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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 23/03/2021 17:16 (SGT) Date of Accident 22/03/2021 17:55 (SGT) Exact Location of Accident Braddell Rd, Singapore Additional Location Information TWDS BARTLEY RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMH7526H

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner **LEONG SUSAN** NRIC No. SXXXX139Z

Email Address CYBO2803@YAHOO.COM.SG

Mobile Phone No (Phone) +65-97327933

Alternative Phone No +65-97327933

VEHICLE PARTICULARS

Manufacturer Mazda

Model Cx-3

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 1496

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd

Type of Coverage Comprehensive

Fleet Policy

Policy Number 5120677139

Cover Note Number

DRIVER

Name of Driver SIM KIANG SONG NRIC No. SXXXX957H

Date Of Birth 28/02/1956 Occupation Indoor Date Of Driving Pass 18/02/1978 Driving experience 43 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-97219859 Alt. Phone Number Email Address CYBO2803@YAHOO.COM.SG Address BLK 245 TAMPINES ST 21 Address complement #04-325 Postcode 521245 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Spouse 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 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Nο Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT:T/20210323/7012 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 SD CARD WITH TRAFFIC POLICE Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number **SLF4026B** Vehicle Manufacturer Vehicle Model

Vehicle Variant
Vehicle Colour

Vehicle Category	Private car
Name of Driver	TAN JIAN YUAN
NRIC No	SXXXX925B
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

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SHD4492X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	KAMSANI BIN MANAP
NRIC No	SXXXX960A
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	SIM KIANG SONG
Address	_
Address Complement	_
Post Code	_
Approximate Age Years Old	_
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SMH7526H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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.
- 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.
- 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. The 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.
- 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)

Lunderstand, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

Sketch Plan

Valuate A: SMH75>6H

Vehicle B: S1F40>6B

Vehicle C: GBF>689A

Vehicle D: SHD 4492X

BRADOFIL RDAD

Towards Bavtley Road.

INIAS	travelling along Lornie Viaduct towe	ards Braddell, Vehicle in
1 .	followed to slow down and came to a sto	P
ont of me stopped,	travelling along Lornie Viaduct towo followed to slow down and came to a sto . Out of sudden, I felt a huge	impact from my rear
ausing me to	thrust forward and hit onto the	vehicle D in front of
ne. When I we	ent down to check, I realised 1	was involved in a
t vehicles chair	collision.	
The second second		
claration		
le declare the foregoing partic	culars are true in every respect.	
	0 /	7
		and the second s
	871	Agm 23/02/21



T/20210323/7012

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210323/7012

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL Use of F				Pedestrian Crossing: NA		
Driver						
Name	SIM KIANG SONG			ID No.	S1198957H	
Related Vehicle	SMH7526H (Car)			Contact No.	97219859	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL		Date	NIL	V	
No. of Days gran	ted Medical Leave	NIL	Degree of	Sligh	t	

Brief Details.

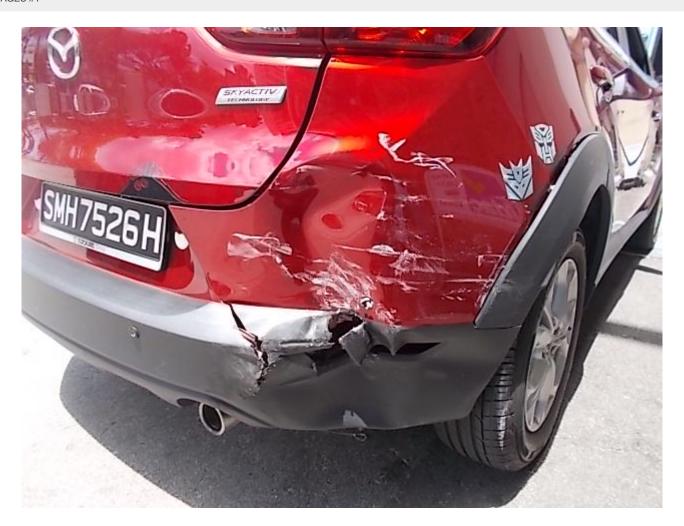
On 22 March 2021, at about 1755hrs. I was travelling along Lornie Viaduct towards Braddell Road in my vehicle (SMH7526H). A Vehicle (SHD4492X) in front of me stopped, I followed to slow down and came to a stop when out of sudden, I felt a huge impact from my rear causing me to thrust forward and hit onto the vehicle infront of me. When I came down to check and I realized that vehicle (SLF4026B) had hit me from my back and I was involved in a 4 vehicle chain collision. The last vehicle was (GBF5689A).

This incident has been captured by my in car camera and the SD card has been handed over to the traffic police that attended to the scene.

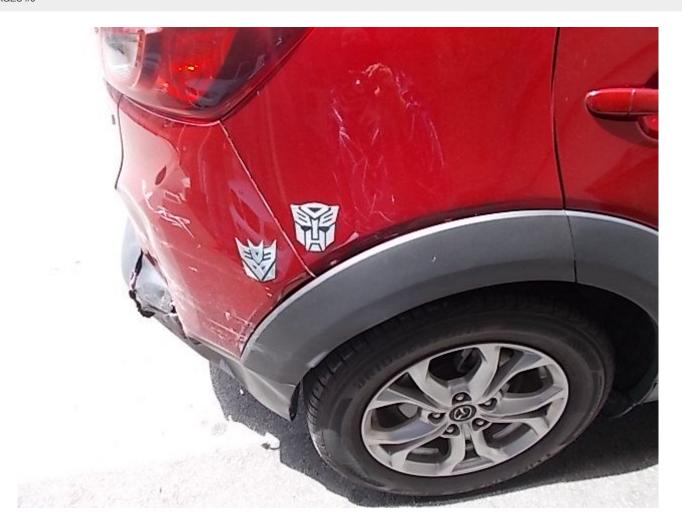








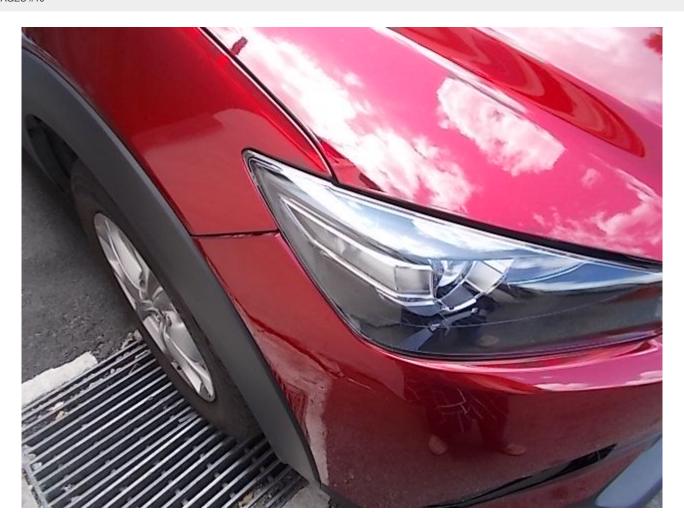


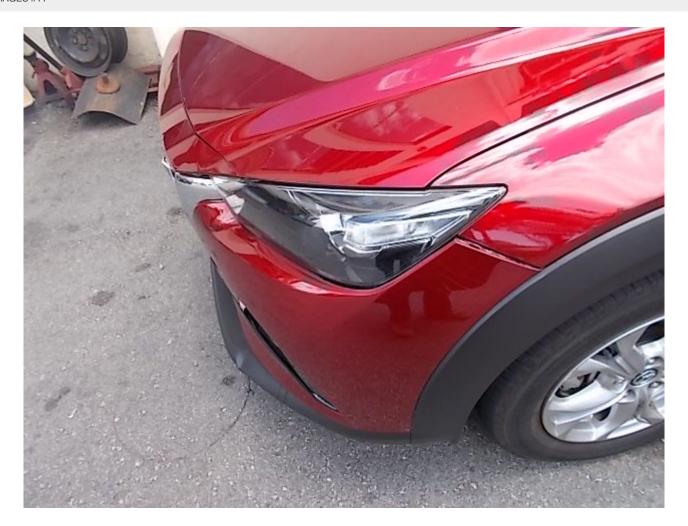


















T/20210323/7012

1 of 3 Report No. T/20210323/7012

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2021 12:00			Vide Report No.: E/20210322/0124	Station Diary No.:		
Informa	nt's Particu	ulars				
Name of	Informant: NG SONG		Address: 245 TAMPINES STREET 21 #04-325 SINGAPORE 5			
ID Type / ID No.: NRIC NO / S1198957H			Contact No.: Home/Office:	Mobile: 97219859		
Nationality: SINGAPORE CITIZEN			Email: cybo2803@yahoo.com.sg			
Sex: Male	Age: 65	Date of Birth: 28/02/1956	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Retiree			Driving Licence Information: Class:	Date of Expiry:		

Type of Accident:	Attended by Folice		Date/Time of Accident: 22/03/2021 17:55	Type of Location Straight Road
Location: BRADDELL F	ROAD	Road Surface:		Road Speed Limit:
Weather: Clear		Dry		
raffic Flow: Traffic Control		Traffic Control:		Traffic Volume: Moderate
Traffic Flow: One Way		NOT COULT OHER		

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBF5689A	Van	TOYOTA				0
SHD4492X	Car	HYUNDAI				0
SLF4026B	Car	HONDA				0
SMH7526H	Car	MAZDA	CX-3	Red	Seriously Damaged	0



T/20210323/7012

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210323/7012

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL Use of F				Pedestrian Crossing: NA		
Driver						
Name	SIM KIANG SONG			ID No.	S1198957H	
Related Vehicle	SMH7526H (Car)			Contact No.	97219859	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL		Date	NIL	V	
No. of Days gran	ted Medical Leave	NIL	Degree of	Sligh	t	

Brief Details.

On 22 March 2021, at about 1755hrs. I was travelling along Lornie Viaduct towards Braddell Road in my vehicle (SMH7526H). A Vehicle (SHD4492X) in front of me stopped, I followed to slow down and came to a stop when out of sudden, I felt a huge impact from my rear causing me to thrust forward and hit onto the vehicle infront of me. When I came down to check and I realized that vehicle (SLF4026B) had hit me from my back and I was involved in a 4 vehicle chain collision. The last vehicle was (GBF5689A).

This incident has been captured by my in car camera and the SD card has been handed over to the traffic police that attended to the scene.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20210323/7012

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report ha been authenticated by SingPass. No signature required.
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2021 12:00
Officer In Charge Of Case: TP / TPIB / INTAN WULANDARI BUDDY SANTOSO Contact No.: 65476256	Classification Of Case:
Authentication Stamp	

NP168