

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 21/10/2021 17:05 (SGT)
Date of Accident 21/10/2021 08:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information TRAFFIC LIGHT JUNCTION AT KALLANG WAY TOWARDS
KALLANG SECTOR
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC9991Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM SOON YING
NRIC No SXXXX178B
Email Address sylim@premiumwww.com
Mobile Phone No (Phone) +65-98633871
Alternative Phone No +65-91573511

VEHICLE PARTICULARS

Manufacturer Mercedes
Model E200 AVG (R18 LED)
Variant -
Exact purpose for which vehicle was being used at time of
accident -
Are you claiming under your own insurance policy for repair to
your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1991

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MQ003578
Cover Note Number -

DRIVER

Name of Driver WONG FONG LIN

NRIC No	SXXXX285H
Date Of Birth	21/06/1969
Occupation	Indoor
Date Of Driving Pass	12/10/1991
Driving experience	30 YEARS
Gender	Female
Mobile Number	(Phone) +65-91573511
Alt. Phone Number	-
Email Address	charwong69@gmail.com
Address	BLK 460 SEGAR ROAD #11-193
Address complement	-
Postcode	670460
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Side Swipe
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?	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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT.

NOTE: VEHICLE REPAIR AT OWNER W/SHOP - WAH YU AUTOMOTIVE

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ2473U
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	WONG FONG LIN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	WHIPLASH
Injured person in which vehicle?	SNC9991Z
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

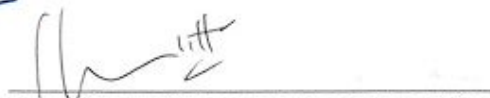
SKETCH PLAN

IMPORTANT NOTICE

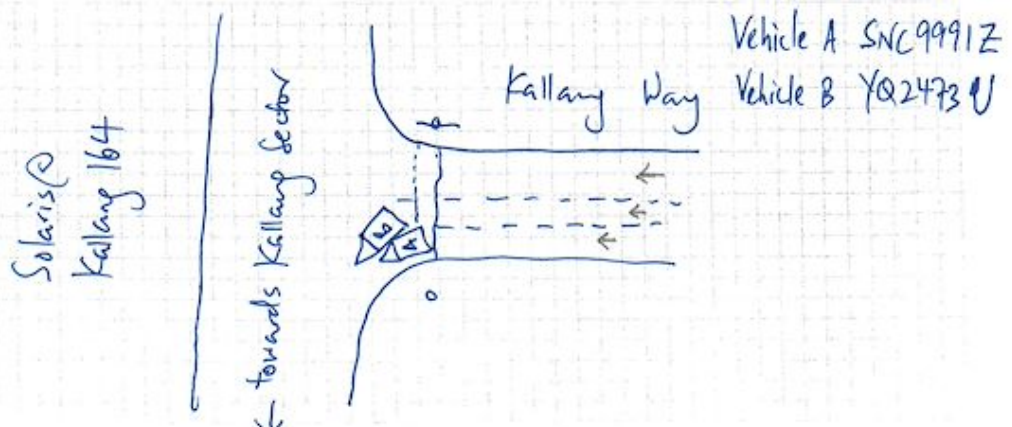
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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' 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.


Policyholder's Signature / Date &
Time 21/10/21 @ 4pm

Sketch Plan


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


Witnessed by Reporting Centre
Personnel



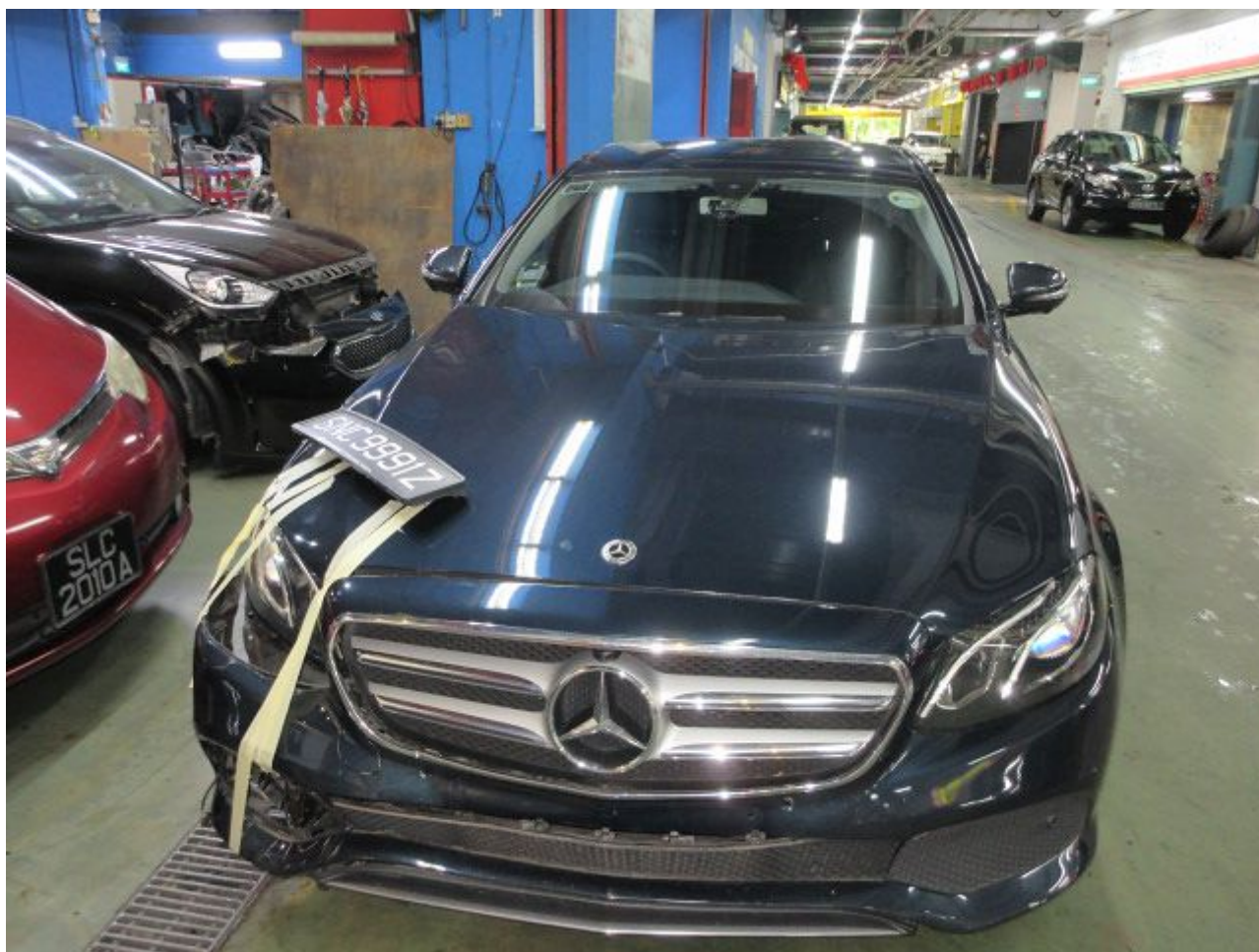
Refer to police report

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

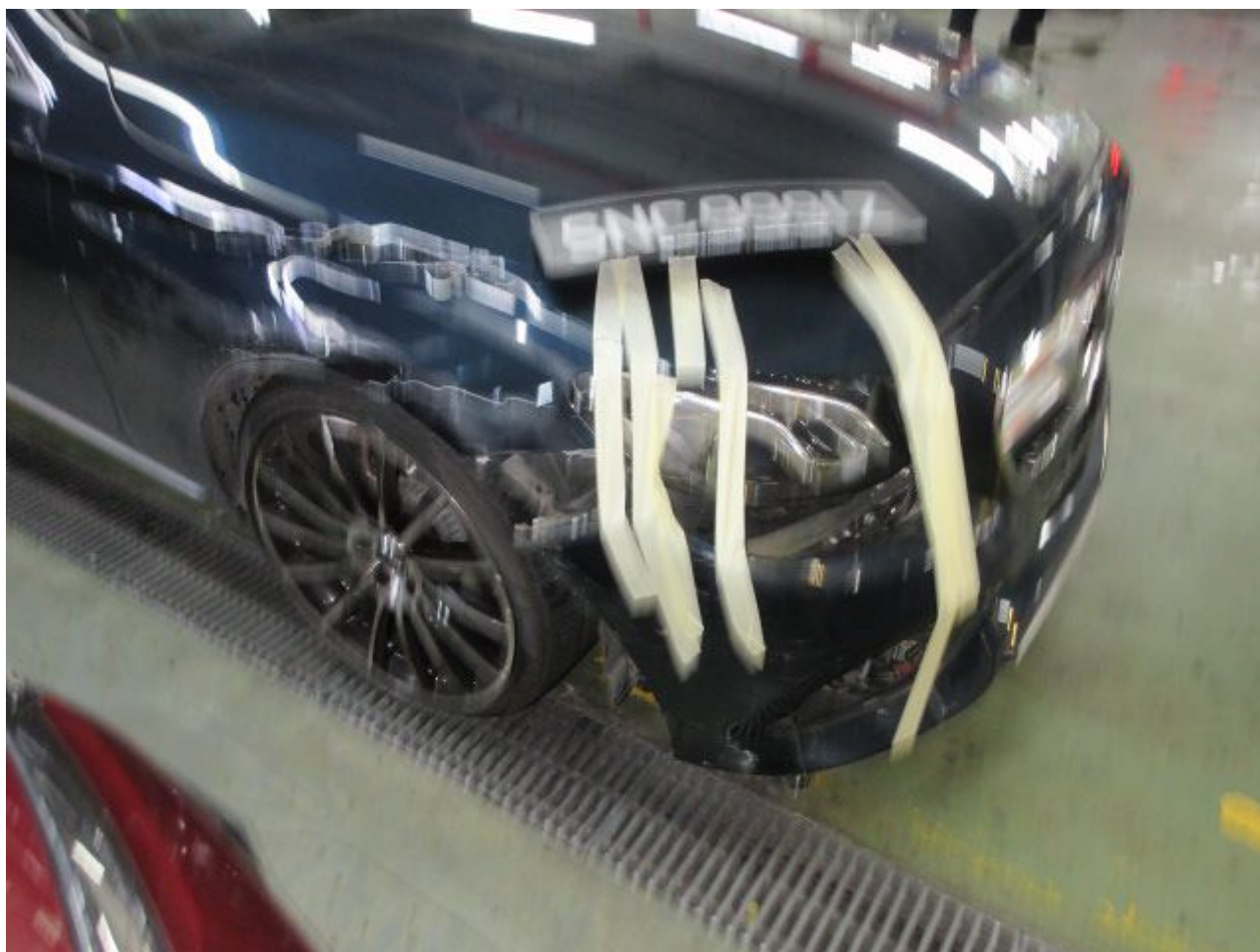
Policyholder's Signature / Date & Time
21/10/21 @ 4pm

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

Witnessed by Reporting Centre Personnel

















**SINGAPORE
POLICE FORCE**



G/2021/021/7053

1 of 2

POLICE REPORT (NP299)

Report No. G/20211021/7053

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 21/10/2021 15:37	Vide Report No.	Station Diary No.
Name Of Informant <u>WONG FONG LIN</u>	Address 460 SEGAR ROAD #11-193 SINGAPORE 670460	
ID Type / ID No. NRIC NO / S6919285H	Contact No.	
	Home/Office:	Mobile: 91573511
Nationality <u>SINGAPORE CITIZEN</u>	Email Address CHARWONG69@GMAIL.COM	
Occupation Administration manager	Sex Female	Age 52
Institution/School Name	Date of Birth 21/06/1969	Race Chinese
Date/Time Of Incident 21/10/2021 08:40 - 21/10/2021 08:50	Language English	
	Location Of Incident 164 KALLANG WAY SOLARIS @KALLANG 164 SINGAPORE 349248	

Brief details.

I was driving towards the traffic junction at Kallang Way (opp Solaris @Kallang 164) when the traffic light turned green as I was approaching the traffic junction.

There were two left turning lanes, towards Kallang Sector. I was on the inner most lane whilst Mr Swamynathan Mohan driving a 14 foot lorry YQ2473U was at the outer left turning lane. While both of us were turning left towards Kallang Sector, I notice his lorry encroaching into my lane. I slowed to a stop and horned but his lorry continued encroaching into my lane and hit my front right and caused extensive

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: 21/10/2021 15:37
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20211021/7053

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211021/7053

damage to the fender, lights, bonnet, rims and ripped off my front bumper.

I felt a strong force as the lorry hit my car and I felt pain in my neck and back. The side of my car was badly damaged with its' front bumper dangling after the impact.

I went for a medical examination soon after and the Doctor diagnosed me as having whiplash and I was given a 3 day MC and asked to return for a check up.

Subjects Involved			
Victim			
Person Name	WONG FONG LIN		
ID Type	NRIC NO	ID No	S6919285H
Gender	Female	Age	52
Race	Chinese	Language	English
Occupation	Administration manager	Address	460 SEGAR ROAD #11-193 SINGAPORE 670460
Mobile No	91573511	Is Informant A Victim?	Yes
Person Name	WONG FONG LIN (Informant)		

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: 21/10/2021 15:37
Officer In-Charge Of Case:	Classification Of Case: