

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 11/08/2021 17:58 (SGT)
Date of Accident 10/08/2021 18:00 (SGT)
Exact Location of Accident Gambas Ave, Singapore
Additional Location Information BEFORE WOODLANDS AVENUE 12 JUNCTION
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJQ26T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM HOCK SENG
NRIC No SXXXX777F
Email Address hs.lim551@gmail.com
Mobile Phone No (Phone) +65-96669980
Alternative Phone No +65-96669980

VEHICLE PARTICULARS

Manufacturer Lexus
Model Rx300
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 1998

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00077922000
Cover Note Number -

DRIVER

Name of Driver LIM HOCK SENG
NRIC No SXXXX777F

Date Of Birth	13/10/1957
Occupation	Outdoor
Date Of Driving Pass	22/11/1976
Driving experience	44 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96669980
Alt. Phone Number	+65-96669980
Email Address	hs.lim551@gmail.com
Address	BLK 583 WOODLANDS DRIVE 16 #7-464
Address complement	-
Postcode	730583
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 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	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210810/7053

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	GBL4147Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	ARAVIN S/O JAYA KUMAR
Contact Number	(Phone) +65-88935201
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	LIM HOCK SENG
Gender	Male
Phone No	(Phone) +65-96669980
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJQ26T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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 making 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/mat 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

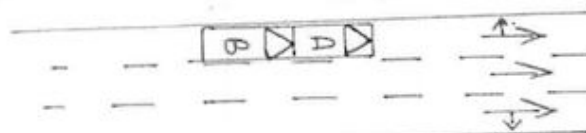
Witnessed by Reporting Centre Personnel

Sketch Plan

(A) SJQ 26 T.

(B) GBL 414TY.

[Signature]



Gambas Ave before Woodlands Ave 12 junction.

Describe Circumstances of the Accident

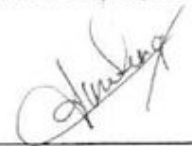
Pls refer to Police Report

No: L/20210810/7053

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time

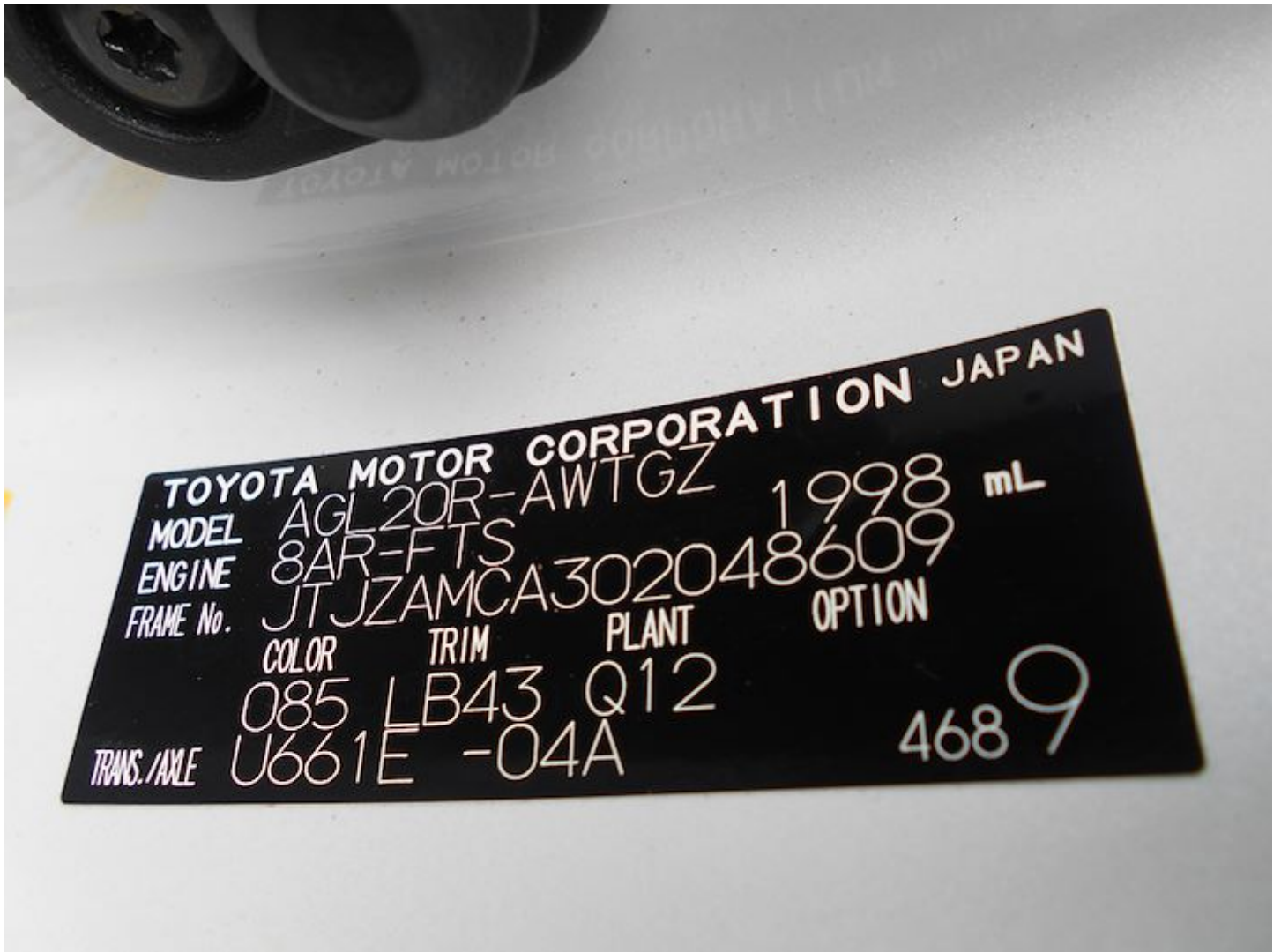

Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel























**SINGAPORE
POLICE FORCE**



L/20210810/7053

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POLICE REPORT (NP299)

Report No. L/20210810/7053

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 10/08/2021 23:19	Vide Report No.	Station Diary No.
Name Of Informant LIM HOCK SENG	Address 583 WOODLANDS DRIVE 16 #07-464 SINGAPORE 730583	
ID Type / ID No. NRIC NO / S1238777F	Contact No. Home/Office:	Mobile: 96669980
Nationality SINGAPORE CITIZEN	Email Address HS.LIM551@GMAIL.COM	
Occupation Self employed	Sex Male	Age 63
Institution/School Name	Date of Birth 13/10/1957	Race Chinese
Date/Time Of Incident 10/08/2021 18:00	Location Of Incident GAMBAS AVENUE	

Brief details.

On 10/08/2021 at about 1800hrs, I was alone, driving my vehicle, a white Lexus RX300, (SJQ26T) along Gambas Ave at lane 4 as I wanted to turn left into Woodlands Ave 12.

It was raining heavily, and traffic was heavy.
My vehicle stopped as it was red light. I then suddenly felt an impact from the rear and looked into my rearview mirror and saw a black van (GBL4147Y) had collided into the rear of my vehicle.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/08/2021 23:19
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

**SINGAPORE
POLICE FORCE**

L/20210810/7053

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20210810/7053

I made a check on my vehicle and saw there were two cracks and scratches on the rear left side and right side of my bumper area.

The van's emblem was damaged and the bonnet was dented upwards.

No one was injured, no Police or ambulance was at scene. No government property was damaged.

I am lodging this report for insurance purposes.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/08/2021 23:19
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	