

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 02/06/2021 14:47 (SGT)
Date of Accident 02/06/2021 08:52 (SGT)
Exact Location of Accident Singapore
Additional Location Information NEWTON ROAD TOWARDS THOMSON ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMS6983U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HO HOA KIEM
NRIC No SXXXX030B
Email Address jasonkcapl@gmail.com
Mobile Phone No (Phone) +65-96940858
Alternative Phone No +65-96940858

VEHICLE PARTICULARS

Manufacturer Kia
Model KIA / CERATO 1.6(A) LX
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SD21V03194/VPL/R00
Cover Note Number -

DRIVER

Name of Driver HO HOA KIEM
NRIC No SXXXX030B

Date Of Birth	13/07/1965
Occupation	Outdoor
Date Of Driving Pass	09/09/1993
Driving experience	27 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96940858
Alt. Phone Number	+65-96940858
Email Address	jasonkcapl@gmail.com
Address	BLK 315A YISHUN AVENUE 9 #14-204
Address complement	-
Postcode	761315
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?	No
Was any injured conveyed to hospital by ambulance?	-
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	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

AS POLICE REPORT No.T/2021060/7014;

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	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	S6550CD
Vehicle Manufacturer	Mazda
Vehicle Model	MAZDA / MAZDA5 WAGON 2.0 AT EU6
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)	-

SKETCH PLAN

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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' 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.

IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4 #02-02
 Singapore 415933
 Tel: 674-16697 Fax: 674-92305
 Email: vackb@vicom.com.sg



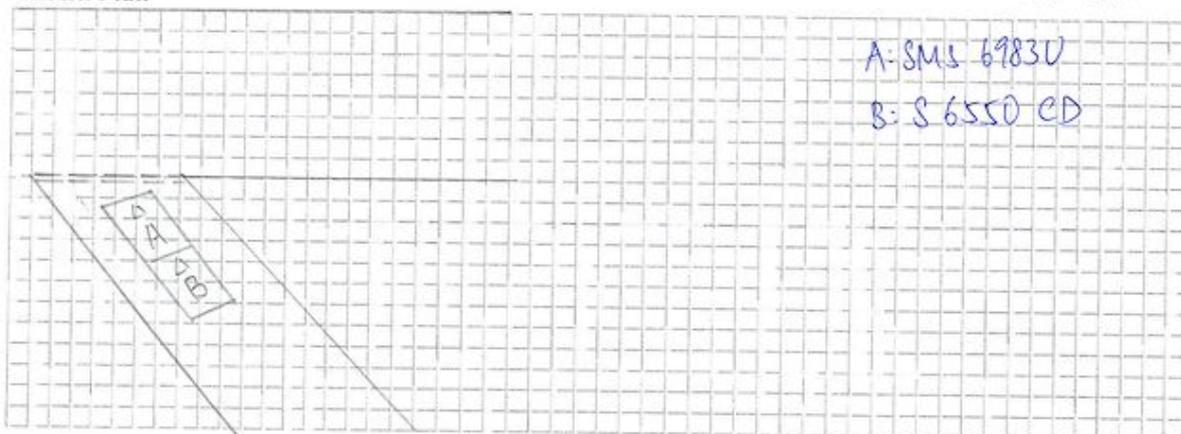
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel 02 JUN 2021

Sketch Plan



Describe Circumstances of the Accident

On 02-06-2021 at about 08:52AM, I was travelling along Newton Road towards Thomson Road. I was stationary to check for incoming vehicle. Suddenly, vehicle B hit my rear portion.

Declaration

We declare the foregoing particulars are true in every respect.

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



Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel
02 JUN 2021



















**SINGAPORE
POLICE FORCE**



T/20210602/7014

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

1 of 3
Report No. T/20210602/7014

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/06/2021 13:29		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: HO HOA KIEM		Address: 315A YISHUN AVENUE 9 #14-204 SINGAPORE 761315	
ID Type / ID No.: NRIC NO / S1725030B		Contact No.: Home/Office: Mobile: 96940858	
Nationality: SINGAPORE CITIZEN		Email: JACKIEHOHO7@GMAIL.COM	
Sex: Male	Age: 55	Date of Birth: 13/07/1965	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Grab Driver		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Special Vehicle	Drink Drive: No	Date/Time of Accident: 02/06/2021 08:55	Type of Location: Straight Road
Location: NEWTON ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
S6550CD	Car	MAZDA	MAZDA	Blue	Seriously Damaged	0
SMS6983U	Car	KIA	KIA	Blue	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210602/7014

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

2 of 3
Report No. T/20210602/7014

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMS6983U	LIBERTY INSURANCE PTE LTD	CERATO 1.6	19/02/2021	10/03/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	REHAM H S J SH ALGHANIM		ID No.	G1754883U
Related Vehicle	S6550CD (Car)		Contact No.	97775010
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 02/10/2022
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Driver				
Name	HO HOA KIEM		ID No.	S1725030B
Related Vehicle	SMS6983U (Car)		Contact No.	96940858
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

Brief Details.

ON 02/06/2021 AT ABOUT 8:52AM, I WAS TRAVELLING ALONG NEWTON ROAD (FILITER ROAD) TOWARDS THOMSON RD. I WAS STATIONARY BEHIND THE DOUBLE DOTTED LINE LOOKING OUT FOR ONCOMING VEHICLE ON THE MAIN ROAD. SUDDENDLY, VEHICLE NUMBER S6550CD HIT THE REAR OF MY VEHICLE SMS6983U.

NOTE:VIDEO SIZE EXCEED 2 MB.



**SINGAPORE
POLICE FORCE**



T/20210602/7014

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

3 of 3
Report No. T/20210602/7014

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 /
TAN JEOK LENG
Contact No.: 65476151

Authentication Stamp

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

Date/Time:
02/06/2021 13:29

Classification Of Case:

