

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 25/03/2022 11:43 (SGT)
Date of Accident 24/03/2022 15:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information ANG MO KIO AVENUE 8 TOWARDS ANG MO KIO AVENUE 6
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNE1888G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner PEA SIN HUP @PAY SIEN HERH
NRIC No S0179830H
Email Address PAY.CHONGLING@HOTMAIL.COM
Mobile Phone No (Phone) +65-82252282
Alternative Phone No +65-82252282

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Glc250
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 1991

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5122380942
Cover Note Number -

DRIVER

Name of Driver PEA SIN HUP @PAY SIEN HERH
NRIC No S0179830H

Date Of Birth	12/07/1954
Occupation	Outdoor
Date Of Driving Pass	05/01/1972
Driving experience	50 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82252282
Alt. Phone Number	+65-82252282
Email Address	PAY.CHONGLING@HOTMAIL.COM
Address	59 JALAN BINCHANG
Address complement	-
Postcode	578549
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 - 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	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

REFER TO THE POLICE REPORT

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	VIDEO WITH THE OWNER.
Was there any audio recorded?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKD6314D
Vehicle Manufacturer	Toyota
Vehicle Model	Wish
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

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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' 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;

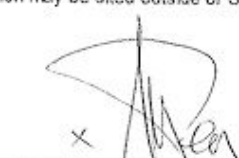
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or


(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

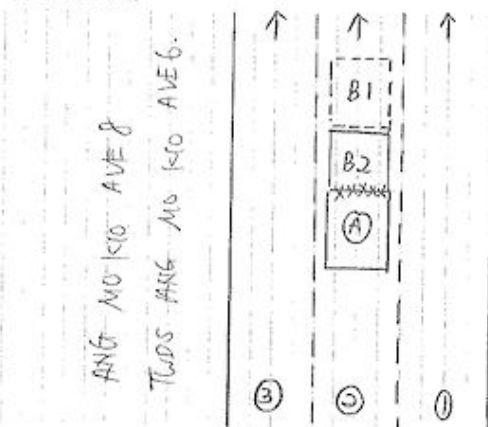
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan




VEHICLE: (A) SNE 1888G.
(B) SKD 6314D.


Describe Circumstances of the Accident

PLEASE REFER TO THE POLICE REPORT NO = T/26220324/7038.

Declaration

We declare the foregoing particulars are true in every respect.

x 
 Policyholder's Signature / Date & Time

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


 Witnessed by Reporting Centre Personnel





















**SINGAPORE
POLICE FORCE**



T/20220324/7038

1 of 3

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

Report No. T/20220324/7038

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/03/2022 18:13		Vide Report No.: F/20220324/0099		Station Diary No.:	
Informant's Particulars					
Name of Informant: PEA SIN HUP			Address: 59 JALAN BINCHANG SINGAPORE 578549		
ID Type / ID No.: NRIC NO / S0179830H			Contact No.: Home/Office: Mobile: 82252282		
Nationality: SINGAPORE CITIZEN			Email: pay.chongling@hotmail.com		
Sex: Male	Age: 67	Date of Birth: 12/07/1954	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: manager			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/03/2022 15:00	Type of Location: Straight Road
Location: ANG MO KIO AVENUE 8				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: HEAD ON FRONT				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKD6314D	Car					0
SNE1888G	Car			Black		1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNE1888G		5122380942	03/06/2021	27/06/2022



**SINGAPORE
POLICE FORCE**



T/20220324/7038

2 of 3

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

Report No. T/20220324/7038

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	PEA SIN HUP	ID No.	S0179830H
Related Vehicle	NIL	Contact No.	92339355
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

OND TIMN THE STATED DATE AE, I'M DRIVING MY VEHICLE (A) SNE 1888 G TRAVELLING ALONG ANG MO KIO AVE 8 TWDS ANG MO KIO AVE 6. VEHICLE (B) SKD 6314 D WAS STOPPED INFRONT ME DUE TO TRAFFIC LIGHT, WHEN THE TRAFFICE LIGHT TURN GREEN, VEHICLE (B) STARTED TO ROLL BACKWARDS, I HORNED TO ALERT VEHICLE BUT THEY CONTINUED TO ROLL BACKWARDS AND HIT INTO THE FRONT PORTION OF MY VEHICLE. I ALIGHTED AND REALISED THAT THE FRONT OF MY VEHICLE WAS DAMAGED. DRIVER OF VEHICLE (B) SKD 6314 D REFUSED TO PROVIDE HER PARTICULARS AND SAID THAT I WAS AT FAULT. SHE THEN LEFT THE SCENE WITHOUT EXCHANGING PARTICULARS AND BEFORE I COULD TAKE PROPER SCENE PHOTOS. HOWEVER, THE ACCIDENT WAS RECORDED CLEARLY BY MY INCAR CAMERA.

I AM REPORTING THIS FOR INSURANCE CLAIMS PURPOSES, I WISH ALSO ADD THAT NO ONE WAS INJURED DURING TIME OF ACCIDENT.



**SINGAPORE
POLICE FORCE**

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



T/20220324/7038

3 of 3

Report No. T/20220324/7038

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 /
CHONG GUAN FATT
Contact No.: 65476083

NP168

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

Date/Time:
24/03/2022 18:13

Classification Of Case: