

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	01/08/2022 17:39 (SGT)
Reported by	Owner
Date of Accident	30/07/2022 10:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Republic Boulevard
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW1022E
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Tan Yong Leng Gillian
NRIC No	SXXXX019E
Email Address	gillyeap@hotmail.com
Mobile Phone No	(Phone) +65-96770037
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	225xe
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1499

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	Yeap Wei Yang Ian
NRIC No	SXXXX271H
Date Of Birth	28/12/1997
Occupation	Indoor

Date Of Driving Pass	19/11/2016
Driving experience	5 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91772037
Alt. Phone Number	-
Email Address	gillyeap@hotmail.com
Address	106 Pemimpin Terrace
Address complement	-
Postcode	575990
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	Collision - Major/Minor Rd
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)	4
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	Tan Yong Leng Gillian
Gender	Female

PASSENGER 2

Name	Yeap Beng Swee Philip
Gender	Male

PASSENGER 3

Name	Yeap Shu-En Clare
Gender	Female

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 Sketch Plan.

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 YP8571K
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Government
 Name of Driver Kyaw Swe Lwin
 NRIC No SXXXX570J
 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**IMPORTANT NOTICE**

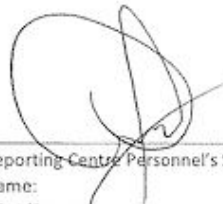
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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. The 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 lodgment 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)**

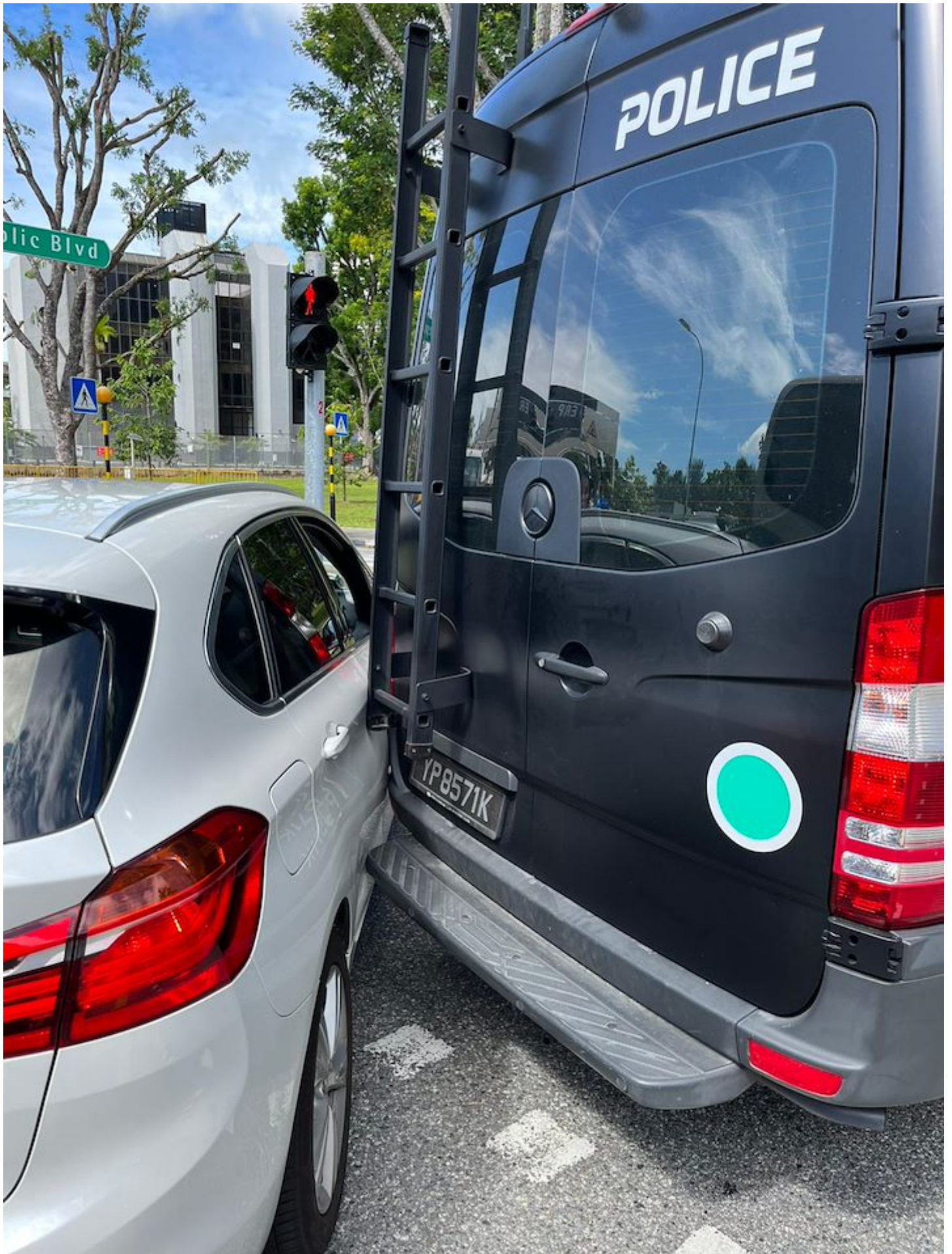
I understand, acknowledge, agree and consent that:

- (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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 Policyholder's Signature
 Date & Time:


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


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

































**SINGAPORE
POLICE FORCE**



T/20220730/7086

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

1 of 3

Report No. T/20220730/7086

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/07/2022 15:16		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN YONG LENG GILLIAN			Address: 106 PEMIMPIN TERRACE SINGAPORE 575990		
ID Type / ID No.: NRIC NO / S1663019E			Contact No.: Home/Office: Mobile: 96770037		
Nationality: SINGAPORE CITIZEN			Email: GILLYEAP@HOTMAIL.COM		
Sex: Female	Age: 58	Date of Birth: 23/03/1964	Type of Informant: Passenger		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 30/07/2022 10:50	Type of Location: Y-Junction
Location: REPUBLIC BOULEVARD				
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Policeman 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	Condition	No of
SMW1022E	Car	BMW	225XE LED HL	White	Slightly Damaged	4

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMW1022E	LIBERTY INSURANCE PTE LTD	SD21V12724	31/08/2021	29/10/2022



**SINGAPORE
POLICE FORCE**



T/20220730/7086

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

2 of 3

Report No. T/20220730/7086

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YEAP WEI YANG IAN	ID No.	S9747271H
Related Vehicle	SMW1022E (Car)	Contact No.	91772037
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
Passenger			
Name	TAN YONG LENG GILLIAN	ID No.	S1663019E
Related Vehicle	SMW1022E (Car)	Contact No.	96770037
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.

1. We have photos of the accident. Dashcam footage; but not of the impact as it was to the side of my vehicle.
2. Location: Republic Avenue turning onto Raffles Boulevard. There was traffic diversion due to upcoming NDP Rehearsal.
3. We were following behind police vehicle, YP8571K, at the junction of Republic Avenue going on to Republic Boulevard. At the junction, as it was turning into Republic Boulevard YP8571K stopped. We too proceeded to stop behind it. A passenger alighted from the vehicle and indicated for it to remain stopped. However vehicle YP8571K's reverse lights came on, and the driver proceeded to reverse. The AETOs officer at the junction instructed me to manoeuvre forward to the left away from YP8571K. However, YP8571K continued to reverse, despite us still being directly behind him. As YP8571K continued to reverse, we stopped our vehicle as the angle was getting narrow to pass it on its left and started honking several times to alert the driver of the imminent collision. However, the said vehicle failed to stop, which resulted in the collision.



**SINGAPORE
POLICE FORCE**



T/20220730/7086

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

3 of 3

Report No. T/20220730/7086

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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: 30/07/2022 15:16
Officer In Charge Of Case: TP / TPiB / NOR FAIZAL BIN YAHYA Contact No.: 65476198	Classification Of Case:

NP168