

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 14:21 (SGT)
Reported by	Both
Date of Accident	12/01/2023 18:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Onan Road / Marshall Lane
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG613L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KEE SONG WEI
NRIC No	S2532583D
Email Address	keesongwei@gmail.com
Mobile Phone No	(Phone) +65-96718663
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	116d
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	1496

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	P1781602

DRIVER

Name of Driver	KEE SONG WEI
NRIC No	S2532583D
Date Of Birth	02/05/1952
Occupation	Indoor

Date Of Driving Pass	06/09/1983
Driving experience	39 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96718663
Alt. Phone Number	-
Email Address	keesongwei@gmail.com
Address	34 HARTLEY GROVE
Address complement	-
Postcode	457896
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 - Change/cross lane
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	CHUA SOK KOON
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 Attach

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	GBL7324H
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	FRONT, LEFT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

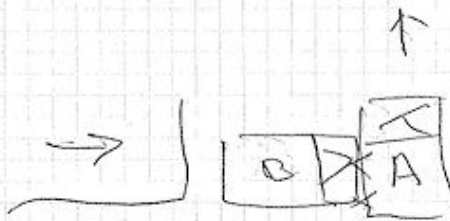
INJURED 1

Name of injured person	CHUA SOK KOON
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SGG613L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

WITNESS DETAILS

WITNESS 1

Name	CH TEO
Phone	(Phone) +65-96312430
Email	-



Attach Police Report

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

Date & Time:

Date & Time:

NRIC/FIN No.:

13/1/23

© 124215


SKETCH PLANIMPORTANT 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**.
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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 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:

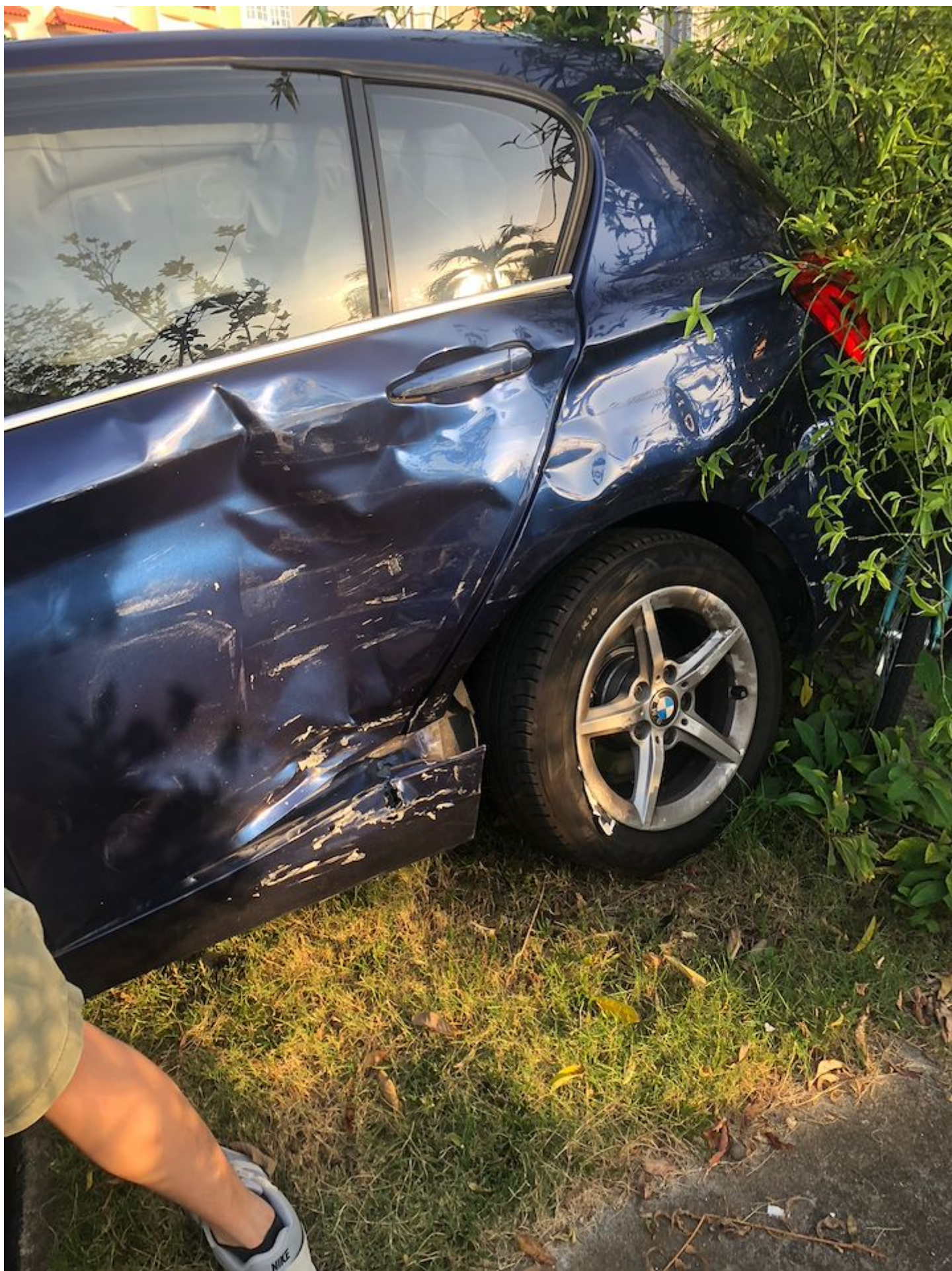

 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:













**SINGAPORE
POLICE FORCE**



T/20230113/7013

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

1 of 3

Report No. T/20230113/7013

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2023 10:50		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: KEE SONG WEI			Address: 34 HARTLEY GROVE SINGAPORE 457896		
ID Type / ID No.: NRIC NO / S2532583D			Contact No.: Home/Office: Mobile: 96718663		
Nationality: SINGAPORE CITIZEN			Email: KEESONGWEI@GMAIL.COM		
Sex: Male	Age: 70	Date of Birth: 02/05/1952	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident					
Type of Accident:	Injury Attended by Police	Drink Drive No	Date/Time of Accident 12/01/2023 18:00	Type of Location: X-Junction	
Location: ONAN ROAD					
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBL7324H	Van					0
SGG613L	Car	BMW	116D 5DR HATCHBAC K DSC LED	Blue		1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20230113/7013

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865

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Report No. T/20230113/7013

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20230113/7013

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

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Report No T/20230113/7013

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGG613L	AXA INSURANCE SINGAPORE PTE LTD	P1781602	01/06/2021	31/05/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	CHUA SOK KOON		ID No.	S1244280G
Related Vehicle	SGG613L (Car)		Contact No.	62415719
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
Driver				
Name	KEE SONG WEI		ID No.	S2532583D
Related Vehicle	SGG613L (Car)		Contact No.	96718663
Hospital/Clinic	RAFFLES HOSPITAL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	12/01/2023		Date	12/01/2023
No. of Days granted Medical Leave	NIL		Degree of	Slight

Brief Details

On the 12th of January 2023, at about 6 pm, I left Dunman Food Center and traveled down Onan Road at around 40km/hr as it was a built up residential area with cars parked on side of the road. At the x-junction with Marshall Lane, a van (GBL7324H) traveling down Marshall Lane towards the cross junction with Onan Road failed to stop at a stop line, and shot across the junction, hitting the left side of my car. My car spun 180 degrees and landed on the corner of the road. Ambulance conveyed my wife and I to Raffles Hospital for injuries. Traffic police arrived and informed that the car would be towed away as safe custody/evidence. Video and picture evidence exceeding 2MB available from witness driving behind my car.

On the 12th of January 2023, at about 6 pm, I left Dunman Food Center and traveled down Onan Road at around 40km/hr as it was a built up residential area with cars parked on side of the road. At the x-junction with Marshall Lane, a van (GBL7324H) traveling down Marshall Lane towards the cross junction with Onan Road failed to stop at a stop line, and shot across the junction, hitting the left side of my car. My car spun 180 degrees and landed on the corner of the road. Ambulance conveyed my wife and I to Raffles Hospital for injuries. Traffic police arrived and informed that the car would be towed away as safe custody/evidence. Video and picture evidence exceeding 2MB available from witness driving behind my car.



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



T/20230113/7013

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Report No. T/20230113/7013

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 13/01/2023 10:50
Officer In Charge Of Case	Classification Of Case