

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 16/06/2021 09:10 (SGT)
Date of Accident 13/06/2021 21:00 (SGT)
Exact Location of Accident Bedok Reservoir Rd, Singapore
Additional Location Information TOWARDS TAMPINES AVE 10
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGJ9898G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HEE KOK KOON
NRIC No SXXXX898G
Email Address JIAWEI.HEE@HOTMAIL.COM
Mobile Phone No (Phone) +65-96618238
Alternative Phone No +65-96618238

VEHICLE PARTICULARS

Manufacturer BMW
Model X1
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 Liberty Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SD21V04955/VPC/R00
Cover Note Number -

DRIVER

Name of Driver HEE JIA WEI
NRIC No SXXXX571I

Date Of Birth	11/03/1998
Occupation	Indoor
Date Of Driving Pass	07/02/2019
Driving experience	2 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96618238
Alt. Phone Number	-
Email Address	JIAWEI.HEE@HOTMAIL.COM
Address	8 MIMOSA DRIVE
Address complement	-
Postcode	805426
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	3
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	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 POLICE REPORT:T/20210615/7029

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	SLL5019J
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	SME879B
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	HEE JIA WEI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK,LOWER BACK & WRIST
Injured person in which vehicle?	SGJ9898G
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' 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 & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Bedok Reservoir Road



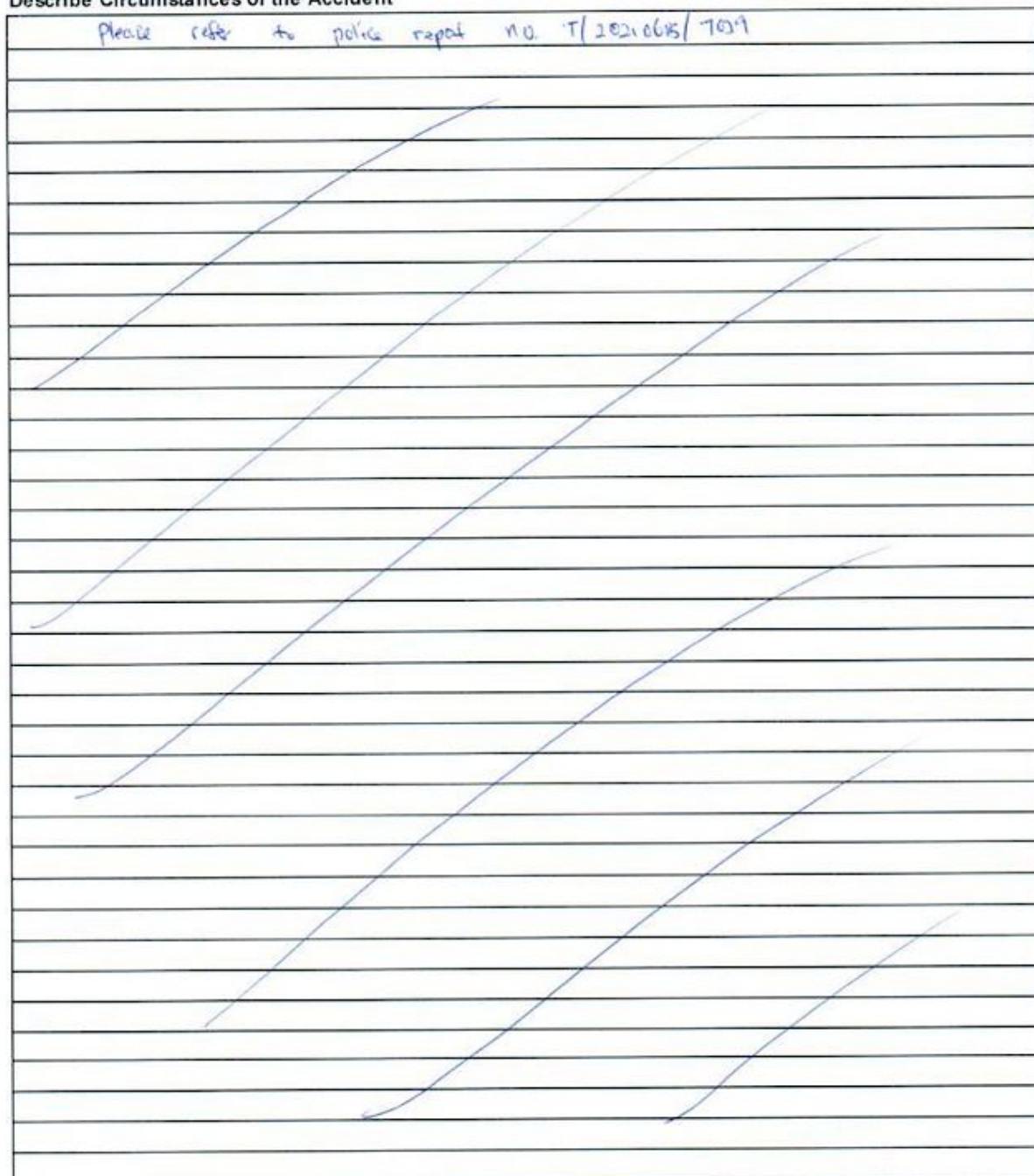
Veh A - SGJ98986

Veh B - SLL 50193

Veh C - SMC 87913

Describe Circumstances of the Accident


Please refer to police report no. T/20210615/7019



Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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

 16/06/21
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20210615/7029

2 of 3

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

Report No. T/20210615/7029

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	HEE JIA WEI	ID No.	S9810571I
Related Vehicle	SGJ9898G (Car)	Contact No.	96618238
Hospital/Clinic	INTEGRATED MEDICINE CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	14/06/2021	Date	14/06/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the stated time and date, I was travelling along Bedok reservoir road towards Tampines ave 10 on lane 1. Suddenly I felt an impact on my rear and I get down to check what happen. A bluesg SME879B have bang onto Honda vezel SLL5019J and cause the vezel to rear end my car SGJ9898G. We exchange particulars and left the scene. I went to see the doctor on 14 June 2021 and received 3 days of mc



















**SINGAPORE
POLICE FORCE**



T/20210615/7029

1 of 3

Report No. T/20210615/7029

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/06/2021 16:15		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: HEE JIA WEI			Address: 8 MIMOSA DRIVE SINGAPORE 805426		
ID Type / ID No.: NRIC NO / S98105711			Contact No.: Home/Office: Mobile: 96618238		
Nationality: SINGAPORE CITIZEN			Email: JIAWEI.HEE@HOTMAIL.COM		
Sex: Male	Age: 23	Date of Birth: 11/03/1998	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Student			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/06/2021 21:00	Type of Location: Straight Road
Location: BEDOK NORTH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SGJ9898G	Car	BMW	x1	White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGJ9898G	LIBERTY INSURANCE PTE LTD	SD21V04955/VPC/ R00	24/03/2021	29/04/2022



**SINGAPORE
POLICE FORCE**



T/20210615/7029

2 of 3

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

Report No. T/20210615/7029

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Driver			
Name	HEE JIA WEI	ID No.	S9810571I
Related Vehicle	SGJ9898G (Car)	Contact No.	96618238
Hospital/Clinic	INTEGRATED MEDICINE CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
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SINGAPORE POLICE FORCE



T/20210615/7029

3 of 3

Report No. T/20210615/7029

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

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 / TPHQ /
SYED ZAYID MUHAMMAD BIN SYED ABDUL
WAHID ALHINDUAN
Contact No.: 65476404
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:
15/06/2021 16:15

Classification Of Case: