Contact No.	97937790
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3,4 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Rider			
Name	Unknown Rider	ID No.	NIL
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Serious

Brief Details.

The accident happened along SLE towards BKE, between Upper Thomson Rd exit and Mandai Rd exit near to Lamppost Number 333.

I was driving my vehicle SDD131L (a black Nissan X-Trail) on the Lane 1 of SLE towards BKE.

At the time of accident, the vehicles ahead of me suddenly stopped, and I managed to brake in time, however, the vehicle behind me (a blue Suzuki Swift) hit onto my vehicle.

Then a motorcycle hit onto the vehicle behind me, the motorcycle swerved left and hit another vehicle (a beige Toyota Vios) travelling on Lane 2.

I saw the motorcyclist laying unconsciously on the road and I immediately called the Police for assistance, and ambulance were deployed.

The ambulance arrived around 9:10am, the paramedics tends to the motorcyclist and brought him to hospital.

The vehicles involved were then led to a carpark in Woodlands where the Traffic Police Officer took our particulars and statements.



**SINGAPORE
POLICE FORCE**



T/20210318/7034

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210318/7034

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
LEE GUANG HUI
Contact No.: 65476138

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
18/03/2021 20:12

Classification Of Case:



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.
All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2020-00006373 (Comprehensive - Classic Plan)

Car plate number: SDD131L

Your name (As the policyholder): Gui Kian Hoe

Coverage start date: 29/05/2020

Coverage end date: 28/05/2021

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company:Tokyo Century Leasing (Singapore) Pte Ltd

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 19/05/2020

Khor Kee Eng
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888
or email us at contact.sg@fwd.com if any details
in this Certificate of Insurance need to be changed.