

# 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 ..... 26/11/2021 16:03 (SGT)  
Date of Accident ..... 25/11/2021 18:05 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... TELOK BLANGAH CRESCENT  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLW676L

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LIM SOK KEOW  
NRIC No ..... S0142451C  
Email Address ..... mavlim2002@yahoo.com  
Mobile Phone No ..... (Phone) +65-96161335  
Alternative Phone No ..... +65-96161335

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Jazz  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1498

### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... GA560107  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... LIM SOK KEOW

Date Of Birth ..... 27/07/1952  
Occupation ..... Indoor  
Date Of Driving Pass ..... 20/03/1973  
Driving experience ..... 48 YEARS AND 8 MONTHS  
Gender ..... Female  
Mobile Number ..... (Phone) +65-96161335  
Alt. Phone Number ..... +65-96161335  
Email Address ..... mavlim2002@yahoo.com  
Address ..... BLK 607 CHOA CHU KANG ST 62 #07-113  
Address complement ..... -  
Postcode ..... 680607  
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 ..... Side Swipe  
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 ..... Telok Blangah Neighbourhood Police Post  
Police Station Phone No ..... (Phone) +65-18002729999  
Alt. Police Station Phone No ..... (Fax) +65-63776526  
Police Station Address ..... Blk 51 Telok Blangah Drive #01-116/ 118 Singapore 100051  
Was notice of intended Prosecution given? ..... No  
If yes, against whom? ..... -

#### CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH AND POLICE REPORT ATTACHED T/20211125/2108

#### 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 ..... QX1253C  
Vehicle Manufacturer ..... Mercedes  
Vehicle Model ..... Sprinter  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Government

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) ..... -

## WITNESS DETAILS

### WITNESS 1

Name ..... DAVID HO  
Phone ..... (Phone) +65-97798006  
Email ..... -

SKETCH PLANIMPORTANT NOTICEVEHICLE NO:  
DATE OF ACCIDENT:SLW676L  
25/11/2021

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

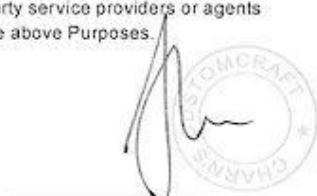
I understand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/be 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.
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/be 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  
26/11/2021  
Sketch Plan

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



Witnessed by Reporting Centre  
Personnel

Refer to attached sketch

## SKETCH PLAN #2

Describe Circumstances of the Accident VEHICLE NO: SLW676L DATE OF ACCIDENT: 25/4/2024

Refer to police report attached 1/2021/11/125/2102

REPORTING ONLY ()	OWN DAMAGE (✓)	THIRD PARTY ()	OWN WORKSHOP (✓)
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**Declaration Note:** DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

I/We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date &  
Time 26/11/2021

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

  
Witnessed by Reporting Centre  
Personnel



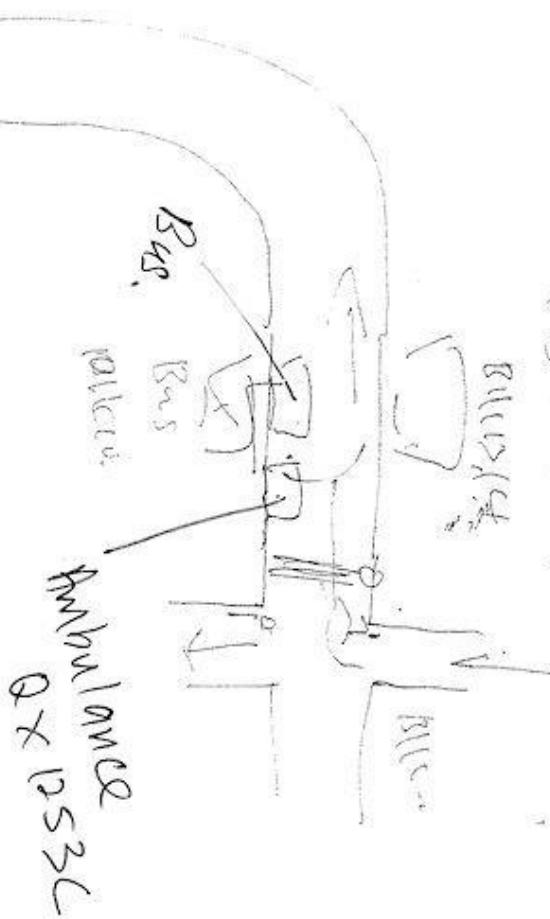
JDA

To corner

Block

SLOW  
back door.  
left side

0x153c



AM.  
26/11/2021

IMAGES



IMAGES #2

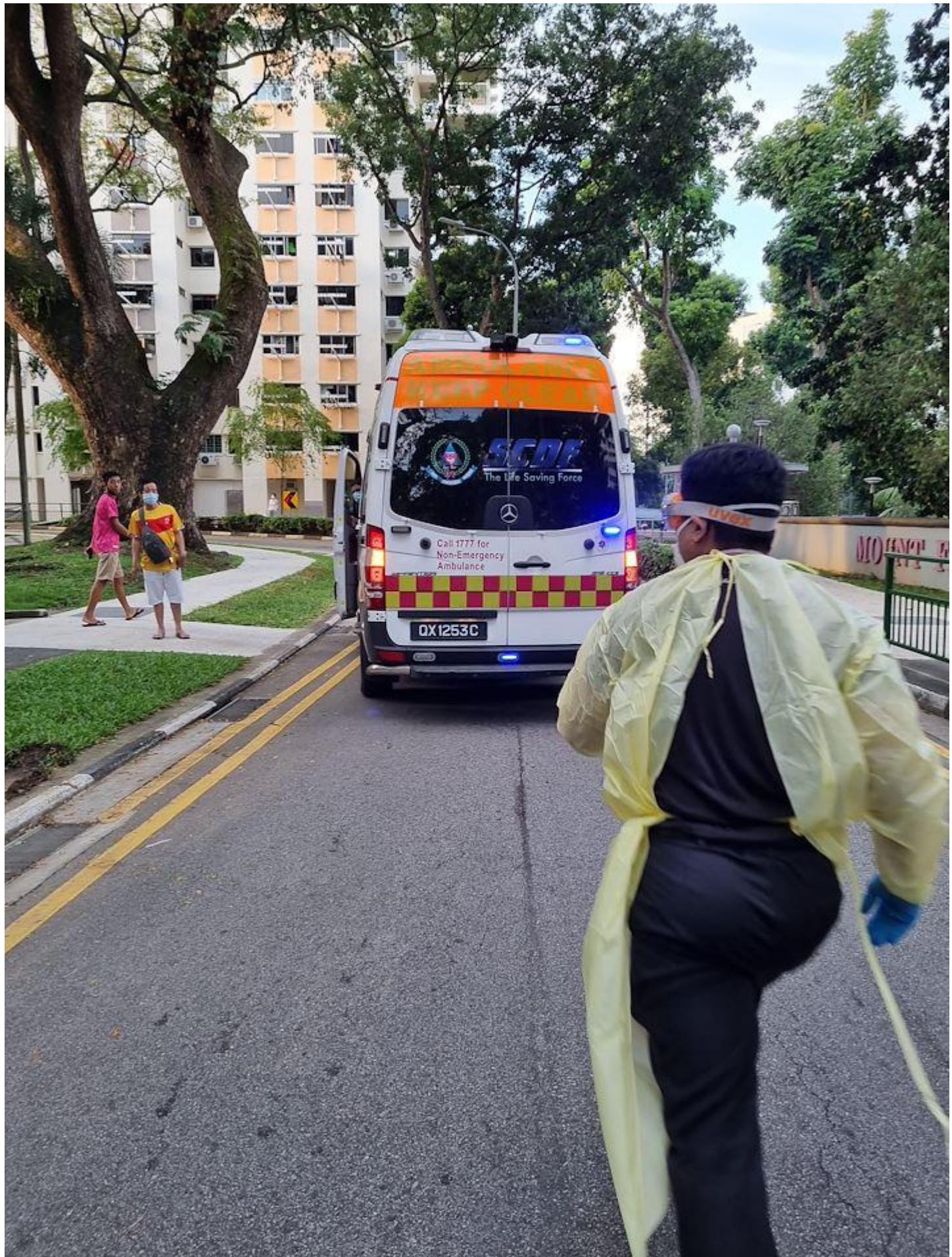


IMAGES #3



IMAGES #4





IMAGES #6



IMAGES #7



IMAGES #8



IMAGES #9



IMAGES #10



IMAGES #11



IMAGES #12






**SINGAPORE  
POLICE FORCE**


T/20211125/2108

Police Station Of Origin:  
 Telok Blangah NPP  
 51 Telok Blangah Drive #01-116  
 SINGAPORE 100055  
 Tel No: 1800-2729999

1 of 3

Report No. T/20211125/2108

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/11/2021 18:59	Vide Report No.:	Station Diary No.: 21
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**Informant's Particulars**

Name of Informant: LIM SOK KEOW			Address: APT BLK 607 CHOA CHU KANG STREET 62 #07-113 SINGAPORE 680607		
ID Type / ID No.: NRIC NO / S0142451C			Contact No.: Home/Office: Mobile: 96161335		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 69	Date of Birth: 27/07/1952	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: Chief operating officer/General Manager		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident: Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 25/11/2021 18:05	Type of Location: Straight Road
Location: TELOK BLANGAH CRESCENT			
Weather: Clear		Road Surface: Dry	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light
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
QX1253C	Ambulance				Slightly Damaged	0
SLW676L	Car	HONDA	JAZZ 1.3 CVT	Blue	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLW676L	AXA INSURANCE SINGAPORE PTE LTD	GA560107	26/01/2021	25/01/2022



**SINGAPORE  
POLICE FORCE**



T/20211125/2108

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

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Report No. T/20211125/2108

**CONTINUATION OF REPORT****Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

**Driver**

Name	LIM SOK KEOW	ID No.	S0142451C
Related Vehicle	SLW676L (Car)	Contact No.	96161335
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	NIL	Degree of Injury	NIL

**Brief Details.**

On 25/11/2021 at about 1805hr, I was driving, in my car, SLW676L, along Telok Blangah Crescent. Near the bus stop of Blk 10 Telok Blangah Crescent, it was a two lane road, I was on the right lane trying to drive by the bus which was at the bus stop. There was an ambulance, QX1253C, stationed behind the bus. I believed they were attending to a situation nearby. As I was about to drive pass the bus stop, the ambulance suddenly switched to the right lane, trying to overtake the bus, hitting against my back left door side. I was shocked and change lane to the left and stopped my vehicle, in front of the bus stop. I was sure that the ambulance did not on its siren as I was passing by the ambulance.

The ambulance initially wanted to drive off as they were in an emergency, but saw that my vehicle had stopped. One of the SCDF officer then alighted from the ambulance and informed me that they were in an emergency currently and could not stopped, he apologised and left. A passer-by, who had just alighted from the bus, witness the whole incident and approached me stating that he is willing to be a witness of this accident. He then advised me to lodge a police report. I would like to add that my in-vehicle camera was not working. I did not suffer any injuries.

## Witness particular:

Name: David Ho

HP: 97798006



**SINGAPORE  
POLICE FORCE**



T/20211125/2108

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

3 of 3

Report No. T/20211125/2108

## 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  
D /  
Sgt 3 TAN GUAN WEI

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
SI TAN JEOK LENG  
Contact No.: 65476151

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
25/11/2021 18:59

Classification Of Case: