

## 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 Actual 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 ..... 14/01/2021 15:32 (SGT)  
Reported by ..... -  
Date of Accident ..... 13/01/2021 17:35 (SGT)  
Exact Location of Accident ..... Pioneer Rd North, Singapore  
Additional Location Information ..... TOWARDS PIE  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... XD1951T

#### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... DAWN SHIPPING & TRANSPORT COMPANY (PTE) LTD

#### VEHICLE PARTICULARS

Manufacturer ..... Nissan  
Model ..... Gkb45clbhn  
Variant ..... -  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 13074

#### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Policy Number / Cover Note Number ..... GA532843

#### DRIVER

Name of Driver ..... LEE BUAY TEE  
NRIC No ..... SXXXX481B  
Address ..... BLK 130 YISHUN ST 11 #06-625  
Address complement ..... -  
Postcode ..... 760130  
Does Driver Own Other Vehicles? ..... No

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident ..... Collision - Head to Rear

Weather Conditions ..... Clear

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? ..... No  
Was anybody injured in the Accident? ..... No  
Was any other vehicle or property damaged? ..... Yes  
Number of Passengers (Including Driver) ..... 1  
Translator's name ..... -  
Translator's ID ..... -  
Translator's phone number ..... -  
Translator's email ..... -  
Original language used in the statement ..... -

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210114/2064

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... 197MID  
Vehicle Manufacturer ..... -  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Government  
Name of Driver ..... WONG PUI PIN  
Insurance Company Name ..... -

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

1. Please report correctly the details of the accident to speed up the claims process.
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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. 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.

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.



Policyholder's Signature  
Date & Time:

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

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

GIARMC SketchPlanForm\_V3

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SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/01/2021 @ abt 1235 hrs.

Refer to Police Report T/20210114/2064

Remark: I was employee of Dawn Shipping & Transport Co P/L. I drive XD19SIT for working purpose only.

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)

Reporting Centre Personnel's Signature  
Name:

☐ Claim own policy  
☐ Claim third party  
☐ Claim OD / TP at other workshop  
☒ For record purpose

Policy No. GA532843/  
Insurer AXA Veh.No. XD19SIT

























**SINGAPORE  
POLICE FORCE**



T/20210114/2064

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20210114/2064

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/01/2021 14:30	Vide Report No.:	Station Diary No.: 55
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Informant's Particulars			
Name of Informant: LEE BUAY TEE		Address: APT BLK 130 YISHUN STREET 11 #06-265 SINGAPORE 760130	
ID Type / ID No.: NRIC NO / S1221481B		Contact No.: Home/Office: Mobile: 86666265	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 65	Date of Birth: 21/07/1955	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Trailer-truck driver		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 13/01/2021 17:35	Type of Location: Bend
Location:  PIONEER ROAD NORTH				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
197MID	Car				Seriously Damaged	0
XD1951T	Trailer Truck				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20210114/2064

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20210114/2064

**CONTINUATION OF REPORT****Brief Details.**

On 13/01/2021 at around 1735hrs, I was driving my trailer truck, bearing the registration number of XD1951T, along Pioneer Road North towards PIE. While I was approaching the traffic light, there was another vehicle, a white Chevrolet bearing the registration number of 197MID (Singapore Armed Force's vehicle) cutting into my lane from my left. As we were approaching the traffic light to turn right, the light turned 'Ember' and the car jammed brake in front of me. I was unable to stop my vehicle in time and I collided with the rear of the said car. I wish to add that after the collision, we exchanged particulars with each other. No one was injured from the accident.

My vehicle suffered damage on the front body kit. The other car suffered damages such as shattered tail light, severely damaged rear bumper and body kit. There was no traffic police and ambulance at scene as well. My insurance company also advised me to lodge a police report with regards to the accident.

The following is the detail of the car's driver:

Name: Wong Pui Pin  
NRIC: S7812923I  
Works for SAF.



**SINGAPORE  
POLICE FORCE**



T/20210114/2064

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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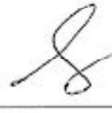
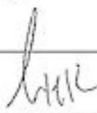

Report No. T/20210114/2064

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J/ Sgt 3 TAN LITEK 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 14/01/2021 14:30
Officer In Charge Of Case: TP-/GIA- Staff Sgt WONG SIEU LUI Contact No: 65476151 	Classification Of Case:
Authentication Stamp NP168  SIGNATURE	