

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 16/04/2021 13:30 (SGT)
Date of Accident 15/04/2021 18:10 (SGT)
Exact Location of Accident Singapore
Additional Location Information PIE TWRDS BKE(CHANTEK FLYOVER)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW6688B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LEOW CHEE LOON
NRIC No SXXXX468F
Email Address jasonkcapl@gmail.com
Mobile Phone No (Phone) +65-83239898
Alternative Phone No +65-83239898

VEHICLE PARTICULARS

Manufacturer BMW
Model B.M.W. / X6 XDRIVE35I AWD SR DSC NAV HUD LED
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 3000

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5118342818
Cover Note Number -

DRIVER

Name of Driver LEOW CHEE LOON
NRIC No SXXXX468F

Date Of Birth	03/08/1981
Occupation	Indoor
Date Of Driving Pass	29/12/2003
Driving experience	17 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83239898
Alt. Phone Number	+65-83239898
Email Address	jasonkcapl@gmail.com
Address	2 PETIR ROAD #13-07 MAYSPRINGS SINGAPORE 678265
Address complement	-
Postcode	678265
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	Raining
Road Surface	Wet

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	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT No.J/20210415/7049;

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	SLR454L
Vehicle Manufacturer	Nissan
Vehicle Model	NISSAN / NOTE 1.2 DIG-S CVT
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	KARIN ONG HUI YI
NRIC No	SXXXX958C
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	LEOW CHEE LOON
Address	2 PETIR ROAD #13-07 MAYSPRINGS
Address Complement	-
Post Code	678265
Approximate Age Years Old	39
Injuries Sustained	-
Injured person in which vehicle?	SMW6688B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	-

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8. **Consent under the Personal Data Protection Act (PDPA)**

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415938 -
Tel: 67416697 Fax: 67492305
Email: vackb@vicom.com.sg

Witnessed by Reporting Centre
Personnel 16 APR 2021

A: SMW 6G88B
B: SLR 454L





















**SINGAPORE
POLICE FORCE**



J/20210415/7049

1 of 1

POLICE REPORT (NP299)

Report No. J/20210415/7049

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 15/04/2021 21:16	Vide Report No.	Station Diary No.		
Name Of Informant LEOW CHEE LOON	Address 2 PETIR ROAD #13-07 SINGAPORE 678265			
ID Type / ID No. NRIC NO / S8126468F	Contact No. Home/Office:	Mobile: 83239898		
Nationality SINGAPORE CITIZEN	Email Address leow.cheeloon@gmail.com			
Occupation Real estate agent	Sex Male	Age 39	Date of Birth 03/09/1981	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 15/04/2021 18:10 - 15/04/2021 18:15	Location Of Incident 2 PETIR ROAD #13-07 SINGAPORE 678265			

Brief details.

I was driving home and just exiting PIE into BKE road. My car plate number SMW6688B a red color BMW was hit on the rear bumper by a white color Nissian car plate SLR 454L driven by Ms Karin Ong Hui Yi S9548958C.

I suffer a whiplash and hit my head to the back of my car seat head rest. I managed to get out of the car to take photos and then signal her to drive to road shoulder to exchange details.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Not applicable	
Signature Of Interpreter: Not applicable	Date/Time: 15/04/2021 21:16
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp