

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	06/03/2023 10:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	04/03/2023 10:51 (SGT)
Exact Location of Accident	Tampines Street 82, Singapore
Additional Location Information	JUNCTION OF TAMPINES STREET 81 & TAMPINES AVENUE 2 SINGAPORE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD4536G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM LONG HENG (LIN LONG XING)
NRIC No	S7216167Z
Email Address	DENNISLLH@GMAIL.COM
Mobile Phone No	(Phone) +65-97477627
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	HONDA / FIT 1.3G L PACKAGE CVT ABS D/AIRBAG 2WD
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	1317

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P10812952R00

DRIVER

Name of Driver	LEE MEI MEI, CYNTHIA (LI MEI MEI, CYNTHIA)
NRIC No	S7706479F
Date Of Birth	12/03/1977

Occupation	Indoor
Date Of Driving Pass	22/09/1998
Driving experience	24 YEARS AND 6 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98897277
Alt. Phone Number	-
Email Address	CLMM77@GMAIL.COM
Address	33 SIMEI RISE #07-07
Address complement	-
Postcode	528780
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	Raining
Road Surface	Wet

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	NATALEE LIM
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 ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5540P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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	LEE MEI MEI, CYNTHIA (LI MEI MEI, CYNTHIA)
Gender	Female
Phone No	-
Address	33 SIMEI RISE #07-07
Address Complement	-
Post Code	528780
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLD4536G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLANIMPORTANT NOTICE

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8. Consent under the Personal Data Protection Act (PDPA)

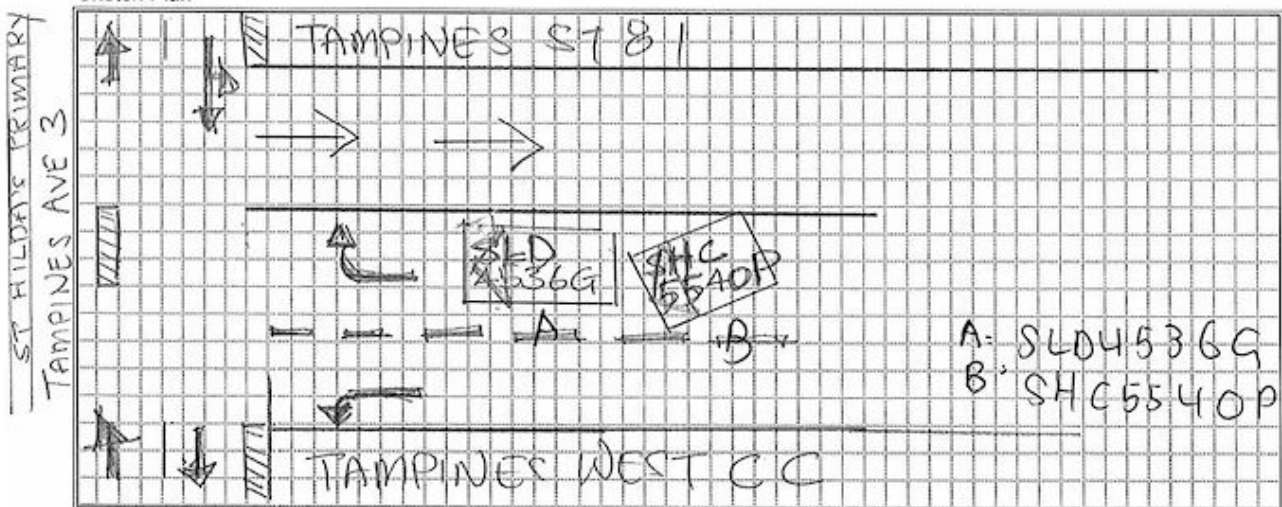
I understand, acknowledge, agree and consent that:

- (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

||||| = Traffic Light

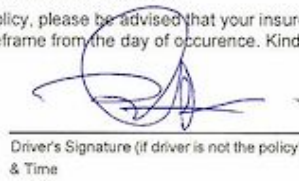
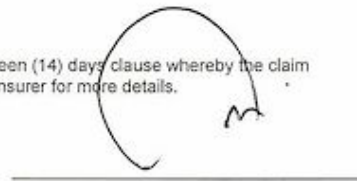
Describe Circumstance of the Accident

REFER TO POLICE REPORT

Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

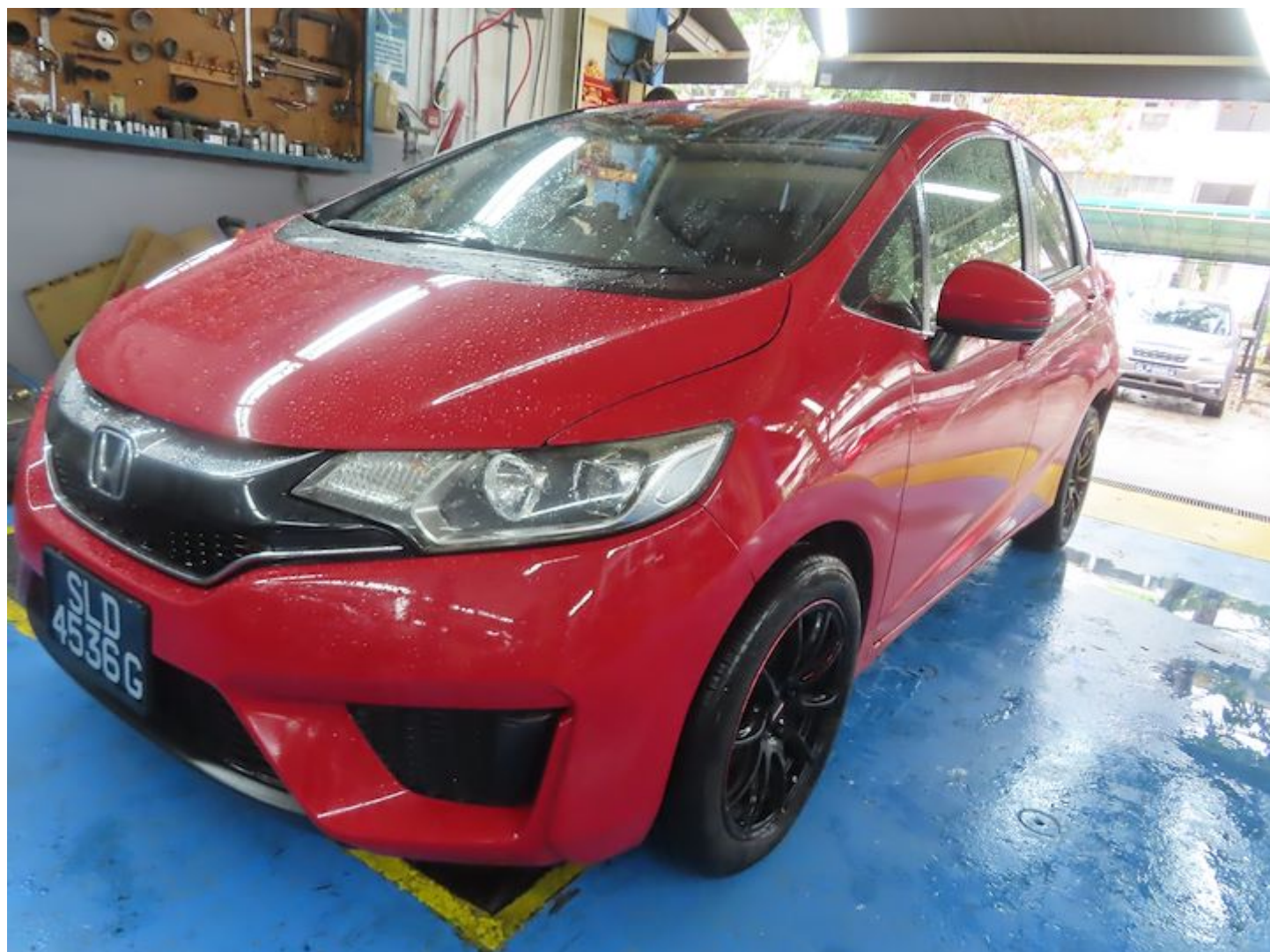

Policyholder's Signature / Date & Time
Driver's Signature (if driver is not the policyholder) / Date & Time
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

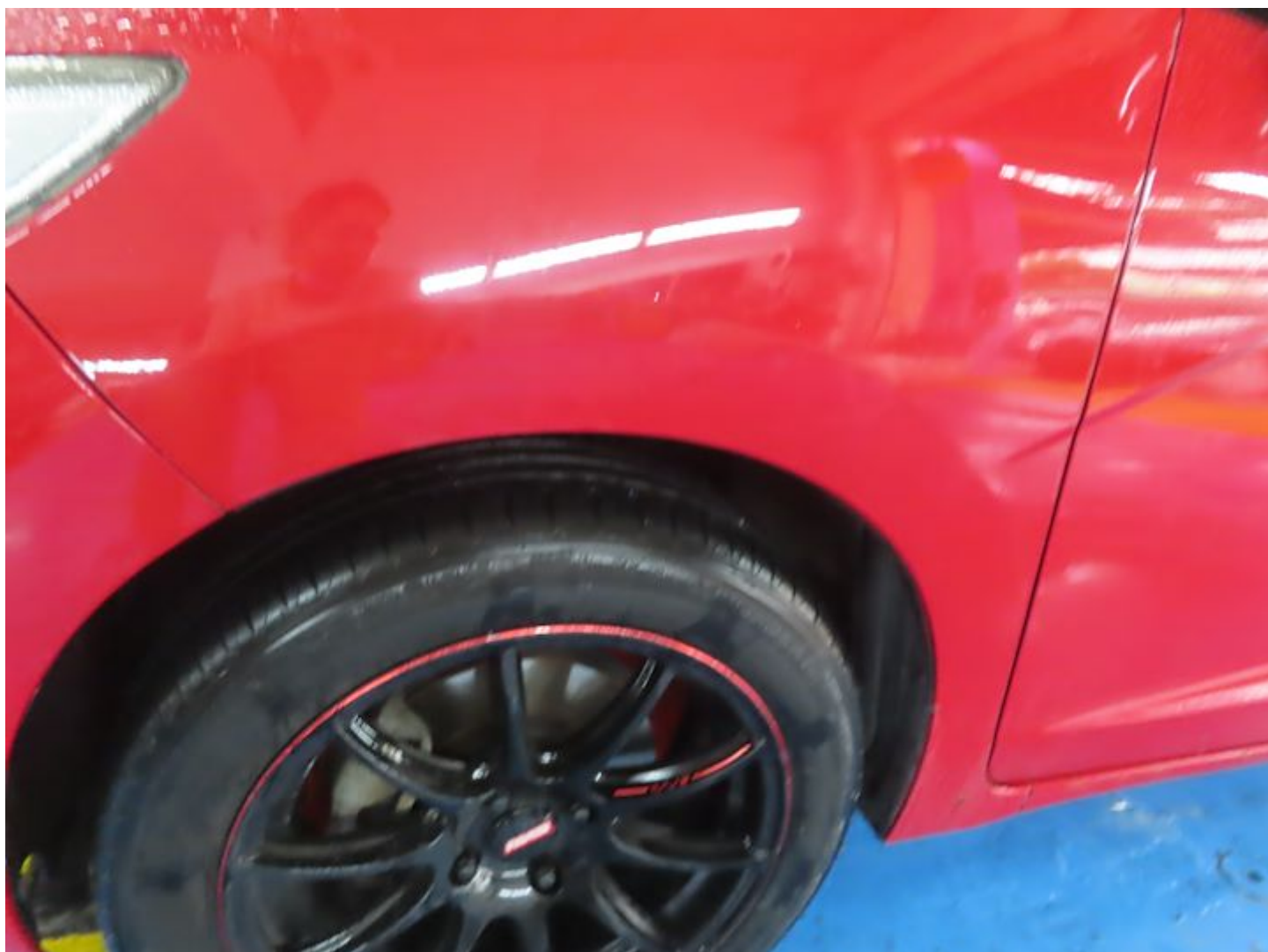


























**SINGAPORE
POLICE FORCE**



T/20230304/7035

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

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Report No. T/20230304/7035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/03/2023 14:12		Vide Report No.: E/20230304/0104		Station Diary No.:	
Informant's Particulars					
Name of Informant: LEE MEI MEI, CYNTHIA			Address: 33 SIMEI RISE #07-07 SINGAPORE 528780		
ID Type / ID No.: NRIC NO / S7706479F			Contact No.: Home/Office: Mobile: 98897277		
Nationality: SINGAPORE CITIZEN			Email: CLMM77@GMAIL.COM		
Sex: Female	Age: 45	Date of Birth: 12/03/1977	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: 04/03/2023 10:51	Type of Location: Straight Road
Location: Junction of Tampines St 81 and Tampines Ave 3				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC5540P	Car	TOYOTA	Prius	Red		0
SLD4536G	Car	HONDA	Fit	Red	Seriously Damaged	1



**SINGAPORE
POLICE FORCE**



T/20230304/7035

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

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Report No. T/20230304/7035

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	NATALEE LIM	ID No.	T1014905Z
Related Vehicle	SLD4536G (Car)	Contact No.	90933005
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	LEE MEI MEI, CYNTHIA	ID No.	S7706479F
Related Vehicle	SLD4536G (Car)	Contact No.	98897277
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	04/03/2023	Date	04/03/2023
No. of Days granted Medical Leave	NIL	Degree of	Slight

Brief Details.

On 4th March 2023 at 10.51am, I was driving along Tampines St 81, on the right lane, towards St Hilda's Primary School, slowing down, preparing to make a right turn into Tampines Ave 3 and the traffic light is Green. My speed was about 18-20km/hr. Suddenly I felt an impact on my rear left and saw a red taxi swirl and hit my left rear bumper and left side mirror. During the impact, I hit the right side of my head on the window. I immediately braked and the red taxi continued driving, making a left turn into Tampines Ave 3. The red taxi number is SHC5540P. My car is a Red Honda Fit SLD4536G. I then slowly moved my car to the left lane as cars behind me were honking. Our SD cards were taken by the Traffic Police. I was also conveyed to Changi General Hospital as I was feeling giddy after the accident. No MC was given by the A&E doctor as I am on Hospitalization Leave from 27th Feb 2023 - 19th March 2023.

**SINGAPORE
POLICE FORCE**

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



T/20230304/7035

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Report No. T/20230304/7035

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
GOH WEI LI
Contact No.: 65476394

This report is lodged at Changi NPC Kiosk 1
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
04/03/2023 14:12

Classification Of Case: