

SN07217R0002 / NTUC Income Insurance Co-operative Ltd  
ENTRY DATE & TIME: 27/07/2021 13:03 (SGT)  
SUBMITTED BY: Lim Puay Kiat, Ignatius  
VERSION: 1 (27/07/2021 13:03 (SGT))

Your NCD will be affected due to late reporting

## 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	27/07/2021 13:03 (SGT)
Date of Accident	23/07/2021 20:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF VERDUN ROAD AND SAM LEONG ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SML2943Z

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LO MEI XIA SHERMAINE
NRIC No	S9021189G
Email Address	RASPBERRY.NUT@GMAIL.COM
Mobile Phone No	(Phone) +65-97615068
Alternative Phone No	+65-97615068

#### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Scirocco
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	1400

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5109889602-02
Cover Note Number	-

#### DRIVER

Name of Driver	LO MEI XIA SHERMAINE
NRIC No	S9021189G

Date Of Birth	21/06/1990
Occupation	Indoor
Date Of Driving Pass	28/04/2009
Driving experience	12 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97615068
Alt. Phone Number	+65-97615068
Email Address	RASPBERRY.NUT@GMAIL.COM
Address	BLOCK 33 EUNOS CRESCENT
Address complement	#14-248
Postcode	400033
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 - Major/Minor Rd
Weather Conditions	Clear
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle 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

#### REFER TO POLICE REPORT

#### 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	SMZ2693X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver .....	VIJAY KHATRI
NRIC No .....	S8168318B
Contact Number .....	(Phone) +65-91142363
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

**SKETCH PLAN****IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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: 27/07/2021, 1330

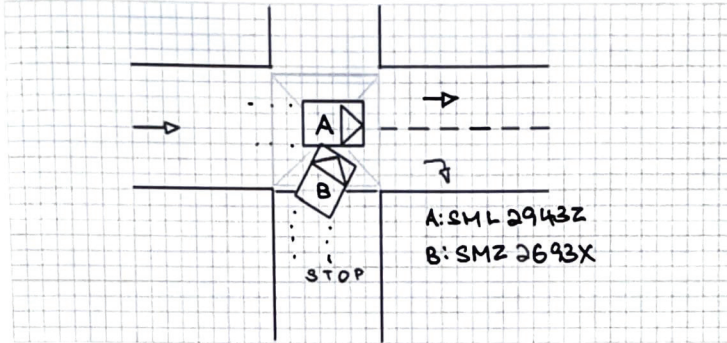
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: Ignatius Lim  
NRIC/FIN No.: S991237



SKETCH PLAN #2

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

## REFER TO REPORT

## DECLARATION

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

**Policyholder's Signature**

Date & Time: 27/07/2021, 1330

Driver's Signature

(If driver is not the policyholder)

**Date & Time:**

Reporting Centre Personnel's Signature

Name: Ignatius Lim

NRIC/FIN No.: S991237

GLIBC SketchPlanform V)


**SINGAPORE  
POLICE FORCE**


T/20210726/7006

1 of 3

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

Report No. T/20210726/7006

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 26/07/2021 09:45	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: LO MEI XIA, SHERMAINE			Address: 33 EUNOS CRESCENT #14-248 SINGAPORE 400033		
ID Type / ID No.: NRIC NO / S9021189G			Contact No.: Home/Office:                      Mobile: 97615068		
Nationality: SINGAPORE CITIZEN			Email: raspberry.nut@gmail.com		
Sex: Female	Age: 31	Date of Birth: 21/06/1990	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Administration manager			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: 23/07/2021 20:50	Type of Location: X-Junction
Location:  VERDUN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SML2943Z	Car	VOLKSWAGO N	SCIROCCO +1.4L+AT+T SI+1372Q5	White		0
SMZ2693X	Car	MITSUBISHI		Red		0



**SINGAPORE  
POLICE FORCE**



T/20210726/7006

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

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Report No. T/20210726/7006

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SML2943Z	NTUC Income Insurance Co-Operative Limited	5109889602-02	31/05/2021	30/05/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LO MEI XIA, SHERMAINE	ID No.	S9021189G
Related Vehicle	SML2943Z (Car)	Contact No.	97615068
Hospital/Clinic	EC FAMILY CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	24/07/2021	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	VIJAY KHATRI	ID No.	S8168218B
Related Vehicle	NIL	Contact No.	91142363
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	NIL

## Brief Details.

I was travelling along Verdun road and at Sam Leong road a car came out and bang my rear right side. We did not take pictures straight away and shifted the car to the side of the road. I do not have an in car camera. I not sure if the other party have. I went to see doctor the next day and have a 3 days medical leave.

**SINGAPORE  
POLICE FORCE**

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



T/20210726/7006

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Report No. T/20210726/7006

**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:  
26/07/2021 09:45

Classification Of Case: