

# 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 .....	14/03/2022 16:27 (SGT)
Date of Accident .....	12/03/2022 09:15 (SGT)
Exact Location of Accident .....	West Coast Rd, Singapore
Additional Location Information .....	CARPARK
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMZ8484T
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LEE YI LINCOLN
NRIC No .....	SXXXX640A
Email Address .....	linken_l@hotmail.com
Mobile Phone No .....	(Phone) +65-90627719
Alternative Phone No .....	+65-90627719

### VEHICLE PARTICULARS

Manufacturer .....	Mercedes
Model .....	E200
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 .....	Liberty Insurance Pte Ltd
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	SI22V01875/VPE/R00
Cover Note Number .....	-

### DRIVER

Name of Driver .....	LEE YI LINCOLN
NRIC No .....	SXXXX640A

Date Of Birth .....	15/03/1984
Occupation .....	Indoor
Date Of Driving Pass .....	23/08/2006
Driving experience .....	15 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90627719
Alt. Phone Number .....	+65-90627719
Email Address .....	linken_l@hotmail.com
Address .....	BLK 412A FERNVALE LINK
Address complement .....	#08-21
Postcode .....	791412
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 .....	Collided into Parked Vehicle
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	0
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

PLS REFER TO THE POLICE REPORT:T/20220314/7021

#### 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 DRIVER
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SGV2812L
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) .....	-

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

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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 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")

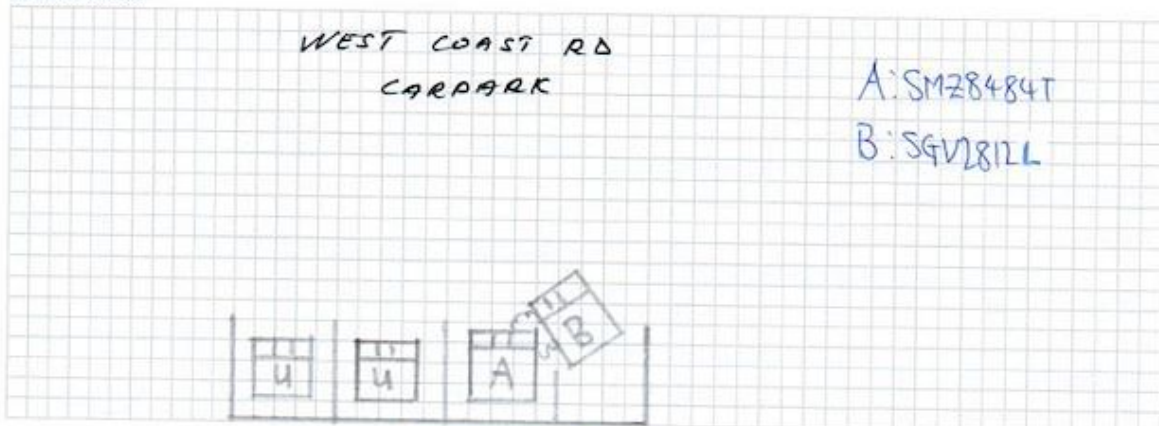
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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


**Sketch Plan**

Describe Circumstances of the Accident


Refer to police report  
T/20220314/7021

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

 14/02/22  
Witnessed by Reporting Centre Personnel





**SINGAPORE  
POLICE FORCE**



T/20220314/7021

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

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Report No. T/20220314/7021

**CONTINUATION OF REPORT**

Driver			
Name	LEE YI LINCOLN		ID No. S8408640A
Related Vehicle	SMZ8484T (Car)		Contact No. 90627719
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

MY CAR WAS PARKED AT THE PARKING LOT AND WAS HAVING BREAKFAST DURING THE ACTUAL ACCIDENT. WHEN I HEADED BACK TO MY CAR I NOTICED A HUGE DENT ON MY FRONT RIGHT PORTION AND THAT'S WHEN I APPROACH THE OTHER CAR IN THE FRONT OF ME TO GET A IN CAR CAM VIDEO OF THE CAR THAT COLLIDED ONTO MY CAR. THE CAR INFRONT OF MY VEHICLE MANAGE TO CAPTURE THE ACCIDENT AND SEND ME THE VIDEO SHOWING A CAR (SGV2812L) THAT COLLIDED ONTO MY CAR.

































**SINGAPORE  
POLICE FORCE**



T/20220314/7021

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

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Report No. T/20220314/7021

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/03/2022 13:40		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: LEE YI LINCOLN			Address: 412A FERNVALE LINK #08-21 SINGAPORE 791412		
ID Type / ID No.: NRIC NO / S8408640A			Contact No.: Home/Office: Mobile: 90627719		
Nationality: SINGAPORE CITIZEN			Email: LINKEN_L@HOTMAIL.COM		
Sex: Male	Age: 37	Date of Birth: 15/03/1984	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PROJECT MANAGER			Driving Licence Information: Class:		Date of Expiry:

#### General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/03/2022 09:15	Type of Location: Car Park
Location:  WEST COAST ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 30 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

#### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGV2812L	Car					0
SMZ8484T	Car					0

#### Details of Person Involved

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



**SINGAPORE  
POLICE FORCE**



T/20220314/7021

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

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Report No. T/20220314/7021

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	LEE YI LINCOLN		ID No. S8408640A
Related Vehicle	SMZ8484T (Car)		Contact No. 90627719
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

MY CAR WAS PARKED AT THE PARKING LOT AND WAS HAVING BREAKFAST DURING THE ACTUAL ACCIDENT. WHEN I HEADED BACK TO MY CAR I NOTICED A HUGE DENT ON MY FRONT RIGHT PORTION AND THAT'S WHEN I APPROACH THE OTHER CAR IN THE FRONT OF ME TO GET A IN CAR CAM VIDEO OF THE CAR THAT COLLIDED ONTO MY CAR. THE CAR INFRONT OF MY VEHICLE MANAGE TO CAPTURE THE ACCIDENT AND SEND ME THE VIDEO SHOWING A CAR (SGV2812L) THAT COLLIDED ONTO MY CAR.



**SINGAPORE  
POLICE FORCE**

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



T/20220314/7021

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Report No. T/20220314/7021

**CONTINUATION OF REPORT**Sketch 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 /  
STEPHANIE, CHEUNG TSZ YING  
Contact No.: 96208032

NP168

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

Date/Time:  
14/03/2022 13:40

Classification Of Case: