

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 Actual 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 27/08/2022 10:42 (SGT)
Reported by Both
Date of Accident 22/08/2022 20:20 (SGT)
Exact Location of Accident Singapore 757177
Additional Location Information CAR PARK ENTRANCE OF 200 WOODLANDS INDUSTRIAL PARK E7
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMG862M

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YEO KONG LEONG
NRIC No S0188544H
Email Address yeo.kongleong@gmail.com
Mobile Phone No (Phone) +65-94553772
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
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 1798

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Policy Number / Cover Note Number GA558942

DRIVER

Name of Driver YEO KONG LEONG
NRIC No S0188544H
Date Of Birth 06/08/1950

Occupation	Indoor
Date Of Driving Pass	05/07/1972
Driving experience	50 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-94553772
Alt. Phone Number	-
Email Address	yeo.kongleong@gmail.com
Address	BLK 803 WOODLANDS STREET 81
Address complement	#12-65
Postcode	730803
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)	2
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	-

PASSENGER 1

Name	LOW WAI CHEE
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMW6135E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SABTU BIN OSMAN
NRIC No	S6900468G
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

PASSENGER 1

Name	UNKNOWN
Gender	Female

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

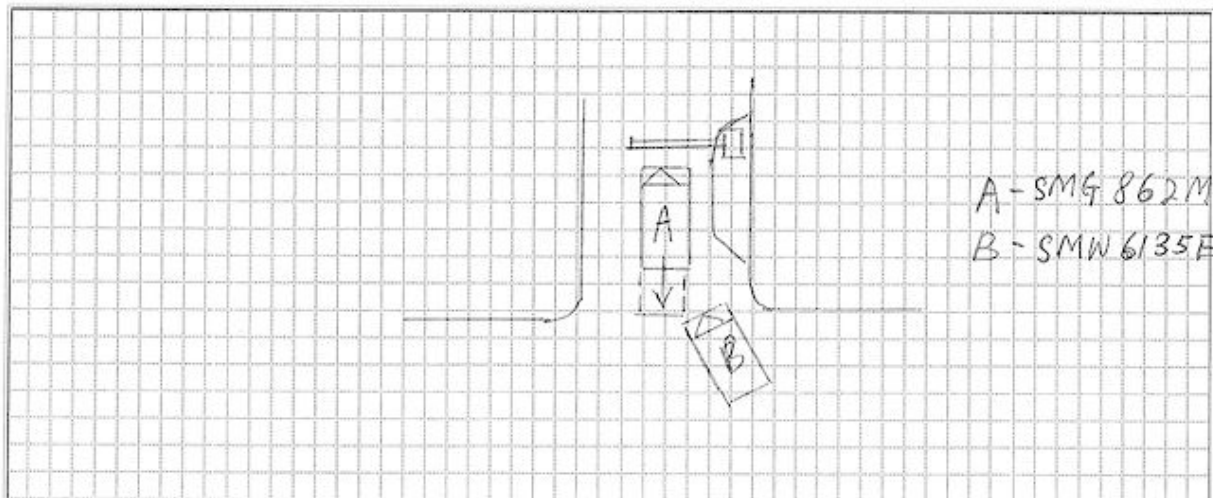
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Sketch Plan



Describe Circumstance of the Accident

Incident Happened at car park entrance located at Zoo, Woodlands Industrial Park ET #01-01 (757177) when I reverse my car to detect the gantry to let the post move - up. and my car hit on the car behind me, I think he is too near to my car.

mlluo

Declaration

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

mlluo
Policyholder's Signature / Date & Time

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

Ch 23/8/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)













SINGAPORE
POLICE FORCE



L/20220823/7069

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POLICE REPORT (NP299)

Report No. L/20220823/7069

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 23/08/2022 20:46	Vide Report No.		Station Diary No.
Name Of Informant YEO KONG LEONG	Address 803 WOODLANDS STREET 81 #12-65 SINGAPORE 730803		
ID Type / ID No. NRIC NO / S0188544H	Contact No. Home/Office: Mobile: 94553772		
Nationality SINGAPORE CITIZEN	Email Address YEO.KONGLEONG@GMAIL.COM		
Occupation Building technician	Sex Male	Age 72	Date of Birth 06/08/1950
Institution/School Name	Race Chinese		
Date/Time Of Incident 22/08/2022 20:30 - 22/08/2022 20:30	Language English		
	Location Of Incident 200 WOODLANDS INDUSTRIAL PARK E7 #01-01 WOODLANDS RECREATION CENTRE SINGAPORE 757177		

Brief details.

Both of us took the picture and video for both cars, and exchanged the IC and driving licence particulars with NO injury.

Both car body having a minor damage to the bumper only.

Both of us exchanged the Handphone contact number.

My wife was my passenger.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 23/08/2022 20:46
Officer In-Charge Of Case:	Classification Of Case:

**SINGAPORE
POLICE FORCE**

L/20220823/7069

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20220823/7069

He has a passenger also.
Four of us with NO injury.

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

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

Date/Time:
23/08/2022 20:46

Classification Of Case: