

# 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 .....              | 20/02/2023 14:12 (SGT)         |
| Reported by .....                     | Driver                         |
| Date of Accident .....                | 18/02/2023 19:40 (SGT)         |
| Exact Location of Accident .....      | Near 8V3H+M6 Singapore         |
| Additional Location Information ..... | ROUNDBOUT AT STADIUM BOULEVARD |
| Country/State of Loss .....           | Singapore                      |

## DETAILS OF OWN VEHICLE

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SMD6346M |
|-----------------------------------|----------|

### INSURED/POLICYHOLDER

|                                |                          |
|--------------------------------|--------------------------|
| Is company? .....              | No                       |
| Name Of Registered Owner ..... | NG ENG SENG ALVIN        |
| NRIC No .....                  | SXXXX404D                |
| Email Address .....            | ALVINNGENGSENG@GMAIL.COM |
| Mobile Phone No .....          | (Phone) +65-90222629     |
| Alternative Phone No .....     | -                        |

### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer .....   | Toyota                    |
| Model .....  | Sienta                    |
| 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 .....         | Singapore Life Ltd |
| Policy Number / Cover Note Number ..... | 11078738           |

### DRIVER

|                      |                     |
|----------------------|---------------------|
| Name of Driver ..... | JESSICA YEOH GEK LI |
| NRIC No .....        | SXXXX259A           |
| Date Of Birth .....  | 10/10/1976          |
| Occupation .....     | Indoor              |

|  |   |
|--|---|
| Date Of Driving Pass .....   | 20/07/1995                                |
| Driving experience .....   | 27 YEARS AND 7 MONTHS                     |
| Gender .....   | Female                                    |
| Mobile Number .....  | (Phone) +65-96931222                      |
| Alt. Phone Number .....  | -   |
| Email Address .....  | ICEDTEA28@OUTLOOK.COM                     |
| Address .....  | BLK 12 AMBER ROAD #03-02 SINGAPORE 439858 |
| Address complement .....   | -   |
| Postcode .....   | -   |
| Is the driver the policyholder? .....                              | No  |
| If No, Relationship of the Driver with the Insured .....           | Spouse                                    |
| 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 - Head to Rear |
| 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? .....  | No  |
| Was any other vehicle or property damaged? .....  | Yes |
| Number of Passengers (Including Driver) .....   | 1   |
| 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 .....   | -   |

#### DETAILS OF POLICE ACTION

|   |                                     |
|---|-------------------------------------|
| Was the accident reported to the police? .....  | Yes                                 |
| Police Station Name .....                       | Geylang Neighbourhood Police Centre |
| Police Station Phone No .....                   | (Phone) +65-18008486999             |
| Alt. Police Station Phone No .....              | (Fax) +65-68486799                  |
| Police Station Address .....                    | 1 Cassia Link Singapore 397618      |
| Was notice of intended Prosecution given? ..... | No                                  |
| If yes, against whom? .....                     | -                                   |

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN

#### 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 ..... | SNG8583D |
| 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 .....                              | JESSICA YEOH GEK LI |
| Gender .....  | -                   |
| Phone No .....  | -                   |
| Address .....   | -                   |
| Address Complement .....                                  | -                   |
| Post Code .....   | -                   |
| Approximate Age Years Old .....                           | -                   |
| Injuries Sustained .....                                  | -                   |
| Injured person in which vehicle? .....                    | -                   |
| Were seat belts worn? .....                               | -                   |
| Was this injured conveyed to hospital by ambulance? ..... | No                  |

**SKETCH PLAN**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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:

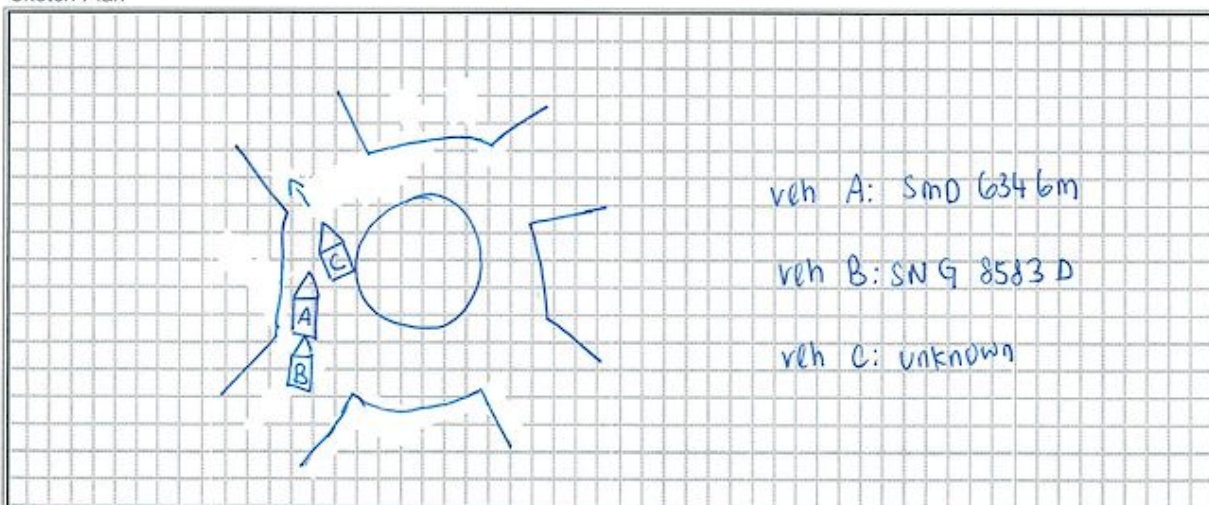
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

Refer to police report. Report No: T/20230218/2100.

Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Tan Wei Ni




























**SINGAPORE  
POLICE FORCE**


T/20230218/2100

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

1 of 3

Report No. T/20230218/2100

**REPORT OF A TRAFFIC ACCIDENT**

|  |            |                              |  |                           |                            |
|--|------------|------------------------------|--|---------------------------|----------------------------|
| Date/Time Report Made:<br>18/02/2023 22:47 |            | Vide Report No.:             |  | Station Diary No.:<br>117 |                            |
| <b>Informant's Particulars</b>             |            |                              |  |                           |                            |
| Name of Informant:<br>JESSICA YEOH GEK LI  |            |                              | Address:<br>BLK 12 AMBER ROAD #03-02 SINGAPORE 439858    |                           |                            |
| ID Type / ID No.:<br>NRIC NO / S7631259A   |            |                              | Contact No.:<br>Home/Office: Mobile: 96931222            |                           |                            |
| Nationality:<br>SINGAPORE CITIZEN          |            |                              | Email:   |                           |                            |
| Sex:<br>Female                             | Age:<br>46 | Date of Birth:<br>10/10/1976 | Type of Informant:<br>Driver                             |                           |                            |
| Race:<br>Chinese                           |            |                              | Language:  |                           | Institution / School Name: |
| Occupation:<br>Secondary school teacher    |            |                              | Driving Licence Information:<br>Class: 3 Date of Expiry: |                           |                            |

|  |            |                      |  |                                 |
|--|------------|----------------------|--|---------------------------------|
| <b>General Information of the Accident</b>                   |            |                      |  |                                 |
| Type of Accident:  | Non-Injury | Drink Drive:<br>No   | Date/Time of Accident:<br>18/02/2023 19:40 | Type of Location:<br>Roundabout |
| Location:<br><br>STADIUM BOULEVARD                           |            |                      |  |                                 |
| Weather:<br>Clear  |            | Road Surface:<br>Dry | Road Speed Limit:<br>50 Km/h               |                                 |
| Traffic Flow:<br>One Way                                     |            | Traffic Control:     | Traffic Volume:<br>Light                   |                                 |
| Type of Collision:<br>Between Moving Vehicles - Head To Rear |            |                      | Anyone conveyed by ambulance:<br>No        |                                 |

| <b>Details of Vehicle Involved</b> |      |      |       |       |                  |                 |
|------------------------------------|------|------|-------|-------|------------------|-----------------|
| Vehicle No.                        | Type | Make | Model | Color | Condition        | No of Passenger |
| SMD6346M                           | Car  |      |       |       | Slightly Damaged | 0               |
| SNG8583D                           | Car  |      |       |       | Slightly Damaged | 1               |

|                                   |                                |
|-----------------------------------|--------------------------------|
| <b>Details of Person Involved</b> |                                |
| Any Pedestrian Involved: No       |                                |
| No. of Pedestrians Injured: NIL   | Use of Pedestrian Crossing: NA |



**SINGAPORE  
POLICE FORCE**



T/20230218/2100

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

2 of 3  
Report No. T/20230218/2100

**CONTINUATION OF REPORT**

|                                   |                       |  |                                   |
|-----------------------------------|-----------------------|--|-----------------------------------|
| <b>Driver</b>                     |                       |  |                                   |
| Name                              | JESSICA YEOH GEK LI   | ID No.                                 | S7631259A                         |
| Related Vehicle                   | NIL                   | Contact No.                            | 96931222                          |
| Hospital/Clinic                   | NIL                   | Class of Driving Licence & Expiry Date | Class: 3<br>Date of Expiry: NIL   |
| Date Treatment                    | NIL                   | Date Discharge                         | NIL                               |
| No. of Days granted Medical Leave | NIL                   | Degree of Injury                       | NIL                               |
| <b>Driver</b>                     |                       |  |                                   |
| Name                              | Vijayaganesh Nadaraja | ID No.                                 | NIL                               |
| Related Vehicle                   | NIL                   | Contact No.                            | 8754 2717                         |
| Hospital/Clinic                   | NIL                   | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                   | Date Discharge                         | NIL                               |
| No. of Days granted Medical Leave | NIL                   | Degree of Injury                       | NIL                               |

**Brief Details.**

On 18th February 2023 @ 1940hrs I was driving my vehicle with a registration number of SMD6346M along Stadium Blvd towards Stadium drive. When I was driving through the roundabout towards Stadium Dr, another vehicle which is white in colour from the inner lane of the roundabout sped up and drove across and tried to exit towards stadium walk. This caused me to perform an E-brake if not I would have hit the vehicle. As a result of the E-brake, the driver behind me hit my vehicle from the rear. The hit caused my lower back to hurt and a strain on my neck. I then exchanged contact details with the driver behind me, his details are Vijayaganesh Nadaraja 8754 2717 and his vehicle registration number SNG8583D. The bottom rear left of my vehicle is dented and there are many scratches. The driver who drove the white car drove off from scene immediately. I have camera footage of the incident however it was unable to capture the white vehicle's number plate. I would like to make a police report on the driver who drove the white vehicle who made such a dangerous movement which caused an accident.





**SINGAPORE  
POLICE FORCE**



T/20230218/2100

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

3 of 3

Report No. T/20230218/2100

**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:

G /

SGT 2 TAN YI PENG, DAVEN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

18/02/2023 22:47

Officer In Charge Of Case:

TP / GIA /

SR STAFF SGT FAHKRUL RAZI BIN SUHAIME

Contact No.: 65470000

Classification Of Case:

NP168



SIGNATURE



Singapore Life Ltd. 4 Shenton Way, #01-01 SGX Centre 2, Singapore 068807 Tel: (65) 68279933 singlife.com

## CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT 1960  
(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

CERTIFICATE NUMBER: 11078738

- |  |                        |
|--|------------------------|
| 1) VEHICLE REGISTRATION NO.  | SMD6346M               |
| 2) NAME OF INSURED   |                        |
| FAMILY NAME  | NG                     |
| GIVEN NAME   | Eng Seng Alvin         |
| 3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT  | 29-Aug-2022 00:00hours |
| 4) DATE OF EXPIRY OF INSURANCE   | 28-Aug-2023 23:59hours |
| 5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE   |                        |
| <p>You and your spouse</p> <p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p> <p>And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been canceled at the time of accident or loss.</p> <p>Please refer to the policy document for full terms and conditions.</p> |                        |
| 6) LIMITATIONS AS TO USE*  |                        |
| <p>Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.</p> <p>* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>                 |                        |
| NAMED DRIVER   |                        |
| FAMILY NAME  | YEOH                   |
| GIVEN NAME   | GEK LI JESSICA         |
| 7) FINANCE COMPANY   | OCBC BANK LIMITED      |

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 and Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 22-Aug-2022 at 22:41hours

Singapore Life Ltd.

### IMPORTANT NOTE:

- If you want to cancel your policy at any time, you will need to return the certificate to us.
  - You must report all accidents to Us within 24 hours of the occurrence or by the next working day at our accident reporting centre regardless of whether you intend to claim on your own policy or not, or whether your car is damaged or not. Should you fail to do so, Your NCD could be affected and your claim may be prejudiced.
- For the list of our accident reporting centres, please visit <https://singlife.com/CarRepairs>. Alternatively, you may call us at 6333 2222 for assistance (including assistance on windscreen damage).
- In case of accident or windscreen damage, please call 6333 2222 (24 hours) immediately.

Pearlyn Phau  
Chief Executive Officer

ORIGINAL

Singapore Life Ltd. 4 Shenton Way #01-01 SGX Centre 2 Singapore 068807 singlife.com  
Company Reg. No. 196800499K GST Reg. No. MR-8500166-8