

# 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 ..... 13/01/2023 16:33 (SGT)  
Reported by ..... Both  
Date of Accident ..... 12/01/2023 17:40 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Junction of tembeling road and duku road  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNA6645D

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LEE WEI HOONG WILSON  
NRIC No ..... S7729901G  
Email Address ..... wookee13@yahoo.com  
Mobile Phone No ..... (Phone) +65-93629649  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... BMW  
Model ..... 216i  
Variant ..... GRAN TOURER 1.5  
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 ..... 1499

### INSURANCE COMPANY

Name of Insurance Company ..... Singapore Life Ltd  
Policy Number / Cover Note Number ..... 11129119

### DRIVER

Name of Driver ..... LEE WEI HOONG WILSON  
NRIC No ..... S7729901G  
Date Of Birth ..... 30/10/1977  
Occupation ..... Indoor

Date Of Driving Pass .....	28/09/2000
Driving experience .....	22 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93629649
Alt. Phone Number .....	-
Email Address .....	wookee13@yahoo.com
Address .....	230 TEMBELING ROAD
Address complement .....	#04-01
Postcode .....	423742
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 - Cross Junction
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) .....	3
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 .....	Passenger 1
Gender .....	Male

#### PASSENGER 2

Name .....	Passenger 2
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

I was traveling along tembeling road suddenly third party vehicle which was coming from duku road didn't stop at the stop line and collided onto my vehicle front right area. No injuries involved.

#### 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 .....	SKV4219P
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	B180
Vehicle Variant .....	-
Vehicle Colour .....	Gray
Vehicle Category .....	Private car
Name of Driver .....	LOH MENG KWANG JAMES
NRIC No .....	S7917941H
Contact Number .....	(Phone) +65-96672781
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	4

PASSENGER 1

Name .....	Passenger 1
Gender .....	Male

PASSENGER 2

Name .....	Passenger 2
Gender .....	Female

PASSENGER 3

Name .....	Passenger 3
Gender .....	Female



**Describe Circumstances of the Accident**

I was traveling along tembeling road suddenly third party vehicle which was coming from duku road didn't stop at the stop line and collided onto my vehicle front right area. No injuries involved.

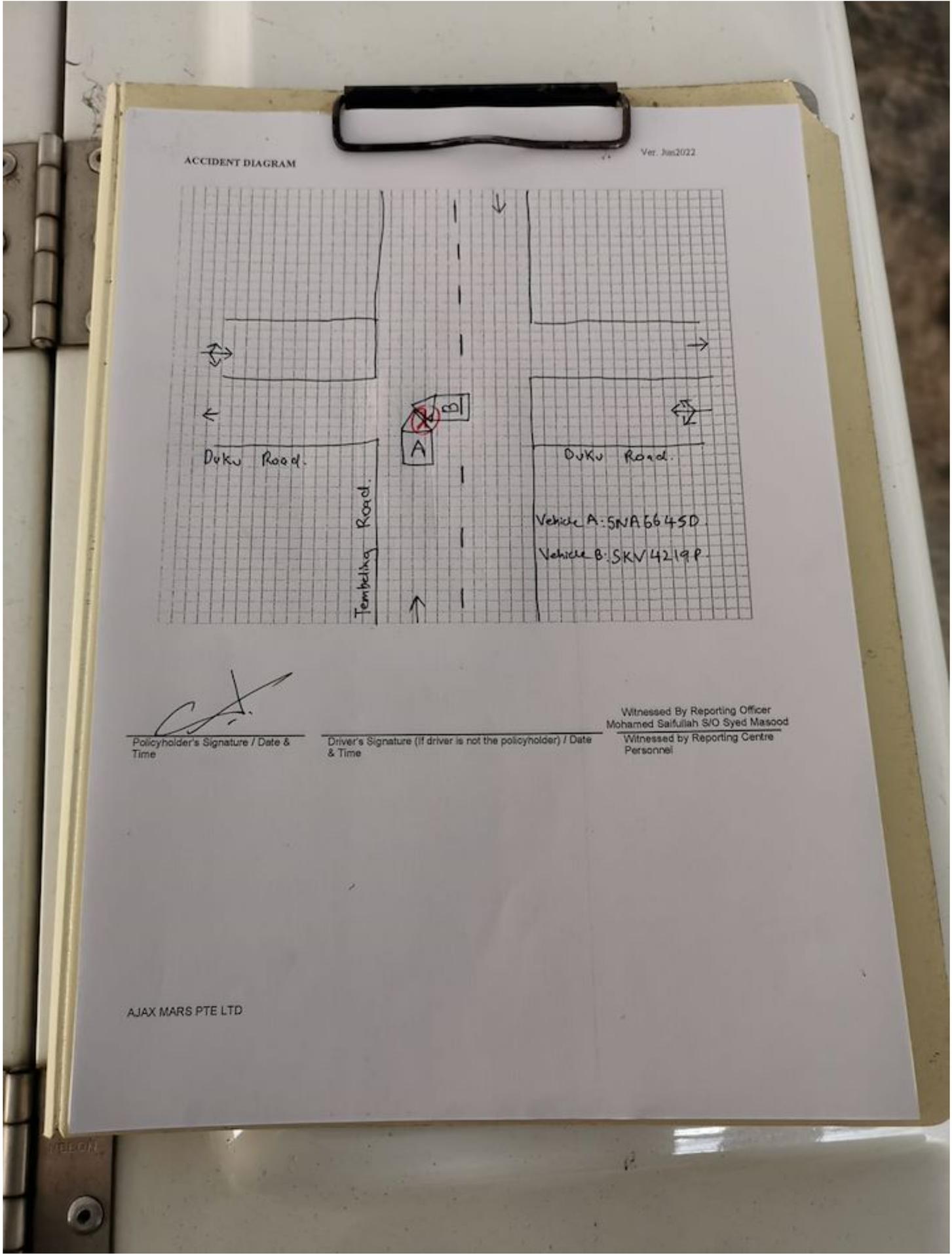
**Declaration**

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

  
\_\_\_\_\_  
Policyholder's Signature / Date &  
Time 13 Jan 2023

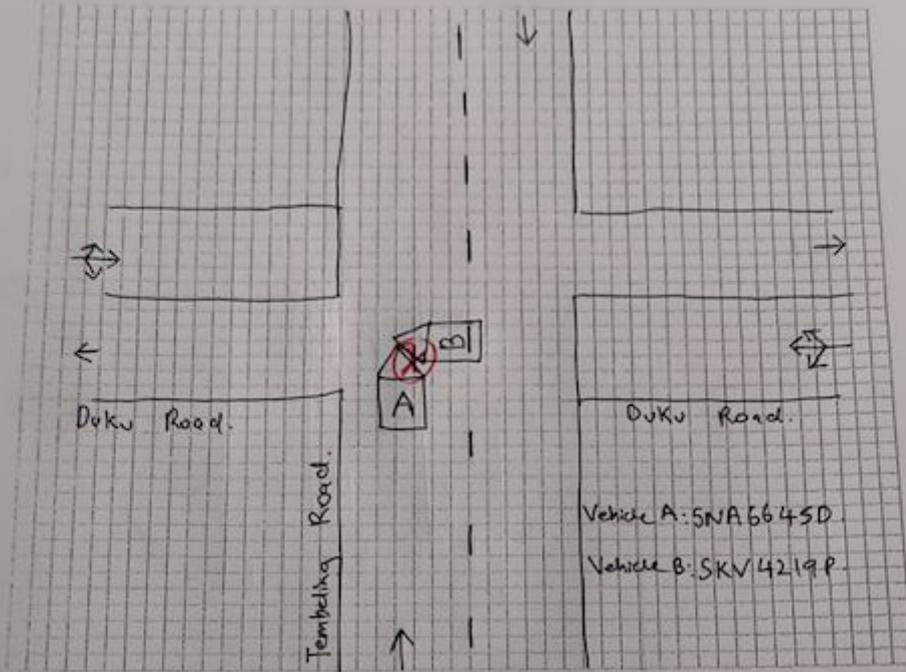
\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date  
& Time

Witnessed By Reporting Officer  
Mohamed Saifullah S/O Syed Masood  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel



ACCIDENT DIAGRAM

Ver. Jan2022



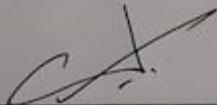
Deku Road.

Tembeling Road.

Deku Road.

Vehicle A: SNA664SD.

Vehicle B: SKV/4219P.

  
Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer  
Mohamed Saifuliah S/O Syed Masood  
Witnessed by Reporting Centre  
Personnel

AJAX MARS PTE LTD.



























