# **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 witholding 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 16/12/2022 17:21 (SGT) Reported by Date of Accident 15/12/2022 16:30 (SGT) Exact Location of Accident Yishun Ave 6, Singapore Additional Location Information Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number **SMP6635R** INSURED/POLICYHOLDER ١)

Mitsubishi

Is company?	No
Name Of Registered Owner	LIM BENG HWA (LIN MINGHUA)
NRIC No	SXXXX028Z
Email Address	waytowark80@yahoo.com.sg
Mobile Phone No	(Phone) +65-83230131
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer

Model	Eclipse cross
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	1496

### **INSURANCE COMPANY**

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900167121-03

### DRIVER

Name of Driver	LIM BENG HWA (LIN MINGHUA)
NRIC No	SXXXX028Z
Date Of Birth	20/03/1979
Occupation	Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	27/09/1999 23 YEARS AND 3 MONTHS Male (Phone) +65-83230131 - waytowark80@yahoo.com.sg BLK 451 YISHUN RING ROAD #12-128 - 760451 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement	
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT T/20221215/7042	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes WITH OWNER
DETAILS OF OTHER	VEHICLE PROPERTY 1

YP4188K

## Accident report SN0822CG0004

Vehicle Model

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Variant Vehicle Colour	-
Vehicle Category	- Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Etiga Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## **INJURED PERSONS DETAILS**

INJURED 1

Name of injured person LIM BENG HWA (LIN MINGHUA) Gender Male Phone No (Phone) +65-83230131 Address Address Complement Post Code Approximate Age Years Old
Injuries Sustained SLIGHT INJURY Injured person in which vehicle? SMP6635R Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

### SKETCH PLAN

### IMPORTANT NOTICE

- Hease report correctly the details of the accident to speed up the claims process.
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- 7. By the ladgement 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)

Lunderstand, 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 (a) My insurer, my workshop and the General insurance Association of sigapore (Girk) maybe permitted to check ask, observed 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 that be who have insured vehicle(s) involved in this accident that 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;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

& Time

- (iv) administering my claims (including the making 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 envolopes/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 law yers/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 G/A to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes,

Policyholder's Signature / Date &

16/12/2022

Driver's Signature (f driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

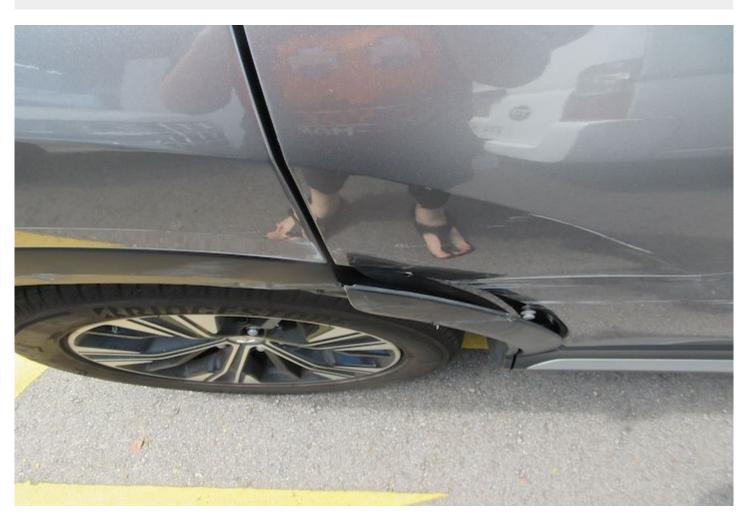
Sketch Plan

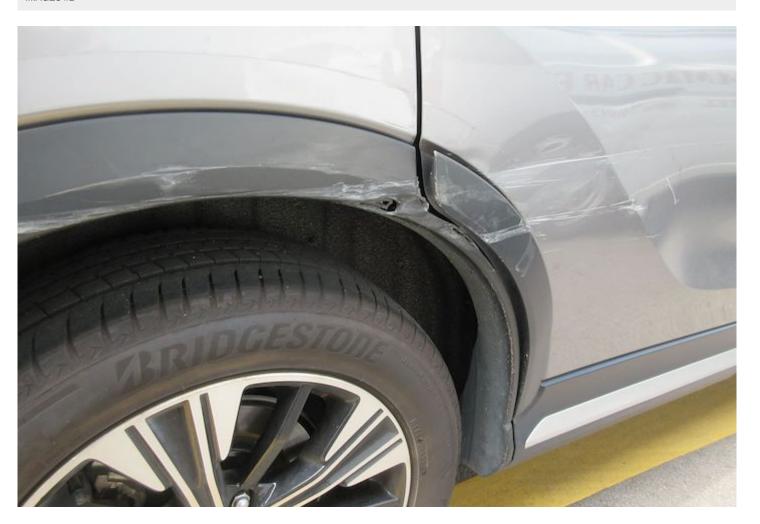
Yishun Ave 6

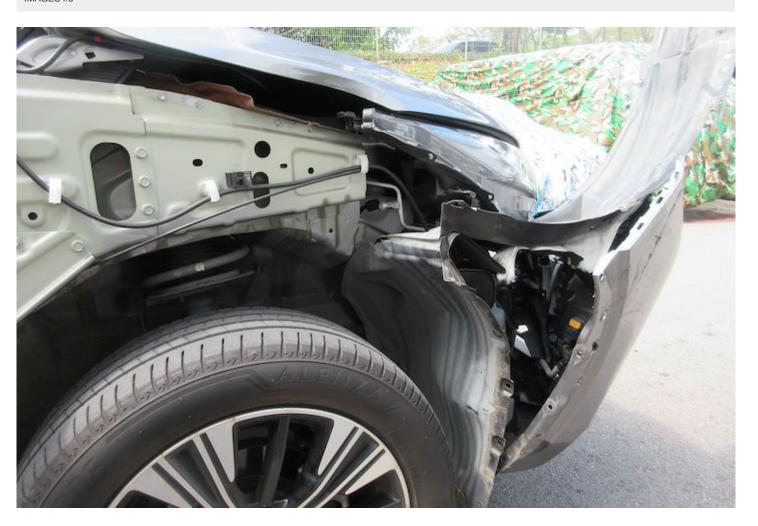
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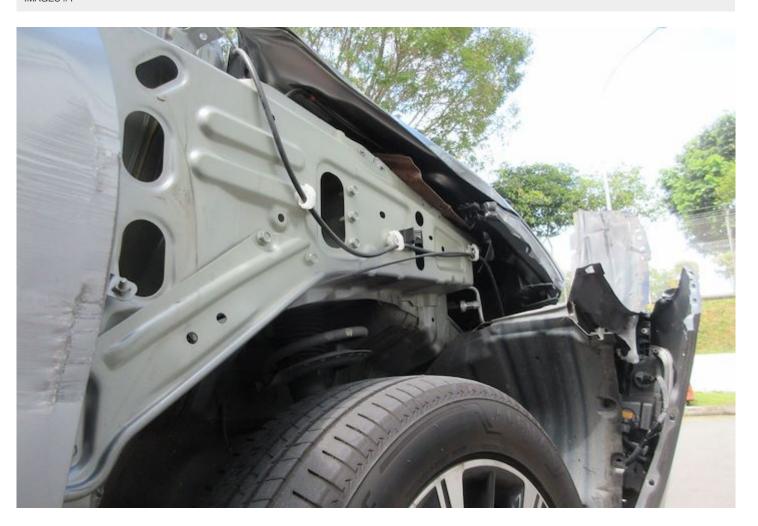
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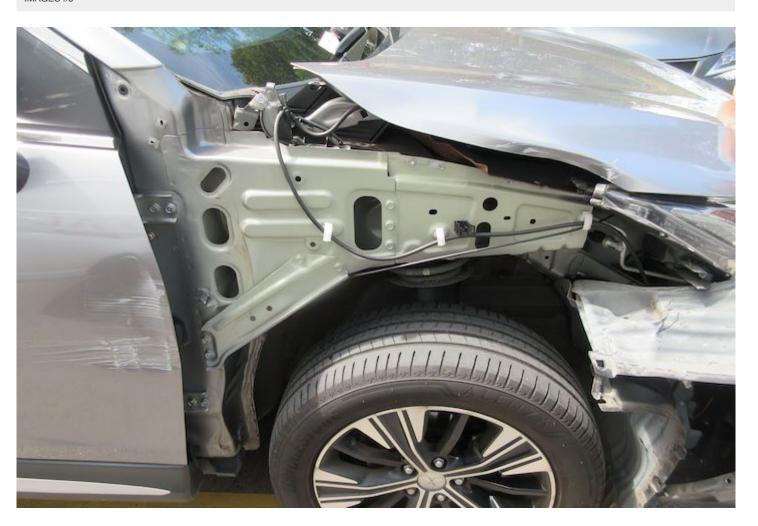
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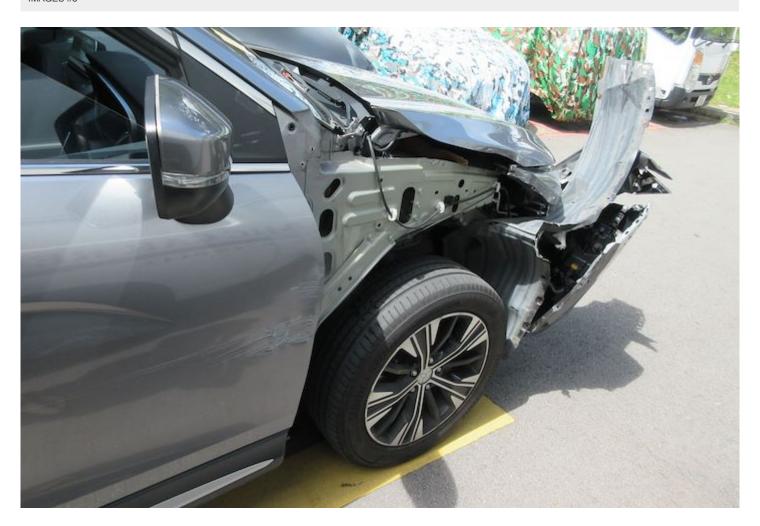


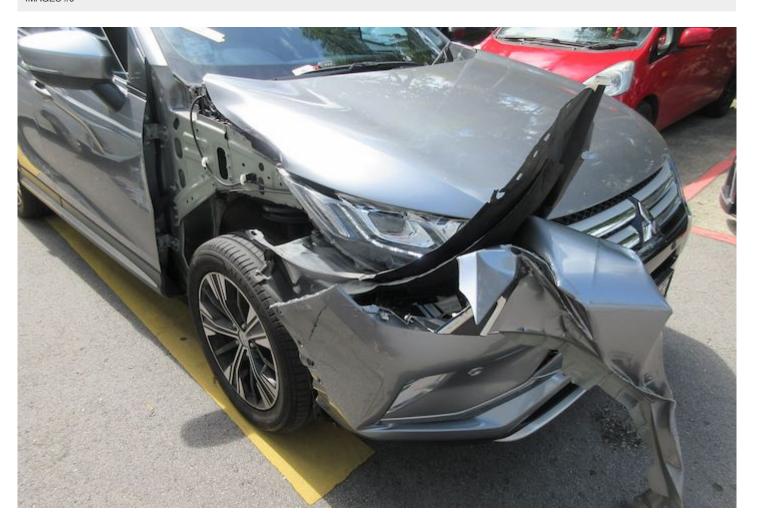


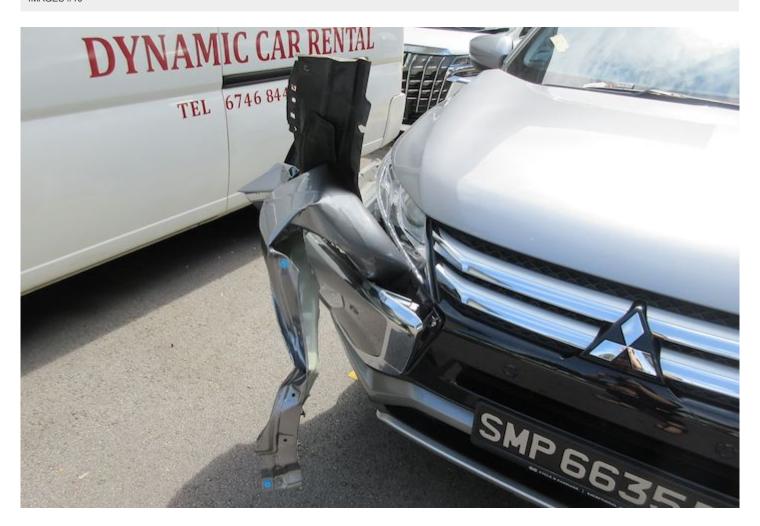










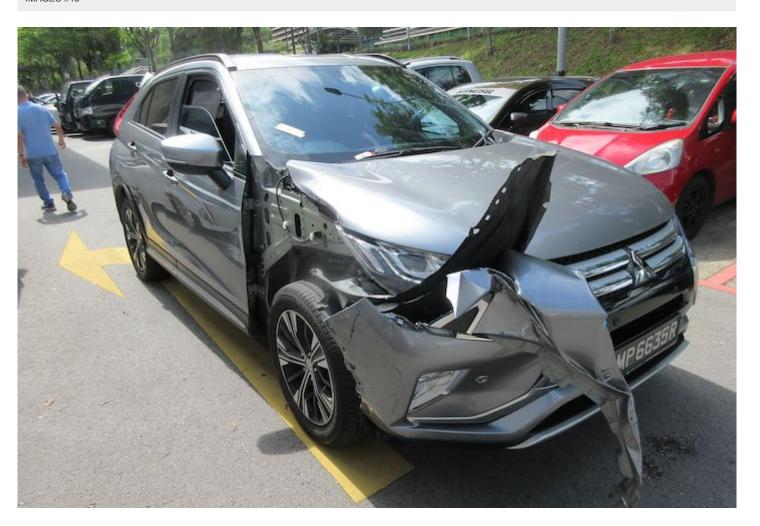


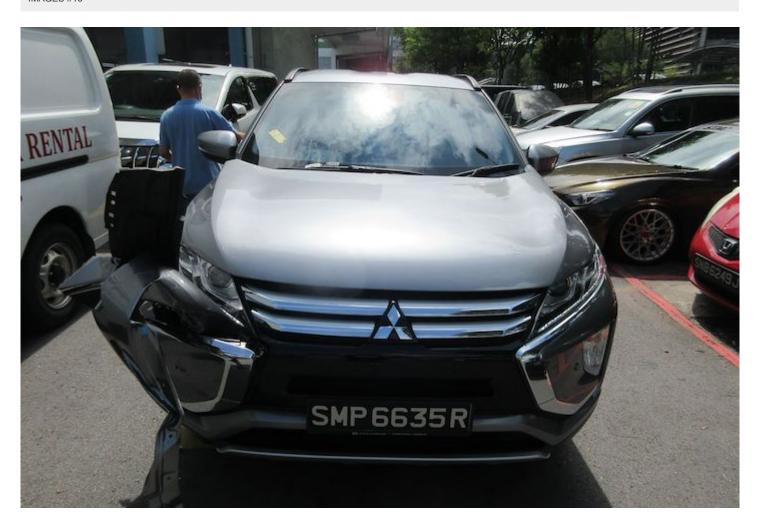


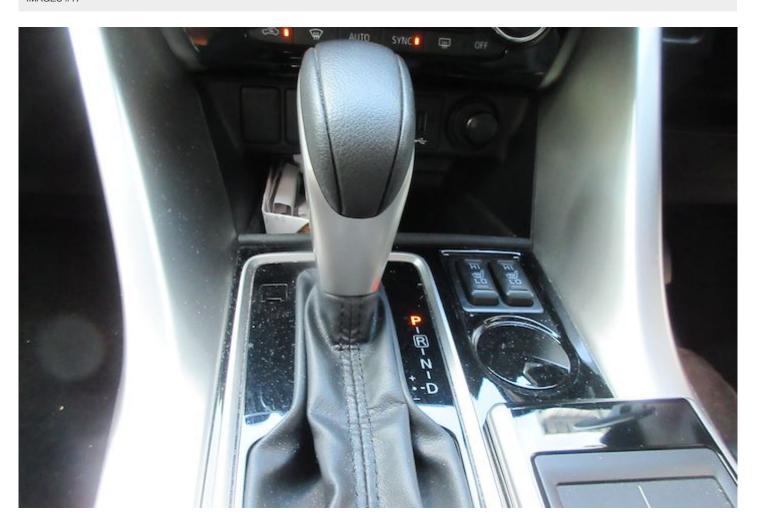


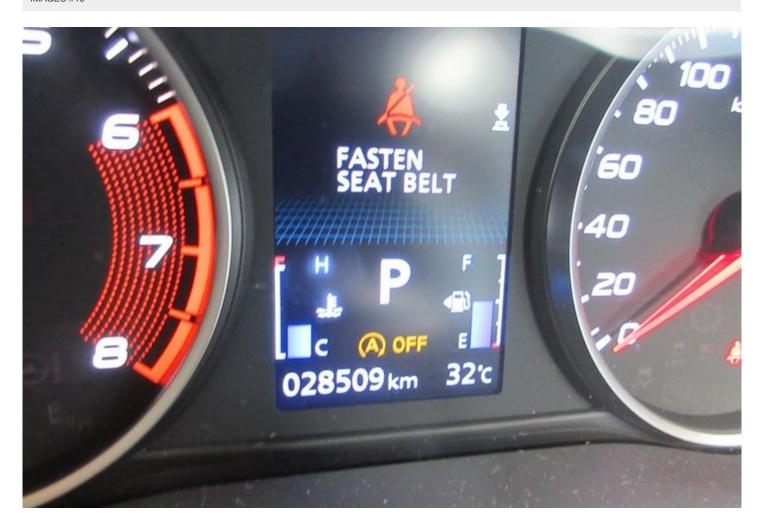




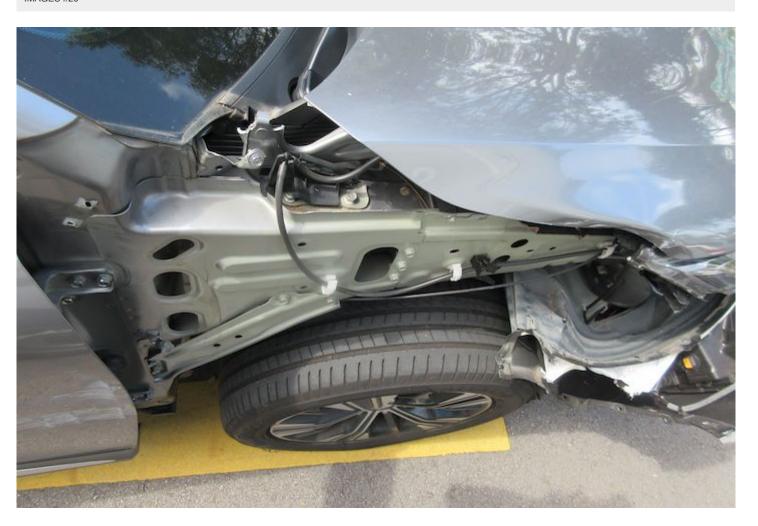
















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20221215/7042

### REPORT OF A TRAFFIC ACCIDENT

	ne Report M 122 20:41	Made:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars	CONTRACTOR NO SALES	
THE STREET STREET	Informant: IG HWA		Address: 451 YISHUN RING ROAD #12	2-128 SINGAPORE 760451
	/ ID No.; D / S79090;	28Z	Contact No.: Home/Office:	Mobile: 83230131
National SINGAP	ity: ORE CITIZ	EN	Email: waytowork80@yahoo,com.sg	
Sex: Male	Age: 43	Date of Birth: 20/03/1979	Type of Informant: Driver	
Race: Chinese	10001110		Language: English	Institution / School Name:
Occupat	ion:		Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 15/12/2022 16:30	Type of Location Straight Road
Location: YISHUN AVE	NUE 6			
Weather: Clear		Road Surface: Dry		Road Speed Limit:
P. LO. P.		Traffic Control:		Traffic Volume:
Traffic Flow: One Way		Not Controlled		Light

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SMP6635R	Car	MITSUBISHI	ECLIPSE CROSS 1.5 CVT	Grey	Seriously Damaged	0
YP4188K	Lorry	ISUZU		White	Slightly Damaged	2



T/20221215/7042

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20221215/7042

### CONTINUATION OF REPORT

Details of V	ehicle Insurance			A CONTRACTOR
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMP6635R	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900167121-03	09/10/2022	08/10/2023
Details of P	erson Involved			
Any Pedestr	ian Involved: No			
No. of Pede:	strians Injured: NIL	Use of Pedestrian Cr	ossing: NA	

Any Pedestrian Ir	volved: No		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
No. of Pedestrian	Use of P	Use of Pedestrian Crossing: NA				
Driver				VIII 194		
Name	LIM BENG HWA			ID No	425	S7909028Z
Related Vehicle	SMP6635R (Car)			Vehicle SMP6635R (Car) Contact No.		83230131
Hospital/Clinic	NIL			Class Drivin Licen Expir	g ce &	Class: 3 Date of Expiry: NIL
Date	NIL Date				NIL	
No. of Days granted Medical Leave NIL			Degree	of	NIL	
Driver		TOTAL	High health an	New York	100	
Name	LIU DEXIN			ID No	02	G892150P
Related Vehicle	YP4188K (Lorry)			Contact No.		85495967
Hospital/Clinic	NIL			Class Drivin Licen Expir	ng ice &	Class: 28,3,4 Date of Expiry: 24/06/2026
Date	NIL		Date	-01-	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree	of	NIL	

### Brief Details

A sideswipe car accident happened along at straight road at Yishun AVE 6 after the right turn from Yishun AVE 1. The straight road at Yishun AVE 6 has 2 lanes. Prior to the car accident, a lorry, with car plate number YP4188K was

at lane 1 (right side of the straight road) and my car with car plate number SMP6635R was at lane 2 (left side of the straight road). When both vehicles were at the straight road along Yishun AVE 6, the lorry abruptly changed the lane from lane 2 to lane 1. The move of the lorry damaged right-side front bumper cover of my vehicle. The was recorded with my in-car camera



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 T/20221215/7042

3 of 3 Report No. T/20221215/7042

CONTINUATION OF REPORT

Informant is not able to provide sketch

Sketch Plan

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.

Date/Time:
15/12/2022 20:41

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

NP166