

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 06/09/2021 10:22 (SGT)
Date of Accident 02/09/2021 11:35 (SGT)
Exact Location of Accident AYE, Singapore
Additional Location Information TOWARDS CTE BEFORE ALEXANDRA ROAD EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGY4672U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO YING SHUANG
NRIC No SXXXX256H
Email Address phuaywei89@gmail.com
Mobile Phone No (Phone) +65-91279114
Alternative Phone No +65-91279114

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 1497

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SI20V12565/VPE/R00
Cover Note Number -

DRIVER

Name of Driver TEO YING SHUANG
NRIC No SXXXX256H

Date Of Birth	20/04/1994
Occupation	Indoor
Date Of Driving Pass	14/07/2015
Driving experience	6 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91279114
Alt. Phone Number	+65-91279114
Email Address	phuaywei89@gmail.com
Address	BLK 532 BUKIT BATOK STREET 51 #07-148
Address complement	-
Postcode	650532
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	DRIZZLING
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	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

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20210903/7024

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	UNKNOWN
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	TEO YING SHUANG
Gender	Female
Phone No	(Phone) +65-91279114
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SGY4672U
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstances of the Accident


On the stated date & time, I, vehicle A(S6Y4672U) was travelling straight on the stated location on lane 2. Suddenly, vehicle B(unknown) cut into my lane ^{abruptly} and collided onto my rear right side portion of my vehicle. Vehicle B(unknown) didn't stop and drove away.

POLICE REPORT T/20210903/7024

Declaration

I/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

 06/09/2021
Witnessed by Reporting Centre Personnel



















**SINGAPORE
POLICE FORCE**



T/20210903/7024

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

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Report No. T/20210903/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/09/2021 16:05		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TEO YING SHUANG			Address: 32 JALAN WAJEK SINGAPORE 588485		
ID Type / ID No.: NRIC NO / S9413256H			Contact No.: Home/Office: Mobile: 91279114		
Nationality: SINGAPORE CITIZEN			Email: HEYHIHAZELLE@HOTMAIL.COM		
Sex: Female	Age: 27	Date of Birth: 20/04/1994	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Radio presenter			Driving Licence Information: Class: 3A		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/09/2021 11:35	Type of Location: Straight Road
Location: AYER RAJAH EXPRESSWAY				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGY4672U	Car					0
SKB7122P	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210903/7024

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

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Report No. T/20210903/7024

CONTINUATION OF REPORT

Driver			
Name	TEO YING SHUANG	ID No.	S9413256H
Related Vehicle	SGY4672U (Car)	Contact No.	91279114
Hospital/Clinic	UNITED HEALTH FAMILY CLINIC & SURGERY	Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	03/09/2021	Date	03/09/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the stated date and time, I was driving my vehicle SGY4672U along the second lane of AYE towards CTE before Alexandra exit when I saw a vehicle self skidded and collide into the road divider on lane one. As I was moving slowly to avoid any collision to my vehicle.

Suddenly I felt a big impact from the right portion of my vehicle forcing my vehicle to surge to lane three. Then I manage to turn back my vehicle back to lane two.

I looked to my right and the only vehicle was a black Volvo XC90 bearing SKB7122P.

SKB7122P did not stop and instead sped off.

As I was still in shock due to the collision I didn't give chase and called for assistance.

My vehicle shook violently and the impact caused my right elbow to knock against the hand rest of my driver's door.

Later the same evening, I started feeling soreness and stiffness over my neck and back on top of the pain in my right elbow.

The pain did not go away and as such, on 03/09/2021, I proceeded to my family doctor at Unihealth 24-Hr Clinic Jurong East for treatment.

I was given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20210903/7024

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

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Report No. T/20210903/7024

CONTINUATION OF REPORTSketch 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 /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

NP168

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

Date/Time:
03/09/2021 16:05

Classification Of Case: