SN08232D0003-01 / National Assessment Centre Services [159721]
ENTRY DATE & TIME: 13/02/2023 15:02 (SGT)
SUBMITTED BY: Rosli Bin Abdul Wahab
VERSION: 2 (23/02/2023 10:45 (SGT))

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	13/02/2023 15:02 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/02/2023 20:45 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS (ANAK BUKIT FLYOVER)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM2211Y

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	WINDALE MAINTENANCE
Company Reg No	2XXXXX335E
Email Address	edwinaathar@windale.com.sg
Mobile Phone No	(Phone) +65-97472092
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	530i
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	Commercial vehicle
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220089890

DRIVER

Name of Driver	EDWIN AATHAR AH MENG
NRIC No	SXXXX991E
Date Of Birth	01/03/1966
Occupation	Outdoor

Date Of Driving Pass	24/07/2002
Driving experience	20 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97472092
Alt. Phone Number	-
Email Address	edwinaathar@windale.com.sg
Address	BLK 841 JURONG WEST STREET 81 #07-127
Address complement	-
Postcode	640841
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	ENRIQUE AATHAR
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20230222/2060

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	SJR8240H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SNH5820J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMU2036U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	EDWIN AATHAR AH MENG
Gender	Male
Phone No	(Phone) +65-97472092
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SERIOUS INJURIES
Injured person in which vehicle?	SMM2211Y

Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claim process.
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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 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.
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.

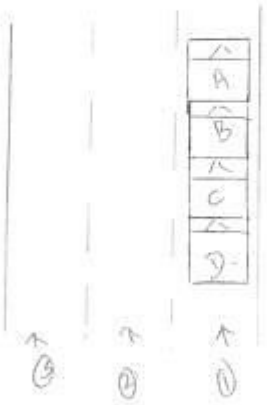
Policyholder's Signature / Date & Time

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

13/02/2023

Witnessed by Reporting Centre Personnel

Sketch Plan



VEH (A) SHM 2211Y
VEH (B) SJR8240H
VEH (C) SNH5820J
VEH (D) SMU2036U

LOCATION : PIE TOWARDS TUAS (ANAK BUKIT FLYOVER)

Describe Circumstances of the Accident

ON THE STATED DATE AND TIME, I WAS WITH MY VEHICLE (A) SMM2211Y AND A PASSENGER STATIONARY ALONG PIE TOWARDS TUAS (ANAK BUKIT FLYOVER) ON LANE 1 DUE TO A SKIDDED LORRY IN FRONT. SUDDENLY, I FELT A MASSIVE IMPACT FROM THE REAR OF MY VEHICLE. I ALIGHTED TO CHECK FOR DAMAGES AND REALISED I'M INVOLVED IN A 4 VEHICLE CHAIN COLLISION. VEHICLE (B) SJR8240H WAS REAR ENDED BY VEHICLE (C) SNH5820J CAUSING VEHICLE B TO MOVED FORWARD AND HIT ONTO MY VEHICLE WHILE VEHICLE (D) SMU2036U REAR ENDED VEHICLE (C) WE ALL ALIGHTED TO CHECK FOR DAMAGES AND WE ALL EXCHANGED PARTICULARS. I LODGE THIS REPORT FOR INSURANCE CLAIM PURPOSE I SUFFERED FROM INJURIES BUT HAD YET TO SEEK A DOCTOR

VEH (A) SMM2211Y

VEH (B) SJR8240H

VEH (C) SNH5820J

VEH (D) SMU2036U

Declaration

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

WINDALE MOTOR (S) PTE LTD

Policyholder's Signature / Date & Time

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

13/02/2023

Witnessed by Reporting Centre Personnel

IMAGES


SMM 221Y


0 mph
220
240
260
km/h
+ 30.0 °C
1/min x 1000
1
0
TOTAL 94221 km
TRIP 0901.8 km
START STOP

IMAGES #2

IMAGES #3


530i
SMM 2211Y
PERFORMANCE MOTORS LTD


Made in
Germany
530i
A90
Built
MAR 2017
BAYERISCHE MOTOREN WERKE AG
e1*2007/46*1688
WBAJA52000G885459
2200 kg
4290 kg
1- 1045 kg
2- 1250 kg

IMAGES #4

IMAGES #5

IMAGES #6


P
R
N
D
MIS
MEDIA
MENU
MAP
COM
NAV
BACK
OPTION
OFF
SPORT
COMFORT
ECO PRO
AUTO H

IMAGES #7

IMAGES #8

SINGAPORE POLICE FORCE

T/20230222/2060

1 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE 649482
Tel No: 1800-7929999

Report No. T/20230222/2060

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
22/02/2023 15:18		107

Informant's Particulars

Name of Informant: EDWIN AATHAR AH MENG	Address: APT BLK 841 JURONG WEST STREET 81 #07-127 SINGAPORE 640841
ID Type / ID No.: NRIC NO / S1744991E	Contact No.: Home/Office: Mobile: 97472092
Nationality: SINGAPORE CITIZEN	Email: edwinaathar@windale.com.sg
Sex: Male / Age: 56 / Date of Birth: 01/03/1966	Type of Informant: Driver
Race: Chinese	Language: English / Institution / School Name:
Occupation: Company director	Driving Licence Information: Class: 3 Date of Expiry:

General Information of the Accident

Type of Accident:	Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
	Others	No	10/02/2023 20:45	Straight Road

Location:

PAN-ISLAND EXPRESSWAY

Weather:	Road Surface:	Road Speed Limit:
Drizzling	Wet	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear		Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR8240H	Car				Seriously Damaged	0
SMM2211Y	Car				Seriously Damaged	1
SMU2036U	Car				Seriously Damaged	0
SNH5820J	Car				Seriously Damaged	3

SINGAPORE POLICE FORCE

T/20230222/2060

Report No. T/20230222/2060

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Ganaison Ravi	ID No.	S1681550J
Related Vehicle	SJR8240H (Car)	Contact No.	88947786
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	EDWIN AATHAR AH MENG	ID No.	S1744991E
Related Vehicle	SMM2211Y (Car)	Contact No.	97472092
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Serious
Name	Arvin Kumar S/O Ram Sankar	ID No.	S8841595G
Related Vehicle	SMU2036U (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

SINGAPORE POLICE FORCE

T/20230222/2060

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE 649482
Tel No: 1800-7929999

Report No. T/20230222/2060

CONTINUATION OF REPORT

Name	Chandrasekar Nithyanadham	ID No.	S6963672A
Related Vehicle	SNH5820J (Car)	Contact No.	81394737
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/2/2023 at about 2045hrs, I was driving company car (SMM2211Y) along PIE towards Tuas as I was heading home. While I was driving near to Clementi Avenue 6 exit, I noticed that there was a car ahead of me stopped and turned on the hazard light. I applied brake and stopped behind the said car. Subsequently, I felt an impact coming from behind. I looked at the rear mirror and noticed that I had got into a car accident. I stepped out from my vehicle and observed that I am involved in a chain collision. I noticed that my car's rear bumper were dent, cracked marks and a hole. I also made a check on the remaining 3 vehicle and noticed the car(SJR8240H) that collided with me. I observed that the car (SJR8240H) sustained damages on the front and rear bumper area. I also observed V3)SNH5820J sustained damages on the front bonnet and rear bumper area while V4) SMU2036U sustained damages on the front bonnet and front bumper were damaged. Subsequently, LTA officers came and to investigate. I exchanged particulars with all the affected parties and I left the place. I had dash cam installed inside my vehicle. I am unsure the cost of repair for my vehicle. I went to NUH as I felt pain on my neck area. I was given 60 days of hospitalization leave.

SINGAPORE POLICE FORCE

T/20230222/2060

4 of 4

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE 649482
Tel No: 1800-7929999

Report No. T/20230222/2060

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report: J / SGT 3 KANG YONG HUI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/02/2023 15:18
Officer In Charge Of Case: TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168

GENERAL INSURANCE ASSOCIATION

RECORDS MANAGEMENT SYSTEM

IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SND08232D0003 Vehicle Registration No: SMH2211Y

Name (as shown in NRIC): WINDALE MAINTENANCE PTE LTD NRIC/FIN/Passport No: 200719335E

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: 39A JALAN PEMIMPIN #07-10A HALCYON BUILDING Singapore (577183)

Contact (Tel): 9747 2092 Mobile No.: -

Email Address: EDWINAATHAR@WINDALE.COM.SG

Date of Accident: 10/02/2023 Time of Accident: 2045 HRS

Place of Accident: TOWARDS TUAS (ANAK BUKIT FLYOVER)

Insurance Company: AIG

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

PLEASE KINDLY HELP TO ATTACH THE POLICE REPORT.

WINDALE MAINTENANCE PTE LTD

x

Policyholder / Driver's Signature
Date:

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