

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	01/07/2022 16:45 (SGT)
Reported by	Both
Date of Accident	30/06/2022 20:15 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	Towards Yishun (After Ang Mo Kio Ave 5, ITE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBF118P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM MONG KEA
NRIC No	S1211898H
Email Address	greatcentury@hotmail.com
Mobile Phone No	(Phone) +65-90082463
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Serena
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	2000

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00135162200

DRIVER

Name of Driver	LIM MONG KEA
NRIC No	S1211898H
Date Of Birth	21/09/1956
Occupation	Outdoor

Date Of Driving Pass	13/12/1977
Driving experience	44 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90082463
Alt. Phone Number	-
Email Address	greatcentury@hotmail.com
Address	Blk 356B Anchorvale Lane #03-55
Address complement	-
Postcode	542356
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JJN6147
Vehicle Category	Private car

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bishan Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005529999
Alt. Police Station Phone No	(Fax) +65-65561905
Police Station Address	20 Bishan Street 23 Singapore 579757
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to police report.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKZ103U
Vehicle Manufacturer	Mercedes
Vehicle Model	-
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	JJN6147
Vehicle Manufacturer	-
Vehicle Model	-
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM MONG KEA
Gender	Male
Phone No	(Phone) +65-90082463
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SBF118P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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:

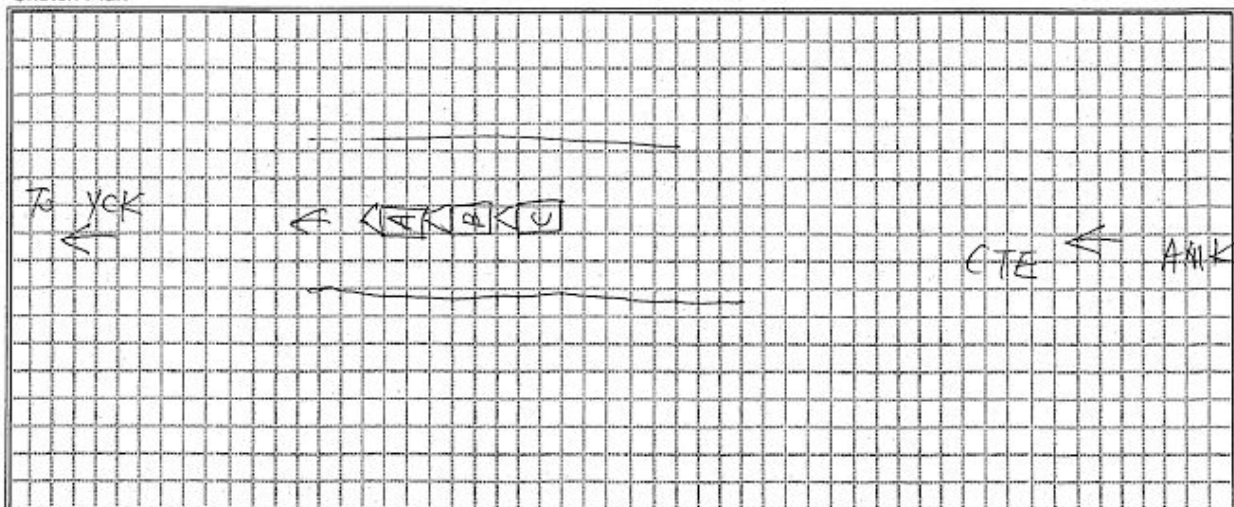
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 1/7/22
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) Soh Jit Hoon

Sketch Plan



A SAF 118 P B ~~GDE~~ SKZ 1034 C JJA 6147

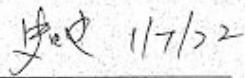
1

Describe Circumstance of the Accident


Please refer to police report for details.

Declaration

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

 1/7/22
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) Soh Jit Hoon











**SINGAPORE
POLICE FORCE**



T/20220701/2023

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20220701/2023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/07/2022 11:58		Vide Report No.:		Station Diary No.: 32
Informant's Particulars				
Name of Informant: LIM MONG KEA		Address: APT BLK 356B ANCHORVALE LANE #03-55 SINGAPORE 542356		
ID Type / ID No.: NRIC NO / S1211898H		Contact No.: Home/Office: Mobile: 90082463		
Nationality: SINGAPORE CITIZEN		Email: greatcentury@hotmail.com		
Sex: Male	Age: 65	Date of Birth: 21/09/1956	Type of Informant: Driver	
Race: Chinese		Language: Chinese	Institution / School Name:	
Occupation: SELF-EMPLOYED		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 30/06/2022 20:15	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
JJN6147	Car	TOYOTA		Gold	Seriously Damaged	1
SBF118P	Car	NISSAN	SERENA 1.2L HIGHWAY STAR PREMIUM E	Grey	Slightly Damaged	0
SKZ103U	Car	MERCEDES BENZ	E250 SEDAN (SR)(R18)	Silver	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20220701/2023

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Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20220701/2023

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBF118P	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001351 62200	01/06/2022	17/07/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TAN KOK HANG		ID No.	NIL
Related Vehicle	JJN6147 (Car)		Contact No.	88926205
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
Driver				
Name	LIM MONG KEA		ID No.	S1211898H
Related Vehicle	SBF118P (Car)		Contact No.	90082463
Hospital/Clinic	SIN MING CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	01/07/2022		Date Discharge	01/07/2022
No. of Days granted Medical Leave	05		Degree of Injury	Slight
Driver				
Name	MELVIN TAY YAO LOON		ID No.	S9548147G
Related Vehicle	SKZ103U (Car)		Contact No.	98175470
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



**SINGAPORE
POLICE FORCE**



T/20220701/2023

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20220701/2023

CONTINUATION OF REPORT**Brief Details.**

On 30/06/2022 at about 2015hrs, I was driving my Nissan car (SBF118P) along CTE (after ITE Central College but before Yio Chu Kang Flyover) on the center of 3 lanes when all of a sudden, I felt an impact from the rear of my car. I wish to clarify that I was driving at a constant speed and did not slow down or stop abruptly prior to the collision. Prior to the collision, I was driving normally on the road and I did not notice anything out of the ordinary. As such, I am not aware of how or why the accident suddenly occurred. After I felt the impact, as there were many oncoming vehicles constantly passing by since the accident location was along CTE, I moved my car to the side of the road before alighting to make a check. Only after I alighted from my car did I notice that my car was involved in a 3-car chain collision. My car was hit in the rear by a Mercedes Benz vehicle (SKZ103U) who was in turn hit by a Toyota Malaysian car (JJN6147). As a result of the collision, the rear of my Nissan car, both the front and rear of the Mercedes Benz in the middle, and the front of the Toyota Malaysian car were damaged. I am unsure of the cost of repair for all the vehicles involved.

At that point of time, all of us had no visible injuries thus we left after exchanging particulars.

Subsequently on 01/07/2022, I felt pain due to the impact of the accident thus I proceeded to Sin Ming Clinic to seek medical assistance and was given 5 days of MC from 01/07/2022 to 05/07/2022. My car possesses in car camera footage facing both the front and back. My in car camera captured footage of the accident.



**SINGAPORE
POLICE FORCE**



T/20220701/2023

4 of 4

Report No. T/20220701/2023

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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:

E /

SGT 2 TAN YI XIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
01/07/2022 11:58

Officer In Charge Of Case:
TP / AEIT /
Other MUHAMMAD NOOR BIN ABDUL
RAHMAN
Contact No.: 65476219

Classification Of Case:

NP168

中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

N SN

AN0365A

Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00135162200

Engine No.: HR12224393K

Cha. No.: JN1EBAC27Z0001051

1. Index Mark and Registration
Number of Vehicle

SBF118P

2. Name of Policy Holder

LIM MONG KEA

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment01/06/2022
(13:19:12)

Named Drivers Ex Sect. I

S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

S\$3,000.00

Ex Sect. I - Age >= 26

S\$500.00

* Age as at date of accident

EX ON WINDSCREEN.

S\$100.00

4. Date of Expiry of Insurance

17/07/2023

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: MAYBANK

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

動力企業

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

HIGH POWER ENTERPRISE

Authorised Officer

HIGH POWER ENTERPRISE

• Blk 150 Bishan Street 11

#01-137 Singapore 570150

Tel: 6258 1968 Fax: 6258 7167

Email: gi@highpower.sg

Jenny Lim

杨亚美

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com