SN0922380006-01 / National Assessment Centre Services [408933]
ENTRY DATE & TIME: 08/03/2022 12:24 (SGT)
SUBMITTED BY: Roslinda Binte A. Wahab
VERSION: 2 (08/03/2022 15:03 (SGT))

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 witholding 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	08/03/2022 12:24 (SGT)
Date of Accident	07/03/2022 18:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AYE TWDS BUONA VISTA
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND1113P

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE PO YUN PAULINE
NRIC No	S6885065G
Email Address	autohub325@gmail.com
Mobile Phone No	(Phone) +65-91073678
Alternative Phone No	+65-91073678

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E250
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	1796

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00213512100
Cover Note Number	-

DRIVER

Name of Driver	LEE PO YUN PAULINE
NRIC No	S6885065G

Date Of Birth	13/08/1968
Occupation	Indoor
Date Of Driving Pass	14/07/2004
Driving experience	17 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91073678
Alt. Phone Number	+65-91073678
Email Address	autohub325@gmail.com
Address	11 LINCOLN RD
Address complement	#12-03
Postcode	308349
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	Chain Collision
Weather Conditions	DRIZZLING
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT

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	SJX2146E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	SYED SUFRI BIN SYED HARON
NRIC No	S8527055I
Contact Number	(Phone) +65-91763920
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMM4926E
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLN3122X
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	LEE PO YUN PAULINE
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BACK & NECK
Injured person in which vehicle?	SND1113P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.
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	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
8 March 2022		08/03/22

Sketch Plan

AYE TWDS BUONA VISTA

A - SND1113P
B - SJKD146E
C - SMM4926E
D - SLN3122X

Describe Circumstances of the Accident

I was travelling straight along Aye twds Buona Vista on the extreme right lane. Suddenly, I felt the impact from behind. I came out and I was involved in a chain collision of 4 veh.

Declaration

We declare the foregoing particulars are true in every respect.

8 March 2022

Policyholder's Signature / Date & Time

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

Lynn 08/03/22

Witnessed by Reporting Centre Personnel

SINGAPORE POLICE FORCE

T/20220308/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20220308/2026

CONTINUATION OF REPORT

Driver			
Name	TAN CHUAN WAH LENON	ID No.	S7134982I
Related Vehicle	NIL	Contact No.	97557800
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date and time, I was driving my vehicle bearing registration number SND1113P along AYE towards Bueno Vista. I was driving at 40-50km/h as there were many vehicles. As I slow down due to the jam, the vehicle behind me bearing registration number SJX2146E was too near me and hit onto my rear as he was not able to break in time. My vehicle suffered serious damages to the rear and due to the impact, the roof of my vehicle was also damaged. His vehicle suffered damages to the front of its vehicle. I do not have an in car camera. Police was at scene and checked with me if I wanted to be conveyed to the hospital but I declined as I could drive myself. As I stepped out of the vehicle, I realized that 3 other vehicles bearing registration number SMM4926E, SLN3122X are involved. I am not sure how they were involved.

On the same day at about 1930hrs, I went to the doctor at Mount Elizabeth and was given 5 days MC after going through the Xray and CT scan. I suffered neck and back injuries. I did not bring the physical copy of the MC to the police station as I left it at home.

As such, I am lodging a Traffic accident report.

IMAGES

IMAGES #2

IMAGES #3

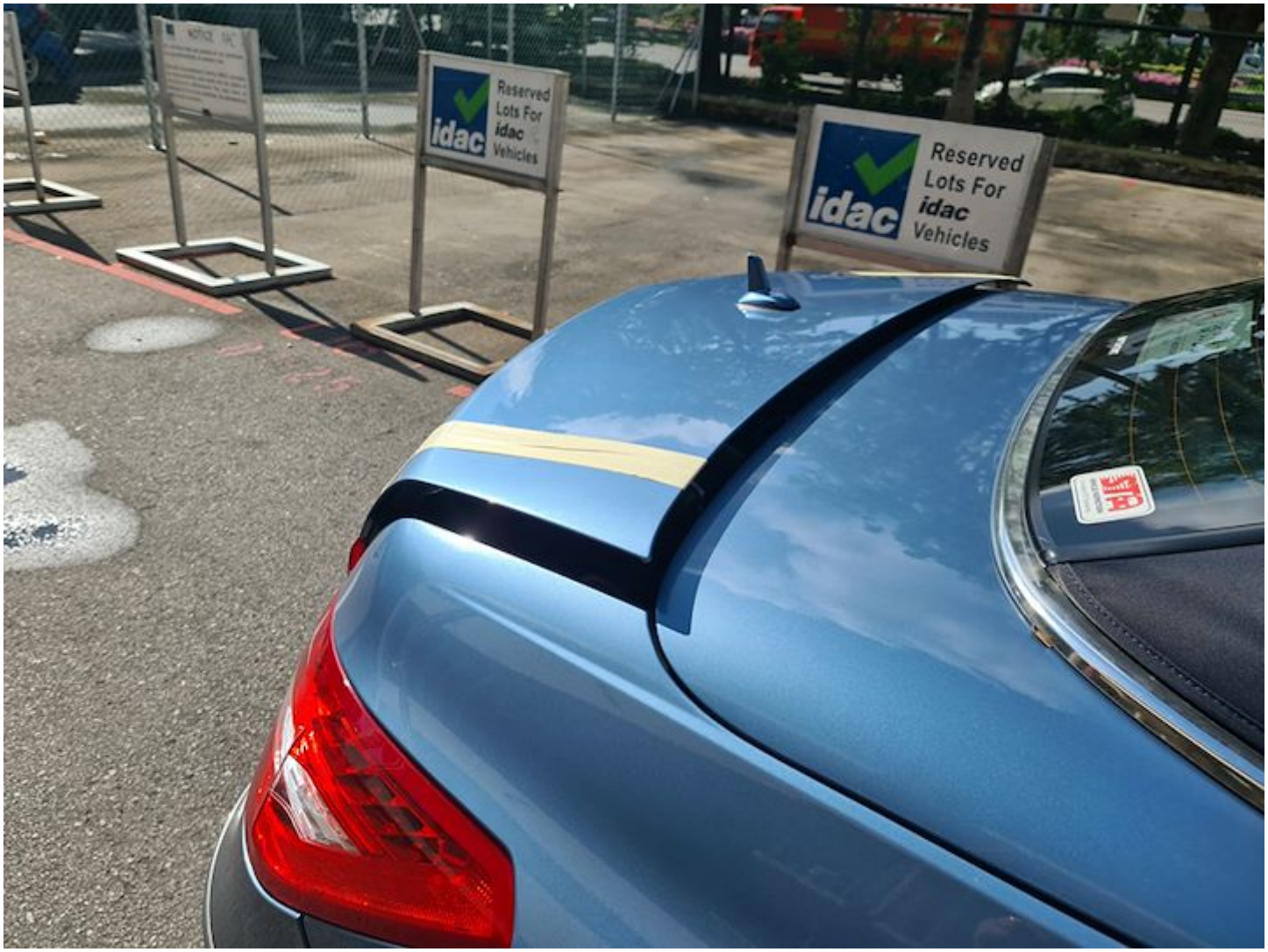
IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8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Reserved
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Mercedes-Benz
C230
TYP: 207
PZ: 9
1.0
Made in Germany
2507633
DAIMLER AG
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2-
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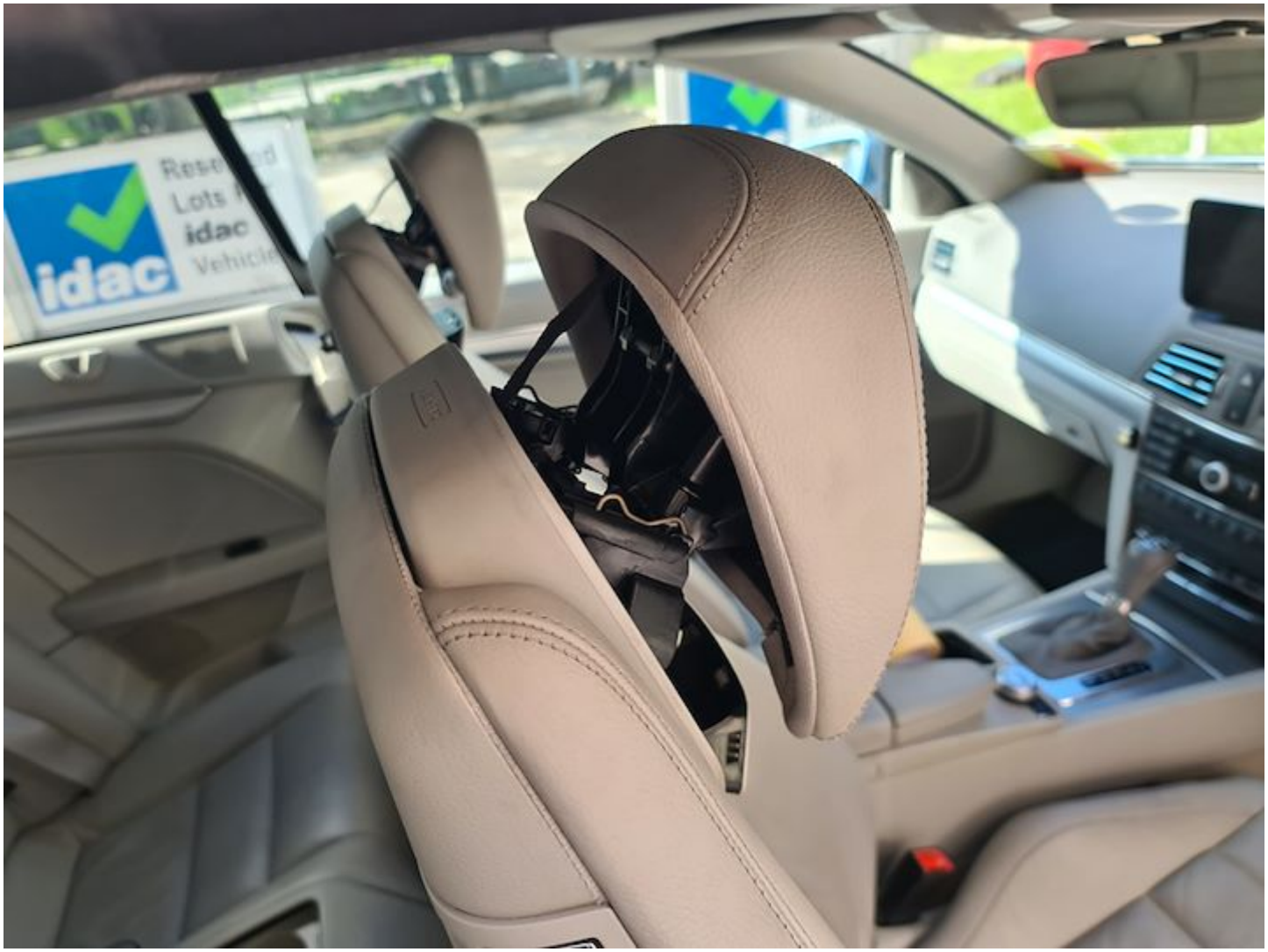
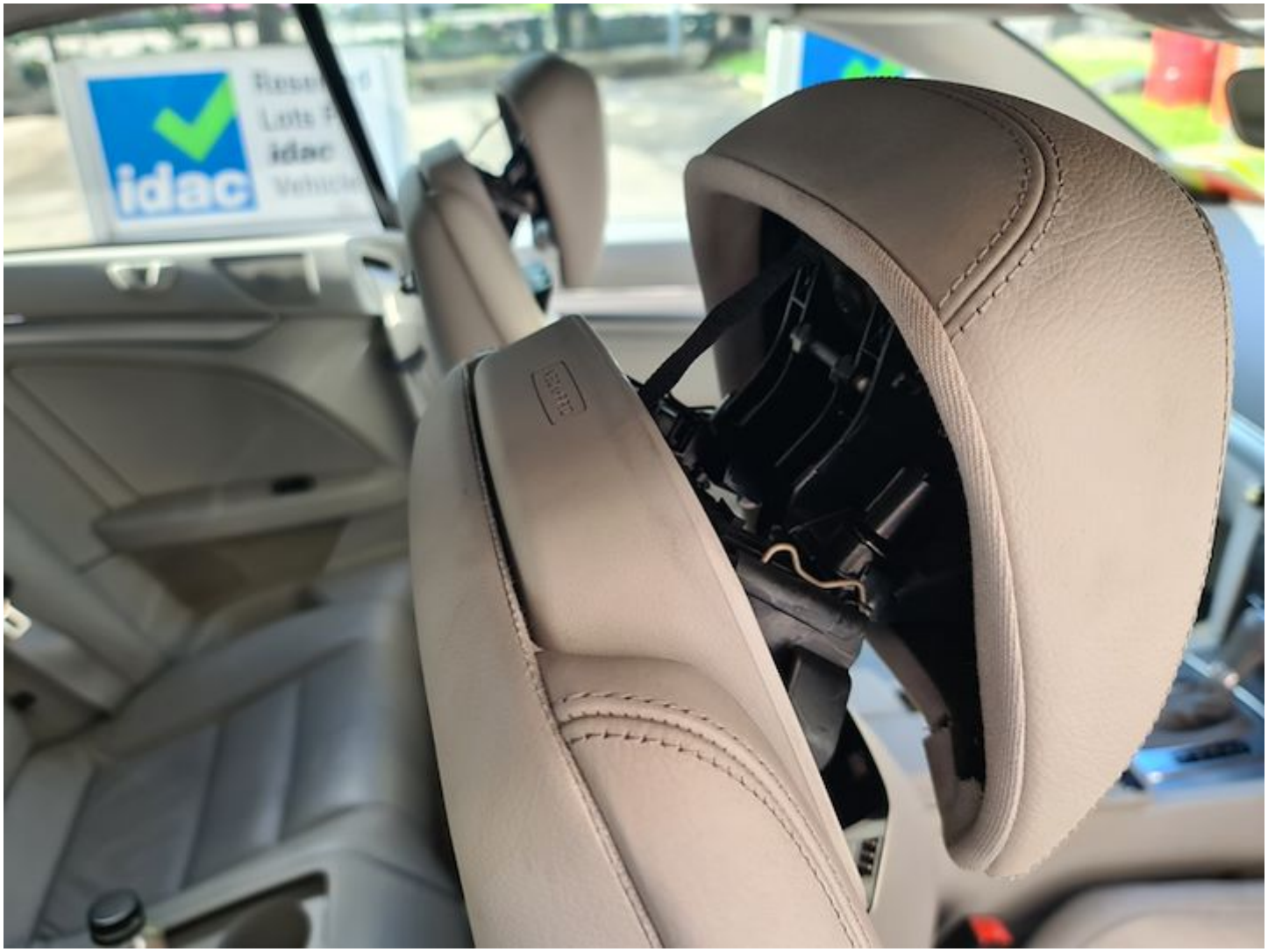
1030 kg
1160 kg

IMAGES #10

IMAGES #11



IMAGES #12



SINGAPORE POLICE FORCE

T/20220308/2026

Report No. T/20220308/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
08/03/2022 11:16		27

Informant's Particulars

Name of Informant: LEE PO YUN, PAULINE			Address: 11 LINCOLN ROAD #12-03 SINGAPORE 308349	
ID Type / ID No.: NRIC NO / S6885065G			Contact No.: Home/Office: Mobile: 91073678	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 53	Date of Birth: 13/08/1968	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: ARCHITECT			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/03/2022 18:00	Type of Location: Expressway
Location: AYER RAJAH EXPRESSWAY				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		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
SJX2146E	Car				Seriously Damaged	0
SLN3122X	Car				Seriously Damaged	0
SMM4926E	Car				Seriously Damaged	0
SND1113P	Car	MERCEDES BENZ	E250 CGI A	Blue	Seriously Damaged	0

SINGAPORE POLICE FORCE

T/20220308/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20220308/2026

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SND1113P	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW002135 12100	12/10/2021	11/10/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LAURA ONG ME QI	ID No.	S8177216I
Related Vehicle	NIL	Contact No.	98787761
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LEE PO YUN, PAULINE	ID No.	S6885065G
Related Vehicle	NIL	Contact No.	91073678
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Driver			
Name	SYED SUFRI BIN SYED HARON	ID No.	S8527055I
Related Vehicle	NIL	Contact No.	91763920
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

SINGAPORE POLICE FORCE

T/20220308/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20220308/2026

CONTINUATION OF REPORT

Driver			
Name	TAN CHUAN WAH LENON	ID No.	S7134982I
Related Vehicle	NIL	Contact No.	97557800
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date and time, I was driving my vehicle bearing registration number SND1113P along AYE towards Bueno Vista. I was driving at 40-50km/h as there were many vehicles. As I slow down due to the jam, the vehicle behind me bearing registration number SJX2146E was too near me and hit onto my rear as he was not able to break in time. My vehicle suffered serious damages to the rear and due to the impact, the roof of my vehicle was also damaged. His vehicle suffered damages to the front of its vehicle. I do not have an in car camera. Police was at scene and checked with me if I wanted to be conveyed to the hospital but I declined as I could drive myself. As I stepped out of the vehicle, I realized that 3 other vehicles bearing registration number SMM4926E, SLN3122X are involved. I am not sure how they were involved.

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T/20220308/2026

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Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20220308/2026

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: F / Other Mohamed Nasrul Bin Mohamed Taib	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2022 11:16
Officer In Charge Of Case: TP / GIT / SI MOHAMMED FEROZ BIN HUSSIEN Contact No.: 65476206	Classification Of Case:

NP168

SINGAPORE POLICE FORCE SN 156
SIGNATURE

GENERAL INSURANCE ASSOCIATION
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN0922380006 Vehicle Registration No: SNA1113P

Name (as shown in NRIC): LEE PO YUN DAVUNE NRIC/FIN/Passport No: SXXXX065G

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: 11 LINCOLN RD #17-03 Singapore (308349)

Contact (Tel): Mobile No.: 91073678

Email Address:

Date of Accident: 07/03/22 Time of Accident: 18:00

Place of Accident: AYE FWDS BUONA VISTA

Insurance Company: CHINA TAIPING

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

AMEND NUMBER OF VEH INVOLVED

Policyholder / Driver's Signature
Date:

08/03/22
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

GIARMC Addendum Form