

## 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 .....              | 14/04/2022 18:27 (SGT)        |
| Date of Accident .....                | 14/04/2022 14:00 (SGT)        |
| Exact Location of Accident .....      | Singapore                     |
| Additional Location Information ..... | PIE TWDS CHANGI NEAR EXIT 16A |
| Country/State of Loss .....           | Singapore                     |

### DETAILS OF OWN VEHICLE

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SMK5398H |
|-----------------------------------|----------|

#### INSURED/POLICYHOLDER

|                                |                      |
|--------------------------------|----------------------|
| Is company? .....              | No                   |
| Name Of Registered Owner ..... | DORIS LEE KIM NEO    |
| NRIC No .....                  | SXXXX187I            |
| Email Address .....            | DEC_DOR@YAHOO.COM.SG |
| Mobile Phone No .....          | (Phone) +65-98343157 |
| Alternative Phone No .....     | +65-98343157         |

#### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer .....   | Toyota                    |
| Model .....  | Vios                      |
| 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 .....   | 1500                      |

#### INSURANCE COMPANY

|                                 |  |
|---------------------------------|--|
| Name of Insurance Company ..... | NTUC Income Insurance Co-operative Ltd |
| Type of Coverage .....          | Comprehensive                          |
| Fleet Policy .....              | No                                     |
| Policy Number .....             | 5116476928-01                          |
| Cover Note Number .....         | DRIVO CLASSIC                          |

#### DRIVER

|                      |                          |
|----------------------|--------------------------|
| Name of Driver ..... | PANG SHUN YANG, NICHOLAS |
| NRIC No .....        | SXXXX539I                |

|  |                                  |
|--|----------------------------------|
| Date Of Birth .....  | 15/12/1990                       |
| Occupation .....   | Indoor                           |
| Date Of Driving Pass .....   | 22/05/2010                       |
| Driving experience .....   | 11 YEARS AND 11 MONTHS           |
| Gender .....   | Male                             |
| Mobile Number .....  | (Phone) +65-90122331             |
| Alt. Phone Number .....  | -                                |
| Email Address .....  | PANGSHUNYANG@GMAIL.COM           |
| Address .....  | BLK 525C PASIR RIS ST 51 #08-587 |
| Address complement .....   | -                                |
| Postcode .....   | 513525                           |
| Is the driver the policyholder? .....                              | No                               |
| If No, Relationship of the Driver with the Insured .....           | Child                            |
| 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 .....   | Chain Collision |
| Weather Conditions ..... | Clear           |
| Road Surface .....       | Dry             |

#### OTHER INFORMATION

|   |     |
|---|-----|
| Was any foreign vehicle involved in the accident? .....   | No  |
| Number of vehicles involved in the accident .....   | 5   |
| Was anybody injured in the Accident? .....  | Yes |
| Was any injured conveyed to hospital by ambulance? .....  | Yes |
| 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 .....                       | Changi Neighbourhood Police Centre |
| Police Station Phone No .....                   | (Phone) +65-18005872999            |
| Alt. Police Station Phone No .....              | (Fax) +65-65872900                 |
| Police Station Address .....                    | 9 Simei Street 2 Singapore 529914  |
| Was notice of intended Prosecution given? ..... | No                                 |
| If yes, against whom? .....                     | -                                  |

#### CIRCUMSTANCES OF ACCIDENT

SEE ATTACHED POLICE REPORT NO : T/20220414/2063

#### 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 ..... | SD CARD WITH TRAFFIC POLICE |
| Was there any audio recorded? .....                     | No                          |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SKK3344A |
| Vehicle Manufacturer .....        | Mercedes |
| Vehicle Model .....               | -        |
| Vehicle Variant .....             | -        |
| Vehicle Colour .....              | -        |

|   |                      |
|---|----------------------|
| Vehicle Category .....                        | Private car          |
| Name of Driver .....                          | TAN WEE YEE          |
| NRIC No .....                                 | SXXXX308Z            |
| Contact Number .....                          | (Phone) +65-98793344 |
| Address .....                                 | -                    |
| Address complement .....                      | -                    |
| Postcode .....                                | -                    |
| Insurance Company Name .....                  | -                    |
| Nature Of Damage .....                        | -                    |
| Details of property damaged in accident ..... | VEHICLE B            |
| No. Of Passenger (Including Driver) .....     | -                    |

#### DETAILS OF OTHER VEHICLE PROPERTY 2

|   |                        |
|---|------------------------|
| Vehicle Registration Number .....             | SKL86J                 |
| Vehicle Manufacturer .....                    | Lexus                  |
| Vehicle Model .....                           | -                      |
| Vehicle Variant .....                         | -                      |
| Vehicle Colour .....                          | -                      |
| Vehicle Category .....                        | Private car            |
| Name of Driver .....                          | LUI TAI LONG THADDEAUS |
| NRIC No .....                                 | SXXXX782B              |
| Contact Number .....                          | (Phone) +65-91767168   |
| Address .....                                 | -                      |
| Address complement .....                      | -                      |
| Postcode .....                                | -                      |
| Insurance Company Name .....                  | -                      |
| Nature Of Damage .....                        | -                      |
| Details of property damaged in accident ..... | VEHICLE C              |
| No. Of Passenger (Including Driver) .....     | -                      |

#### DETAILS OF OTHER VEHICLE PROPERTY 3

|   |                                   |
|---|-----------------------------------|
| Vehicle Registration Number .....             | SJT7344M                          |
| Vehicle Manufacturer .....                    | Kia                               |
| Vehicle Model .....                           | -                                 |
| Vehicle Variant .....                         | -                                 |
| Vehicle Colour .....                          | -                                 |
| Vehicle Category .....                        | Private car                       |
| Name of Driver .....                          | AHMAD FAWWAZ AIDID BIN MOHD NASIR |
| NRIC No .....                                 | SXXXX356F                         |
| Contact Number .....                          | (Phone) +65-98184608              |
| Address .....                                 | -                                 |
| Address complement .....                      | -                                 |
| Postcode .....                                | -                                 |
| Insurance Company Name .....                  | -                                 |
| Nature Of Damage .....                        | -                                 |
| Details of property damaged in accident ..... | VEHICLE D                         |
| No. Of Passenger (Including Driver) .....     | -                                 |

#### DETAILS OF OTHER VEHICLE PROPERTY 4

|                                   |            |
|-----------------------------------|------------|
| Vehicle Registration Number ..... | UNKNOWN    |
| Vehicle Manufacturer .....        | -          |
| Vehicle Model .....               | -          |
| Vehicle Variant .....             | -          |
| Vehicle Colour .....              | -          |
| Vehicle Category .....            | Motorcycle |
| Name of Driver .....              | -          |
| Contact Number .....              | -          |
| Address .....                     | -          |
| Address complement .....          | -          |
| Postcode .....                    | -          |
| Insurance Company Name .....      | -          |
| Nature Of Damage .....            | -          |

Details of property damaged in accident ..... VEHICLE E  
No. Of Passenger (Including Driver) ..... -

#### INJURED PERSONS DETAILS

INJURED 1

Name of injured person ..... UNKNOWN BIKE  
Gender ..... Male  
Phone No ..... -  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... -  
Injured person in which vehicle? ..... UNKNOWN  
Were seat belts worn? ..... -  
Was this injured conveyed to hospital by ambulance? ..... Yes

## SKETCH PLAN

## IMPORTANT NOTICE

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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

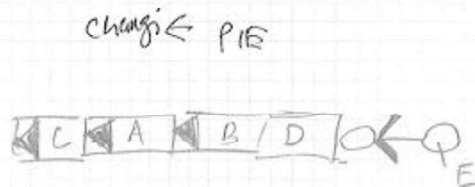
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



A: SMK 5398H  
 B: SKK 3344A  
 C: SKL 86J  
 D: SJT 7344M  
 E: Unknown

## Describe Circumstances of the Accident

See attached Police Report No: T/202204/4/2063.

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &  
Time

1/9m 14/04/2022 1740 hrs  
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**



T/20220414/2063

1 of 4

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

Report No. T/20220414/2063

**REPORT OF A TRAFFIC ACCIDENT**

|  |                                     |                          |
|--|-------------------------------------|--------------------------|
| Date/Time Report Made:<br>14/04/2022 16:12 | Vide Report No.:<br>E/20220414/0078 | Station Diary No.:<br>36 |
|--|-------------------------------------|--------------------------|

**Informant's Particulars**

|  |            |                              |   |                            |  |
|--|------------|------------------------------|---|----------------------------|--|
| Name of Informant:<br>PANG SHUN YANG, NICHOLAS |            |                              | Address:<br>APT BLK 525C PASIR RIS STREET 51 #08-587 SINGAPORE 513525 |                            |  |
| ID Type / ID No.:<br>NRIC NO / S9049539I       |            |                              | Contact No.:<br>Home/Office: Mobile: 90122331                         |                            |  |
| Nationality:<br>SINGAPORE CITIZEN              |            |                              | Email:<br>pangshunyang@gmail.com                                      |                            |  |
| Sex:<br>Male                                   | Age:<br>31 | Date of Birth:<br>15/12/1990 | Type of Informant:<br>Driver  |                            |  |
| Race:<br>Chinese                               |            |                              | Language:<br>English  | Institution / School Name: |  |
| Occupation:<br>CIVIL SERVANT                   |            |                              | Driving Licence Information:<br>Class: 3 Date of Expiry:              |                            |  |

**General Information of the Accident**

|  |            |                                    |  |                                     |
|--|------------|------------------------------------|--|-------------------------------------|
| Type of Accident:  | Non-Injury | Drink Drive:<br>No                 | Date/Time of Accident:<br>14/04/2022 14:00 | Type of Location:<br>Straight Road  |
| Location:<br><br>PAN-ISLAND EXPRESSWAY                       |            |                                    |  |                                     |
| Weather:<br>Sunny  |            | Road Surface:<br>Dry               |  | Road Speed Limit:<br>80 Km/h        |
| Traffic Flow:<br>One Way                                     |            | Traffic Control:<br>Not Controlled |  | Traffic Volume:<br>Moderate         |
| Type of Collision:<br>Between Moving Vehicles - Head To Rear |            |                                    |  | Anyone conveyed by ambulance:<br>No |

**Details of Vehicle Involved**

| Vehicle No. | Type | Make          | Model                                   | Color | Condition         | No of Passenger |
|-------------|------|---------------|---|-------|-------------------|-----------------|
| SJT7344M    | Car  | KIA           | CERATO FORTE 1.6 AT SX ABS D/AB 2WD 4DR | Red   | Seriously Damaged | 0               |
| SKK3344A    | Car  | MERCEDES BENZ | E180 SEDAN AVG                          | Blue  | Slightly Damaged  | 0               |





**SINGAPORE  
POLICE FORCE**



T/20220414/2063

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

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Report No. T/20220414/2063

## CONTINUATION OF REPORT

| Details of Vehicle Involved |      |        |   |       |                     |                 |
|-----------------------------|------|--------|---|-------|---------------------|-----------------|
| Vehicle No.                 | Type | Make   | Model   | Color | Condition           | No of Passenger |
| SKL86J                      | Car  | TOYOTA | LEXUS<br>UX200 5DR<br>SUV (AT)<br>(2WD)<br>LUXURY | Grey  | Slightly<br>Damaged | 0               |
| SMK5398H                    | Car  | TOYOTA | VIOS 1.5 G<br>(AUTO)                              | Brown | Slightly<br>Damaged | 0               |

| Details of Person Involved        |                                    |                                |   |
|-----------------------------------|------------------------------------|--------------------------------|---|
| Any Pedestrian Involved: No       |                                    |                                |   |
| No. of Pedestrians Injured: NIL   |                                    | Use of Pedestrian Crossing: NA |   |
| Driver                            |                                    |                                |   |
| Name                              | AHMAD FAWWAZ 'AIDID BIN MOHD NASIR |                                | ID No. S9347356F  |
| Related Vehicle                   | NIL                                |                                | Contact No. 98184608  |
| Hospital/Clinic                   | NIL                                |                                | Class of Driving Licence & Expiry Date<br>Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                                | Date Discharge                 | NIL   |
| No. of Days granted Medical Leave | NIL                                | Degree of Injury               | NIL   |
| Driver                            |                                    |                                |   |
| Name                              | PANG SHUN YANG, NICHOLAS           |                                | ID No. S9049539I  |
| Related Vehicle                   | NIL                                |                                | Contact No. 90122331  |
| Hospital/Clinic                   | NIL                                |                                | Class of Driving Licence & Expiry Date<br>Class: 3<br>Date of Expiry: NIL   |
| Date Treatment                    | NIL                                | Date Discharge                 | NIL   |
| No. of Days granted Medical Leave | NIL                                | Degree of Injury               | NIL   |
| Driver                            |                                    |                                |   |
| Name                              | LUI TAO LONG, THADDEAUS            |                                | ID No. S8807782B  |
| Related Vehicle                   | NIL                                |                                | Contact No. 91767168  |
| Hospital/Clinic                   | NIL                                |                                | Class of Driving Licence & Expiry Date<br>Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                                | Date Discharge                 | NIL   |
| No. of Days granted Medical Leave | NIL                                | Degree of Injury               | NIL   |





**SINGAPORE  
POLICE FORCE**



T/20220414/2063

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Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999

Report No. T/20220414/2063

## CONTINUATION OF REPORT

| Driver                            |                          |  |                                   |
|-----------------------------------|--------------------------|--|-----------------------------------|
| Name                              | TAN WEE YEE (CHEN WEIYU) | ID No.                                 | S8009308Z                         |
| Related Vehicle                   | NIL                      | Contact No.                            | 98793344                          |
| Hospital/Clinic                   | NIL                      | Class of Driving Licence & Expiry Date | Class: NIL<br>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 date, time and location, I was driving on the extreme right lane (1st lane) of a 3 lane highway. I was travelling on PIE towards Changi near exit 16A at a speed of 80km/h - 90km/h. Suddenly the car in front (SKL86J) jam break, in which I managed to stop in time. However a few seconds later, there I felt an impact from the rear of my car. This caused a chain collision as my vehicle (SMK5398H) hit the car in front. I stepped out of my vehicle, to see a Mercedes Benz (SKK3344A) that has collided into rear boot. Behind her was another car (SJT7344M) that collided into the rear of the car. This resulted my front bonnet and rear boot to be dented inwards. The accident involved 5 cars and a motorcycle, I was the 3rd car in the chain. All drivers involved exchanged particulars and shortly when TP arrived, we were instructed to lodge a police report.

I do not know the cost of damage. I am not injured and do not need medical attention. I am lodging this report as instructed by the traffic police officer at scene.

## Collision breakdown and driver details:

1st vehicle: car unknown plate number  
2nd vehicle: SKL86J driver S8807782B (HP 91767168)  
3rd vehicle: SMK5398H driver S9049539I (complainant)  
4th vehicle: SKK3344A driver S800938Z (HP 96793344)  
5th vehicle: SJT7344M driver S9347356F (HP 98184608)  
6th vehicle: motorcycle unknown plate number



SINGAPORE  
POLICE FORCE

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Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999



T/20220414/2063

4 of 4

Report No. T/20220414/2063

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 LENNY NATASHA BINTE  
ABDULLAH

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
Other MUHAMMAD NOOR BIN ABDUL  
RAHMAN  
Contact No.: 65476201

Signature Of Informant:

Date/Time:  
14/04/2022 16:12

Classification Of Case:

NP168