

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 12:17 (SGT)
Date of Accident 12/03/2022 11:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information TAMPINES ROAD TOWARDS HOUGANG AVE 3
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLW384D

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LEE NIKKI
NRIC No S8821686E
Email Address nikkileemy@gmail.com
Mobile Phone No (Phone) +65-92261988
Alternative Phone No +65-92261988

VEHICLE PARTICULARS

Manufacturer Mercedes
Model C180 AVANTGARDE (R17 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 1595

INSURANCE COMPANY

Name of Insurance Company Singapore Life Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 11056524
Cover Note Number -

DRIVER

Name of Driver LEE NIKKI
NRIC No S8821686E

Date Of Birth	22/06/1988
Occupation	Indoor
Date Of Driving Pass	08/06/2009
Driving experience	12 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-92261988
Alt. Phone Number	+65-92261988
Email Address	nikkileemy@gmail.com
Address	BLK 374HOUGANG STREET 31 #16-75
Address complement	-
Postcode	530374
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	Collision - Change/cross lane
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	Thomson Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004529999
Alt. Police Station Phone No	(Fax) +65-65535740
Police Station Address	Blk 25 Sin Ming Road #01-180 Singapore 570025
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 - THIAM HENG HUAT

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	SMW1829U
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 NIKKI
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLW384D
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

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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' law yers/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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

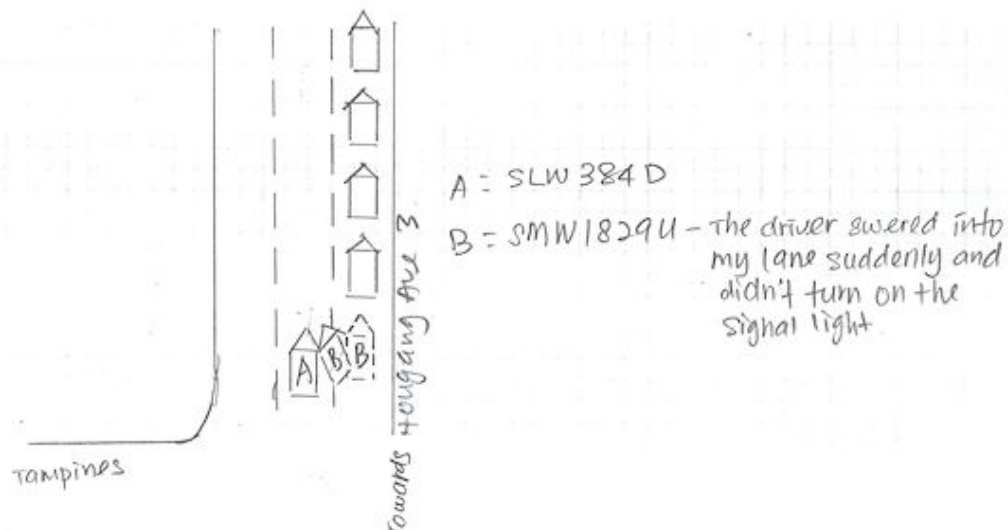
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

12 March 2022, 11:15am @ Tampines Road towards Hougang Ave 3:


I was travelling and had kept to my lane. Suddenly a red vehicle swerved and hit the driver side of my vehicle, they did not turn on their signal.


Refer To Police Report.

T/20220312/2047.

Declaration

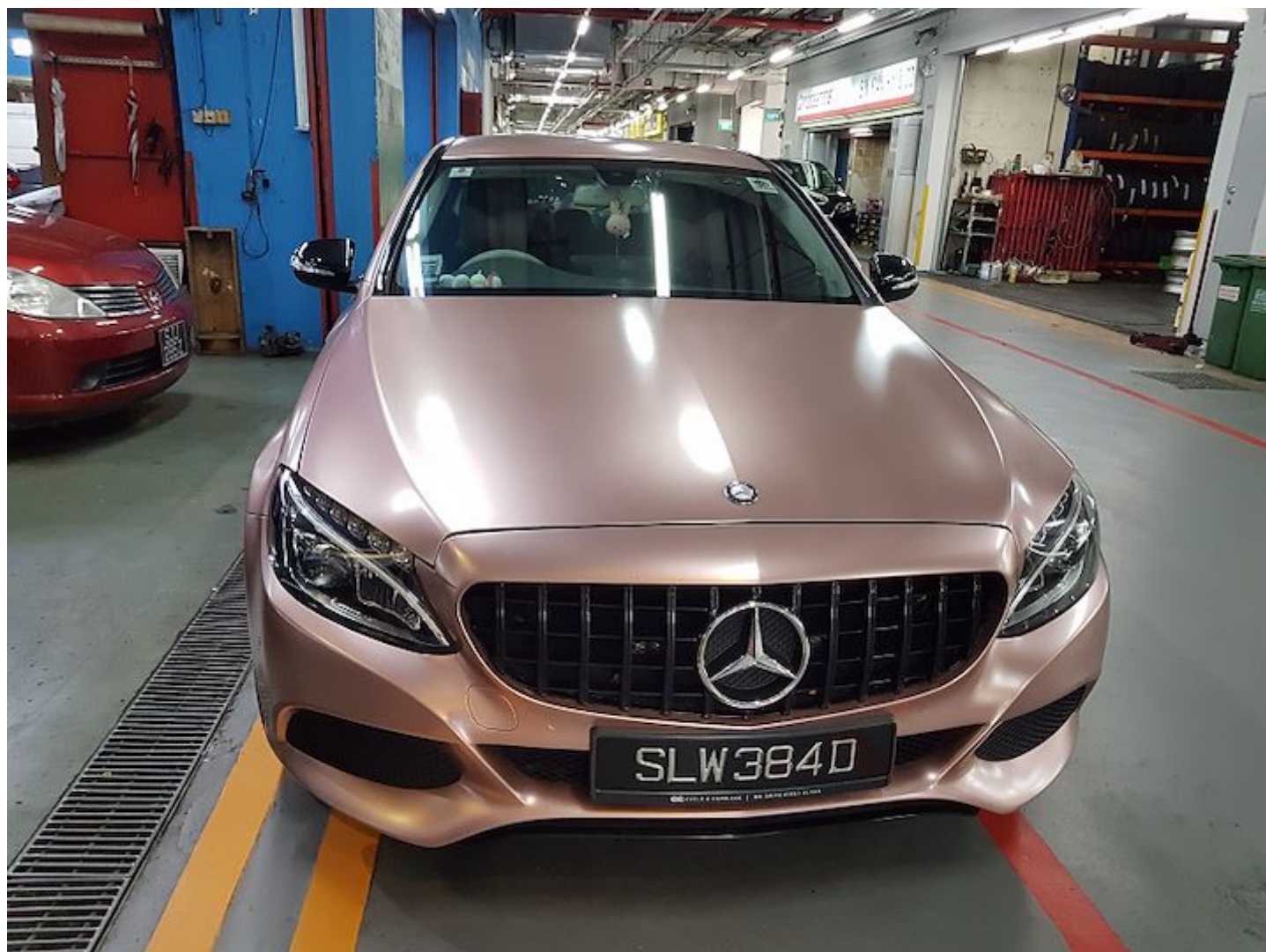
We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time
12/3/22


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



Witnessed by Reporting Centre Personnel



























**SINGAPORE
POLICE FORCE**



T/20220312/2047

1 of 4

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

Report No. T/20220312/2047

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/03/2022 16:23	Vide Report No.:	Station Diary No.: 13
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Informant's Particulars

Name of Informant: LEE NIKKI			Address: APT BLK 374 HOUGANG STREET 31 #16-75 SINGAPORE 530374		
ID Type / ID No.: NRIC NO / S8821686E			Contact No.: Home/Office: Mobile: 92261988		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 33	Date of Birth: 22/06/1988	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PUBLIC RELATIONS			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/03/2022 11:15	Type of Location: Straight Road
Location: TAMPINES ROAD				
Lamp Post Number: 10				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLW384D	Car	MERCEDES BENZ	C180 AVANTGAR DE (R17 LED)	Silver	Slightly Damaged	0
SMW1829U	Car	MINI	BUCKINGH AM 1.5 AUTO	Red	Slightly Damaged	1



**SINGAPORE
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T/20220312/2047

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Police Station Of Origin:
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570025
Tel No: 1800-4529999

Report No. T/20220312/2047

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLW384D	AVIVA LTD	11056524	15/04/2021	14/04/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver:				
Name	LEE NIKKI		ID No.	S8821686E
Related Vehicle	SLW384D (Car)		Contact No.	92261988
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	12/03/2022		Date Discharge	NIL
No. of Days granted Medical Leave		05	Degree of Injury	Slight
Driver:				
Name	LEONG MAN NEI MANNIE		ID No.	S7760212G
Related Vehicle	SMW1829U (Car)		Contact No.	92297252
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 12/03/2022 at about 1115hrs, I was driving along Tampines Rd near Lamp post 10 heading towards Hougang Ave 3. I was travelling along lane 1 and I signalled to change into lane 2. When suddenly, the vehicle travelling along lane 3 also changed lane into lane 2. The said vehicle's front left side then collided onto my right driver door. I wish to state that at the point of accident, my vehicle had already fully entered lane 2 and the other vehicle failed to signal her intention to change lane. We then managed to exchange particulars after the incident.

I subsequently felt pain around my shoulder area as such I proceeded to see a doctor at Mount Alvernia hospital and was given 5 days MC.



**SINGAPORE
POLICE FORCE**

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Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999



T/20220312/2047

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Report No. T/20220312/2047

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20220312/2047

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Report No. T/20220312/2047

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

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:
E / SGT 1 KOH YONG MENG,
ALVIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
12/03/2022 16:23

Officer In Charge Of Case:
TP / AEIT /
SI MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

Classification Of Case:

NP168



SINGAPORE
POLICE FORCE

SN 070

SIGNATURE