

## 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 .....	16/03/2022 17:10 (SGT)
Date of Accident .....	15/03/2022 13:50 (SGT)
Exact Location of Accident .....	Tampines, Singapore
Additional Location Information .....	TAMPINES INDUSTRIAL AVENUE 5
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMH5383R
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	ASIA EXPRESS CAR RENTAL PTE LTD
Company Reg No .....	2XXXXX882D
Email Address .....	PEIJIE@EXPRESSCAR.COM.SG
Mobile Phone No .....	(Phone) +65-96253682
Alternative Phone No .....	+65-91998131

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Freed
Variant .....	HYBRID 1.5G AUTO
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 hire
Transmission .....	Auto
CC .....	1496

#### INSURANCE COMPANY

Name of Insurance Company .....	NTUC Income Insurance Co-operative Ltd
Type of Coverage .....	ThirdPartyFireTheft
Fleet Policy .....	Yes
Policy Number .....	5121569529
Cover Note Number .....	5121569529-000225

#### DRIVER

Name of Driver .....	LIM KOK KEE
NRIC No .....	SXXXX541F

Date Of Birth .....	11/09/1964
Occupation .....	Outdoor
Date Of Driving Pass .....	05/07/1983
Driving experience .....	38 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98465090
Alt. Phone Number .....	-
Email Address .....	PEIJIE@EXPRESSCAR.COM.SG
Address .....	BLK 122 GEYLANG EAST CENTRAL #10-70
Address complement .....	-
Postcode .....	380122
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 - Head to Rear
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) .....	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 .....	MacPherson Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18007449999
Alt. Police Station Phone No .....	(Fax) +65-65476366
Police Station Address .....	Blk 54 Pipit Road #01-82/84 Singapore 370054
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN AND POLICE REPORT

#### 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 .....	XE3449J
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle

Name of Driver .....	PHANG SWEE KEEN
NRIC No .....	SXXXX102B
Contact Number .....	(Phone) +65-91002718
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**Describe Circumstances of the Accident**

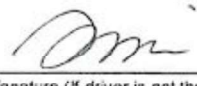
I was about to turn into 10 Tampines Ind Ave S.

There's a truck hit on my rear.

**Declaration**

We declare the foregoing particulars are true in every respect.

 15/3/22  
1500  
Policyholder's Signature / Date & Time

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

   
Witnessed by Reporting Centre Personnel

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

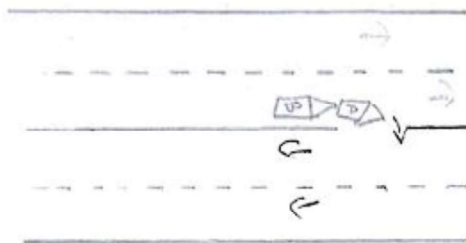
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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  
15/3/12

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**







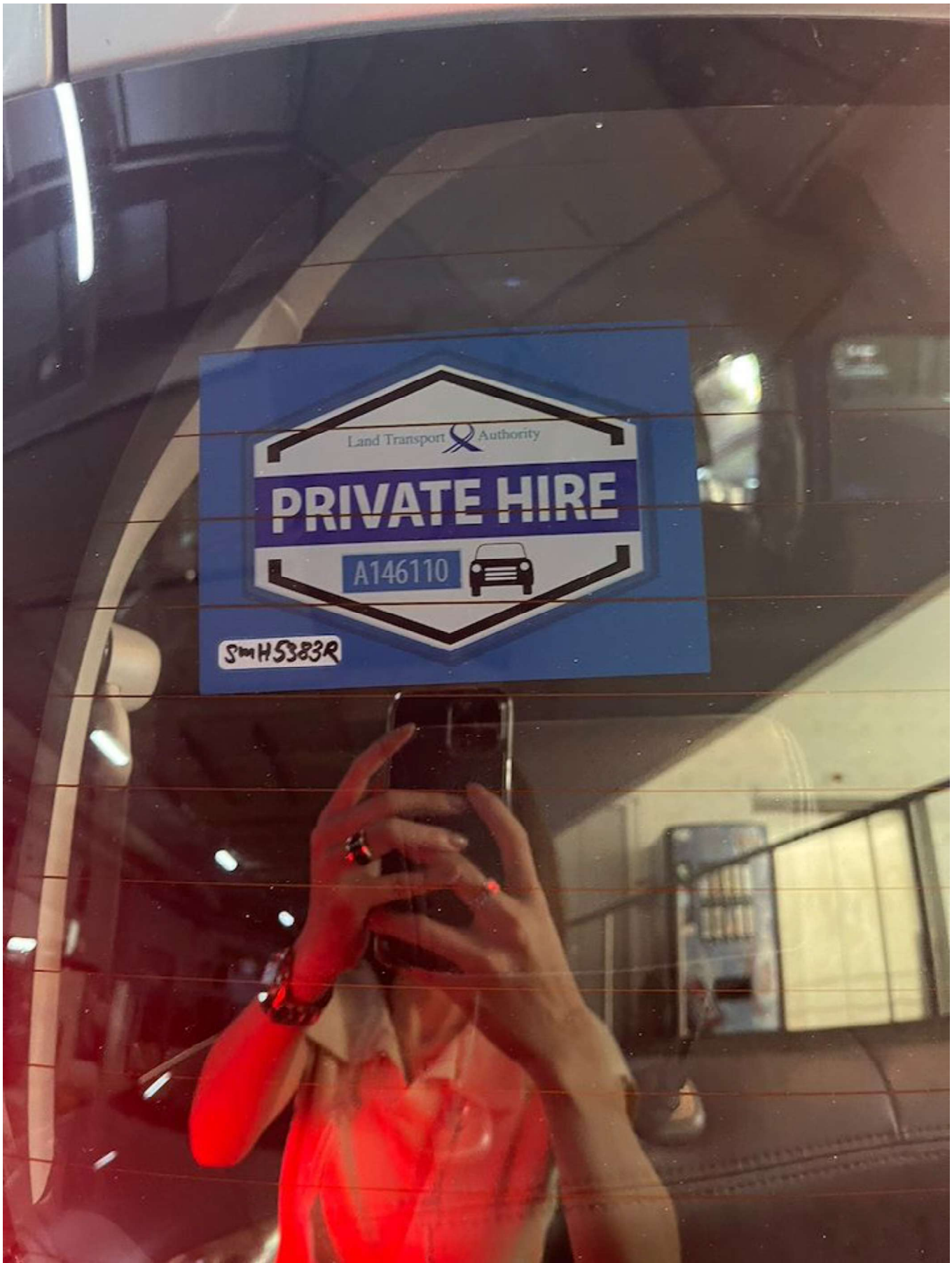





















**SINGAPORE  
POLICE FORCE**


T/20220316/2030

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

1 of 3

Report No. T/20220316/2030

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/03/2022 13:12	Vide Report No.:	Station Diary No.: 14
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**Informant's Particulars**

Name of Informant: LIM KOK KEE	Address: APT BLK 122 GEYLANG EAST CENTRAL #10-70 SINGAPORE 380122	
ID Type / ID No.: NRIC NO / S1647541F	Contact No.:	Mobile: 98465090
Nationality: SINGAPORE CITIZEN	Email: danny_reell@yahoo.com.sg	
Sex: Male	Age: 57	Date of Birth: 11/09/1964
Race: Chinese	Language:	Institution / School Name:
Occupation: PRIVATE HIRE DRIVER	Driving Licence Information: Class: 3	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/03/2022 13:50	Type of Location: T-Junction
Location:  TAMPINES INDUSTRIAL AVENUE 5				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
SMH5383R	Car				Slightly Damaged	0
XE3449J	Lorry				Slightly Damaged	0

**Details of Person Involved**

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


**SINGAPORE  
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Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999



T/20220316/2030

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Report No. T/20220316/2030

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	LIM KOK KEE		ID No. S1647541F
Related Vehicle	SMH5383R (Car)		Contact No. 98465090
Hospital/Clinic	RAFFLES HOSPITAL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	16/03/2022		Date Discharge 16/03/2022
No. of Days granted Medical Leave	07		Degree of Injury Slight
<b>Driver</b>			
Name	Phang Swee Keen		ID No. S1594102B
Related Vehicle	XE3449J (Lorry)		Contact No. 91002718
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 time, date and location, I was driving my car(SMH5383R) along Tampines Ind Ave 5 towards Tampines Rd. I wanted to turn right into 10 Tampines Ind Ave 5 and had my right signal light on. As I approached the junction, I had stopped to look out and make sure that it was safe for me to turn right. Suddenly, my car was hit from the rear by a lorry(XE3449J). We got off our vehicles and exchanged particulars before leaving. No police or ambulance attended the scene.

Subsequently, I felt discomfort in my body due to the accident on 16/03/2022 and went to see a doctor at Raffles Hospital and got a MC for 7 days.



**SINGAPORE  
POLICE FORCE**

T/20220316/2030

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

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Report No. T/20220316/2030

**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:  
G / SGT 2 SAM ZONG YI

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
16/03/2022 13:12

Officer In Charge Of Case:  
TP / AEIT /  
SI ANG YI TING, STEPHANIE  
Contact No.: 65476414

Classification Of Case:

NP168



