

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	22/04/2022 16:08 (SGT)
Date of Accident	21/04/2022 13:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BEDOK NORTH ROAD (GRASS PATCH NEAR BEDOK TOWN SEC SCHOOL)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW5908Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SIM PEI NI (SHEN PEINI)
NRIC No	S8243066J
Email Address	SPN_RACHEL@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-98764762
Alternative Phone No	+65-98764762

VEHICLE PARTICULARS

Manufacturer	Maserati
Model	GRANTURISMO
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	4200

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SP2001284953
Cover Note Number	-

DRIVER

Name of Driver	TERRY LOW KOK HOW
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NRIC No	S9434462Z
Date Of Birth	18/09/1994
Occupation	Indoor
Date Of Driving Pass	19/01/2015
Driving experience	7 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91901820
Alt. Phone Number	-
Email Address	TERRYLOW018@GMAIL.COM
Address	528 BEDOK NORTH ST 3 #05-550 S460528
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	No Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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 ATTACHED 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

SKETCH PLAN

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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

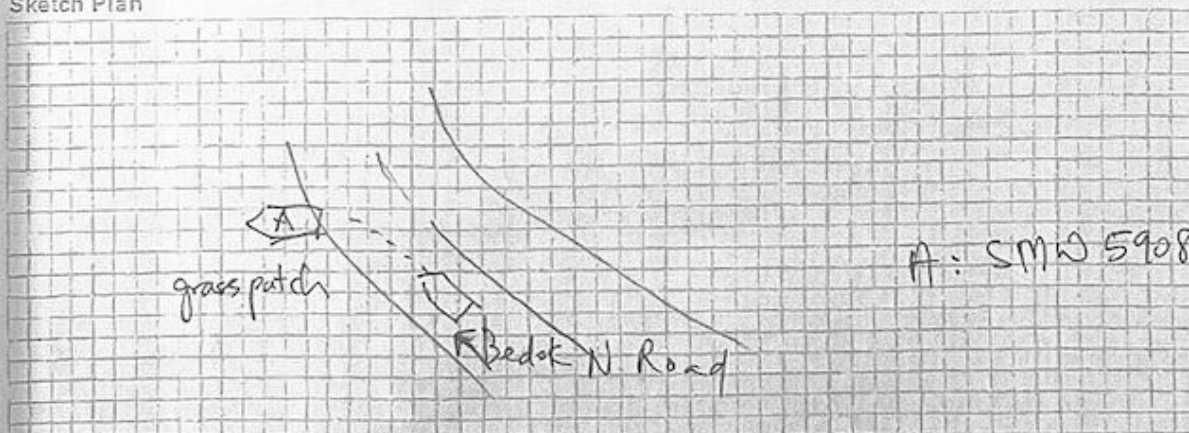
(c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

R
Policyholder's Signature / Date & Time

[Signature] 21/4/2022 5:30 pm
Driver's Signature (if driver is not the policyholder) / Date & Time.

[Stamp]
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

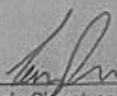
On 21/4/2022 at around 1 pm, it was raining and wet when I was driving along Bedok North Road suddenly the car skidded onto the left side of the road & landed on the grass patch.

Declaration

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

R

Policyholder's Signature / Date & Time



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

21/4/2022 5:30pm



Witnessed by Reporting Centre Personnel





























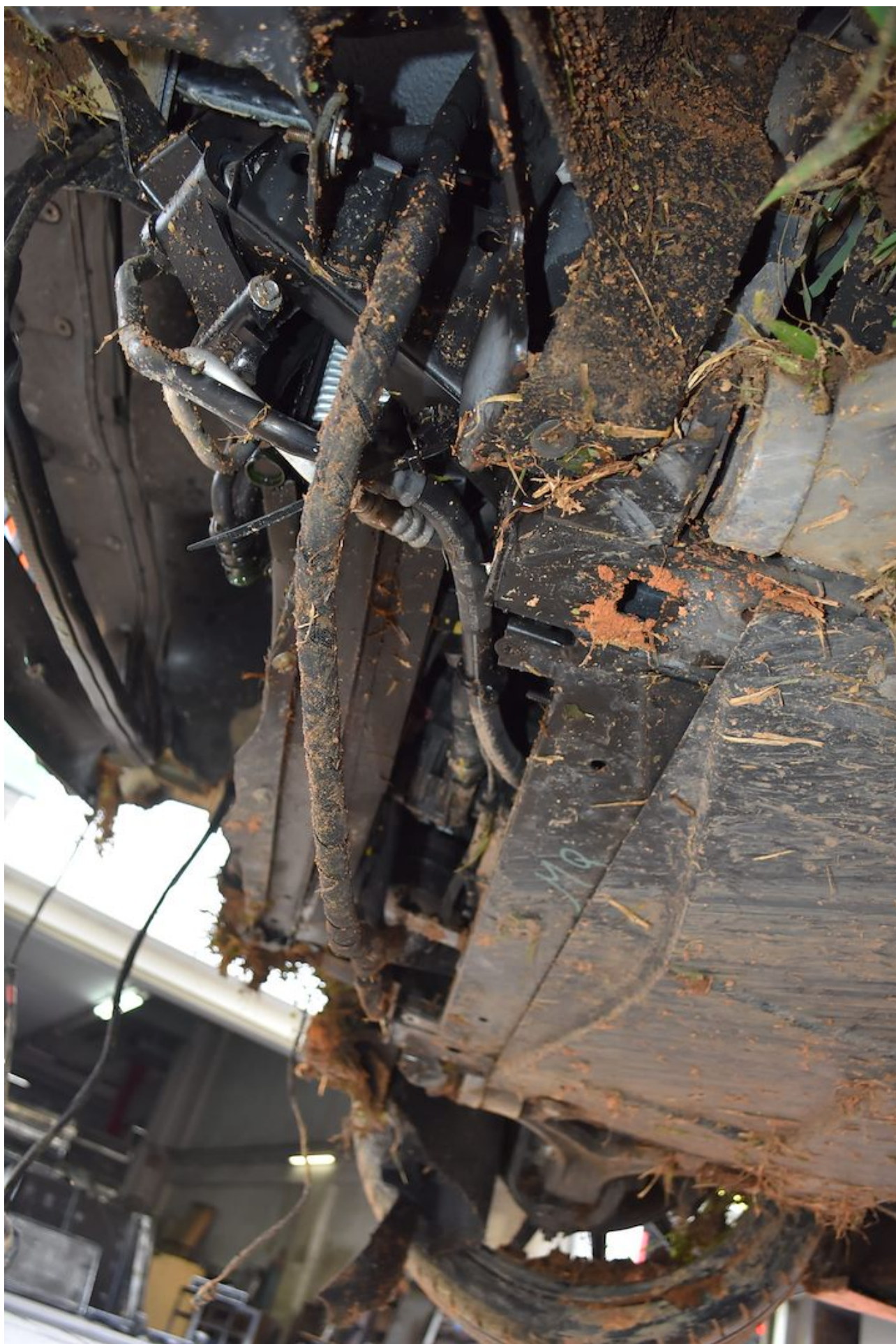








































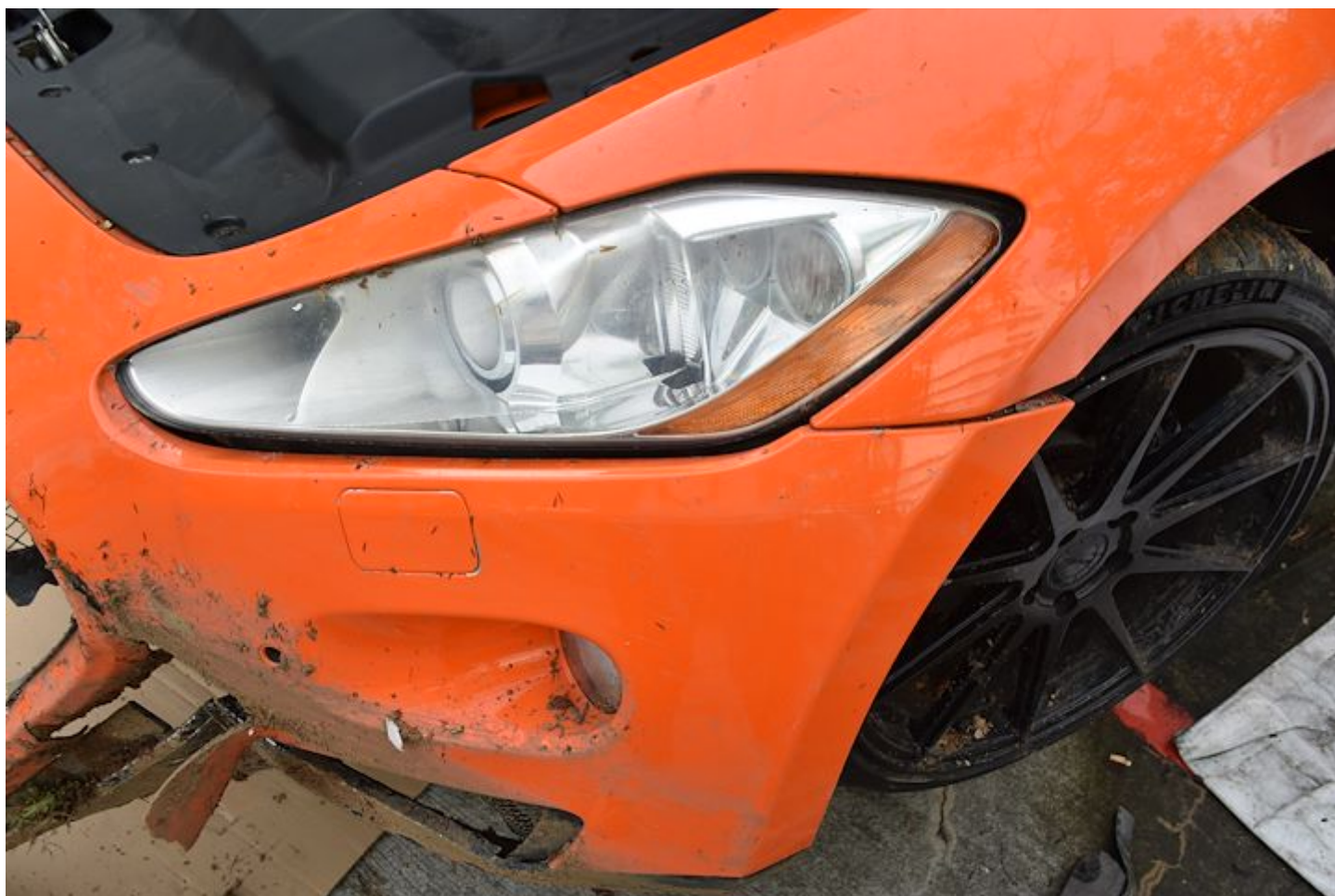


















**SINGAPORE
POLICE FORCE**



T/20220421/7043

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

1 of 3

Report No. T/20220421/7043

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/04/2022 19:16		Vide Report No.: G/20220421/0101		Station Diary No.:
Informant's Particulars				
Name of Informant: TERRY LOW KOK HOW		Address: 528 BEDOK NORTH STREET 3 #05-550 SINGAPORE 460528		
ID Type / ID No.: NRIC NO / S9434462Z		Contact No.: Home/Office: Mobile: 91901820		
Nationality: SINGAPORE CITIZEN		Email: terrylow018@gmail.com		
Sex: Male	Age: 27	Date of Birth: 18/09/1994	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: Admin		Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/04/2022 13:00	Type of Location: Bend
Location: BEDOK NORTH ROAD				
Weather: Raining		Road Surface: Wet	Road Speed Limit: 70 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Others			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMW5908Z	Car					0

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



**SINGAPORE
POLICE FORCE**



T/20220421/7043

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

2 of 3

Report No. T/20220421/7043

CONTINUATION OF REPORT

Driver			
Name	TERRY LOW KOK HOW		ID No. S9434462Z
Related Vehicle	SMW5908Z (Car)		Contact No. 91901820
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of NIL

Brief Details.

On 21/04/2022 at around 1pm, it was raining and wet when i was driving along bedok north road. Suddenly the car skidded onto the left side of the road and landed on the grass patch

**SINGAPORE
POLICE FORCE**

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



T/20220421/7043

3 of 3

Report No. T/20220421/7043

CONTINUATION OF REPORTSketch 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 /
NUR ADELINA BINTE MOHAMMAD FUAT
Contact No.: 65476066

NP168

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

Date/Time:
21/04/2022 19:16

Classification Of Case:



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SK0L224M 0005 Vehicle Registration No: SMW 5908 Z

Name (as shown in NRIC): Terry Low Kok How NRIC/FIN/Passport No: 8 xxx xx

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 91901520

Email Address: TerryLow98@gmail.com

Date of Accident: 21/04/2022 Time of Accident: 13.00

Place of Accident: Bedok N Road (grass patch near Bedok Town Sec. School)

Insurance Company: Allianz

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- ① To correct the no. of vehicle involved to 1.
- ② To include the police report in the report
- ③ To mention in the description that one small tree was damaged.

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: