

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	13/03/2023 18:07 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	12/03/2023 14:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE JUST AFTER STEVENS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML5277T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM ZHI JIAN, CLINTON
NRIC No	S8805825I
Email Address	CLINTONLIMZJ@GMAIL.COM
Mobile Phone No	(Phone) +65-94523347
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Boxster
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1988

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00127412201

DRIVER

Name of Driver	LIM ZHI JIAN, CLINTON
NRIC No	S8805825I
Date Of Birth	26/02/1988
Occupation	Indoor

Date Of Driving Pass	21/05/2007
Driving experience	15 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94523347
Alt. Phone Number	-
Email Address	CLINTONLIMZJ@GMAIL.COM
Address	58 DUCHESS AVENUE #04-04
Address complement	-
Postcode	-
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

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?	Yes
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	Bukit Timah Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004629999
Alt. Police Station Phone No	(Fax) +65-64628933
Police Station Address	1 Duke Road Singapore 268914
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
Reasons for not uploading a video of the accident	SD CARD WITH THE POLICE.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH5445G
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WONG YUEN LIK
Contact Number	(Phone) +65-96287528
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Allianz Insurance Singapore Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SNF9861A
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	SKQ3903E
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	LIM ZHI JIAN, CLINTON
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	REFER TO ATTACH
Injured person in which vehicle?	SML5277T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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10/3/73 1300 hrs

Northridge Earthquake, February 17, 1994
 7:30 AM
 02/17/94 114

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 12th of March 2023 at approximately 1.55pm, I was driving along the road towards the bus lane. All of a sudden, the car ahead of me braked hard (SNF 98611) in order not to hit me. I applied emergency brake and moved forward to avoid colliding with him. As I was braked to a halt, I felt a great impact from the back as I was hit by car number (SNF 51111), pushing me forward to hit the rear of SNF 48611. Seconds later, a second impact from the back which was likely caused by SNF 3100E pushed me forward hitting SNF 98611 again. I suffered no physical injuries except some bruises on the back of my head but had severe vertigo. I did not immediately hop on the ambulance but subsequently visited Mount Alexander H&E as I was still feeling very disorientated and did not know how to drive. And everything was alright. I am still suffering from partial memory loss, no massive disorientation with occasional memory attacks and some nausea. This was highlighted to the doctor. The impact from behind was great.

DECLARATION

I/We declare the foregoing particulars to be true and correct.

Injured Person's Signature

Date & Time

13/3/23 13:00hrs

Witness Signature

Witness Name (Printed Name)

Date & Time

Date & Time























































































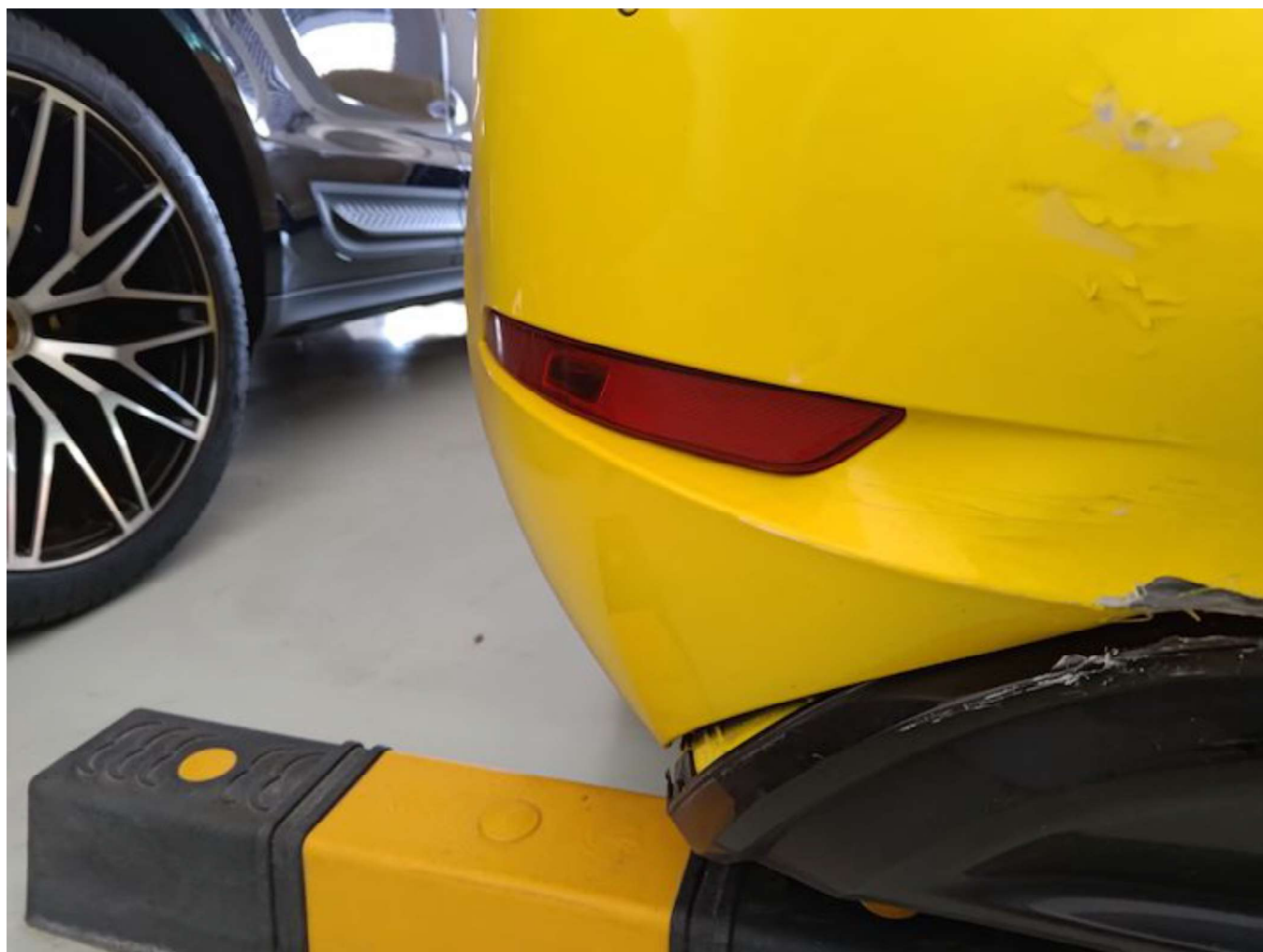










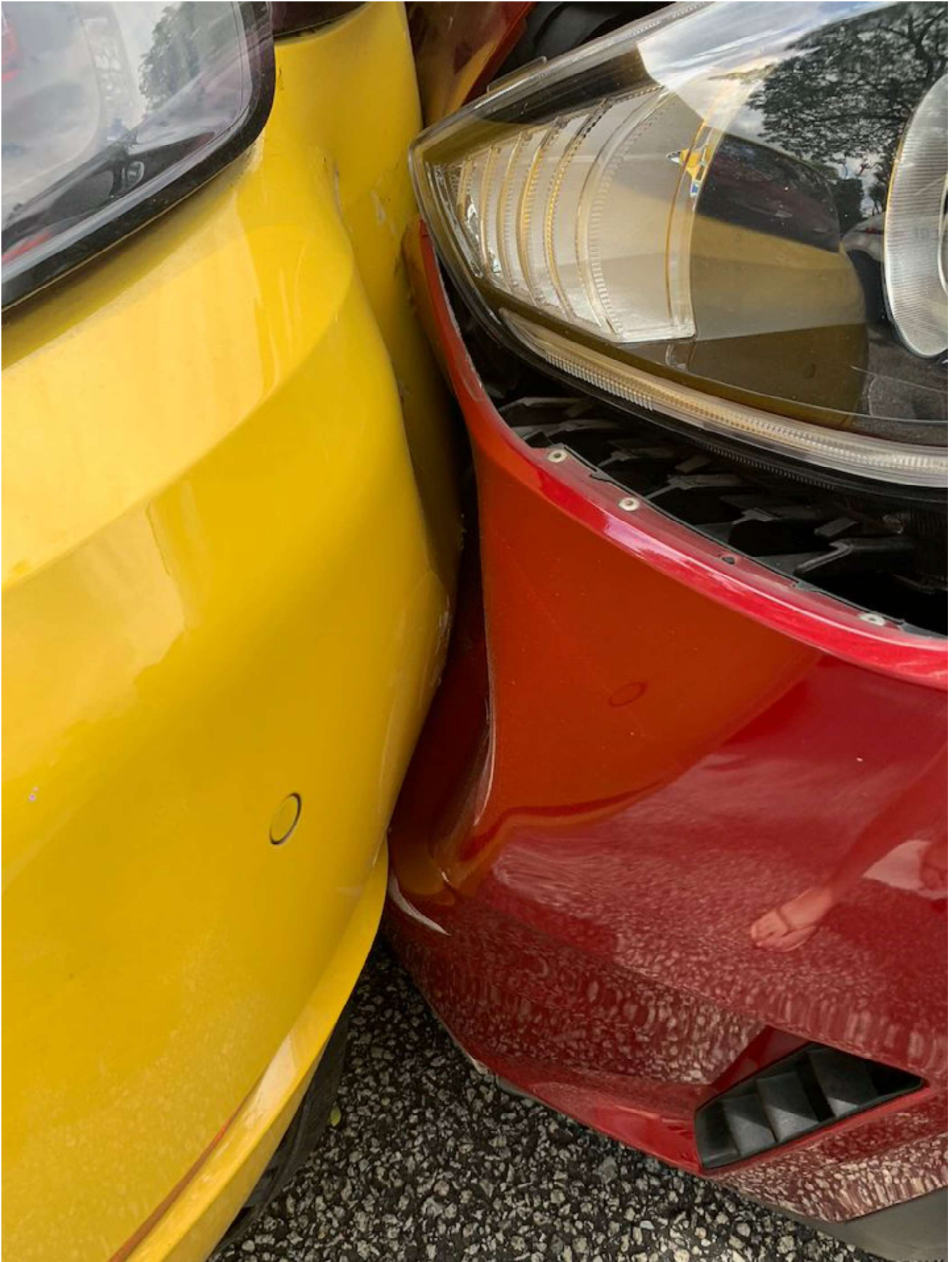














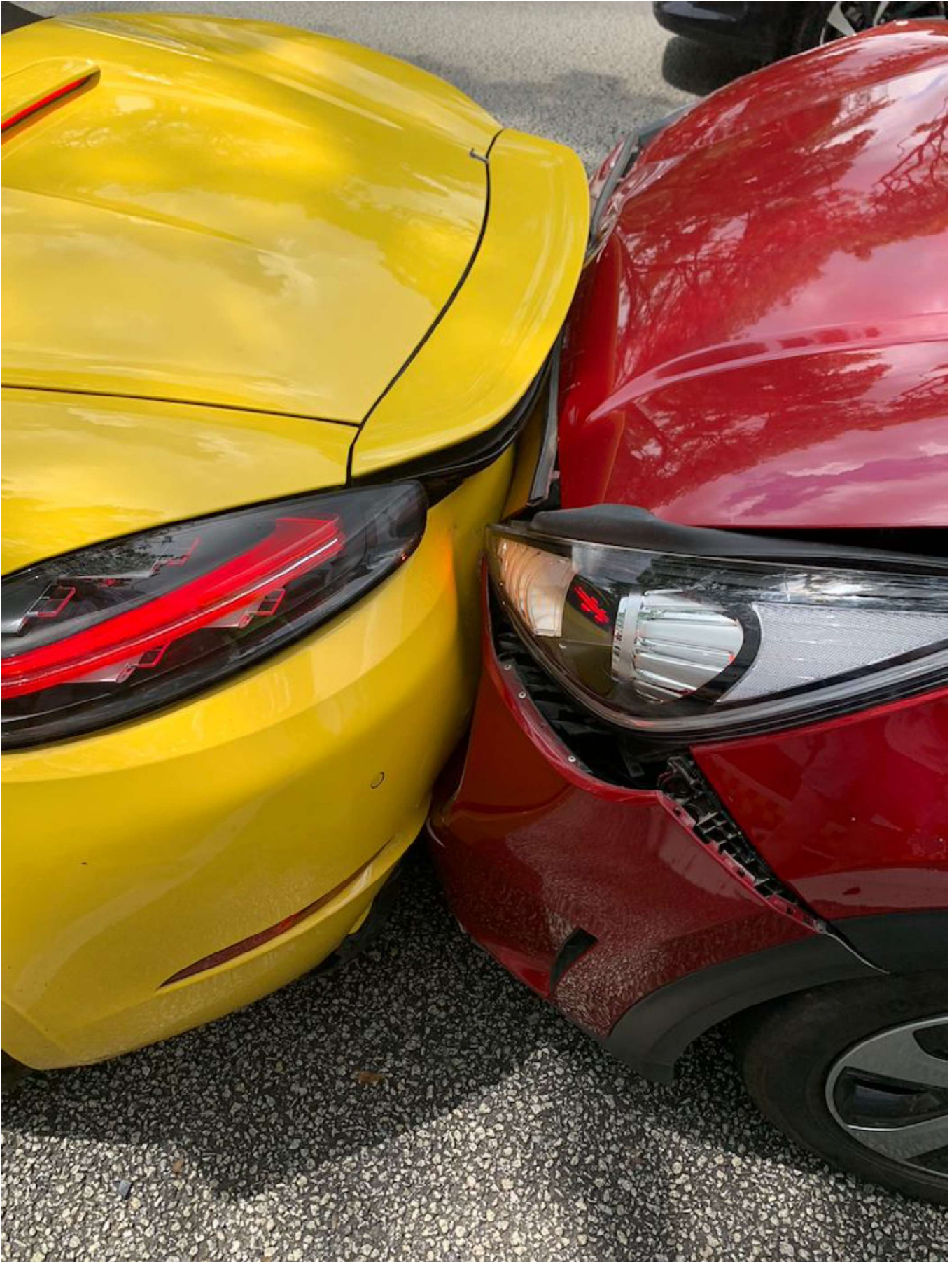


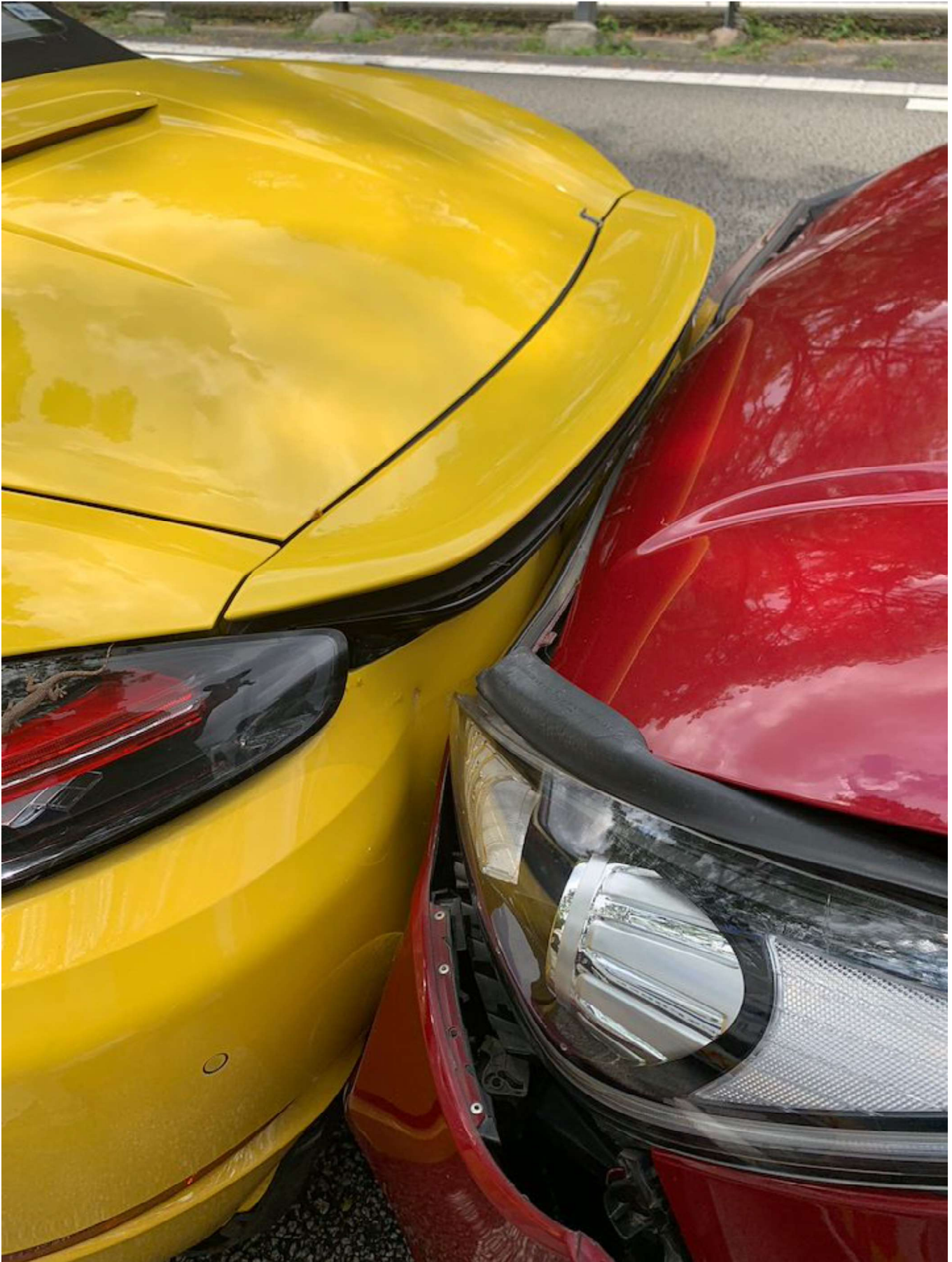


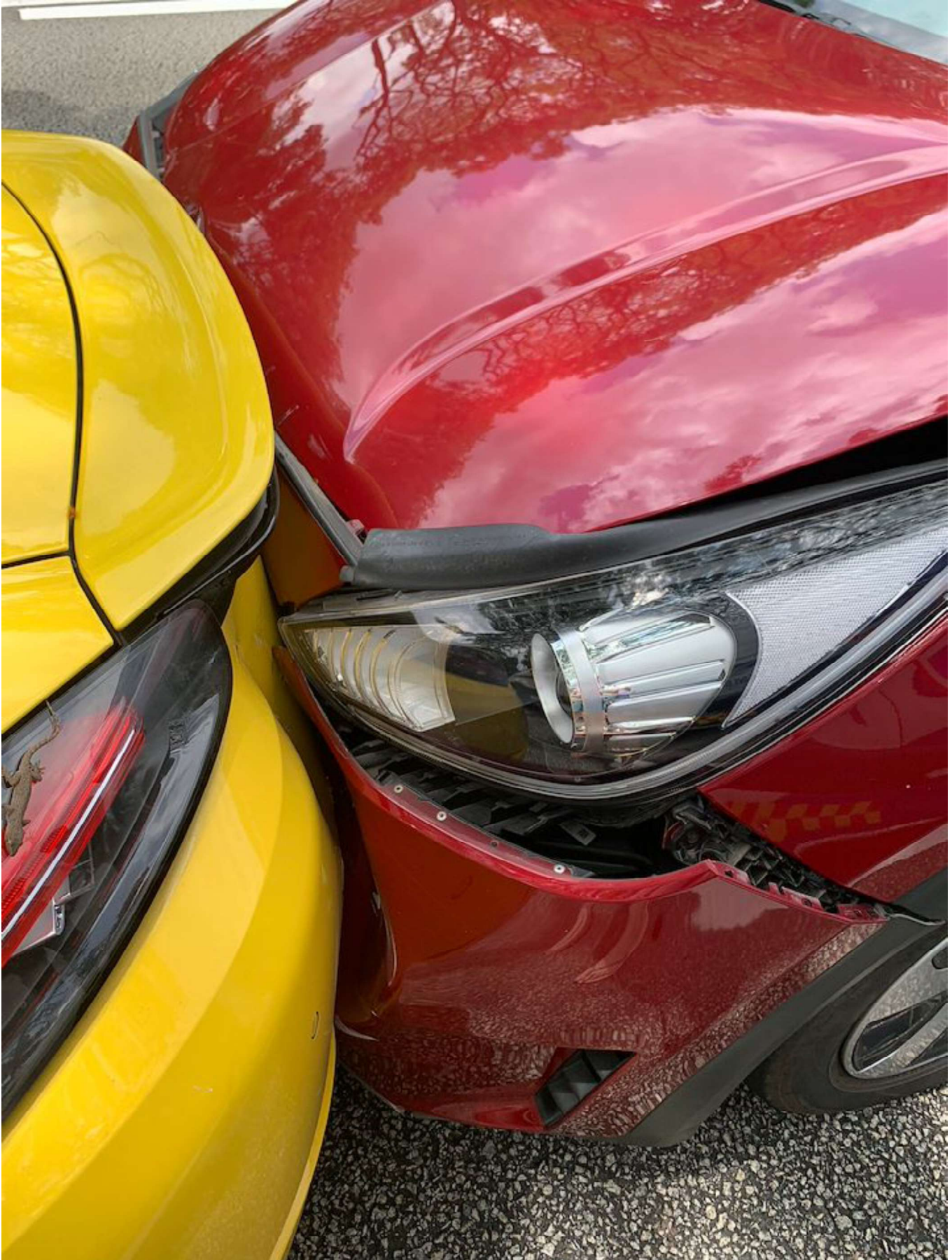


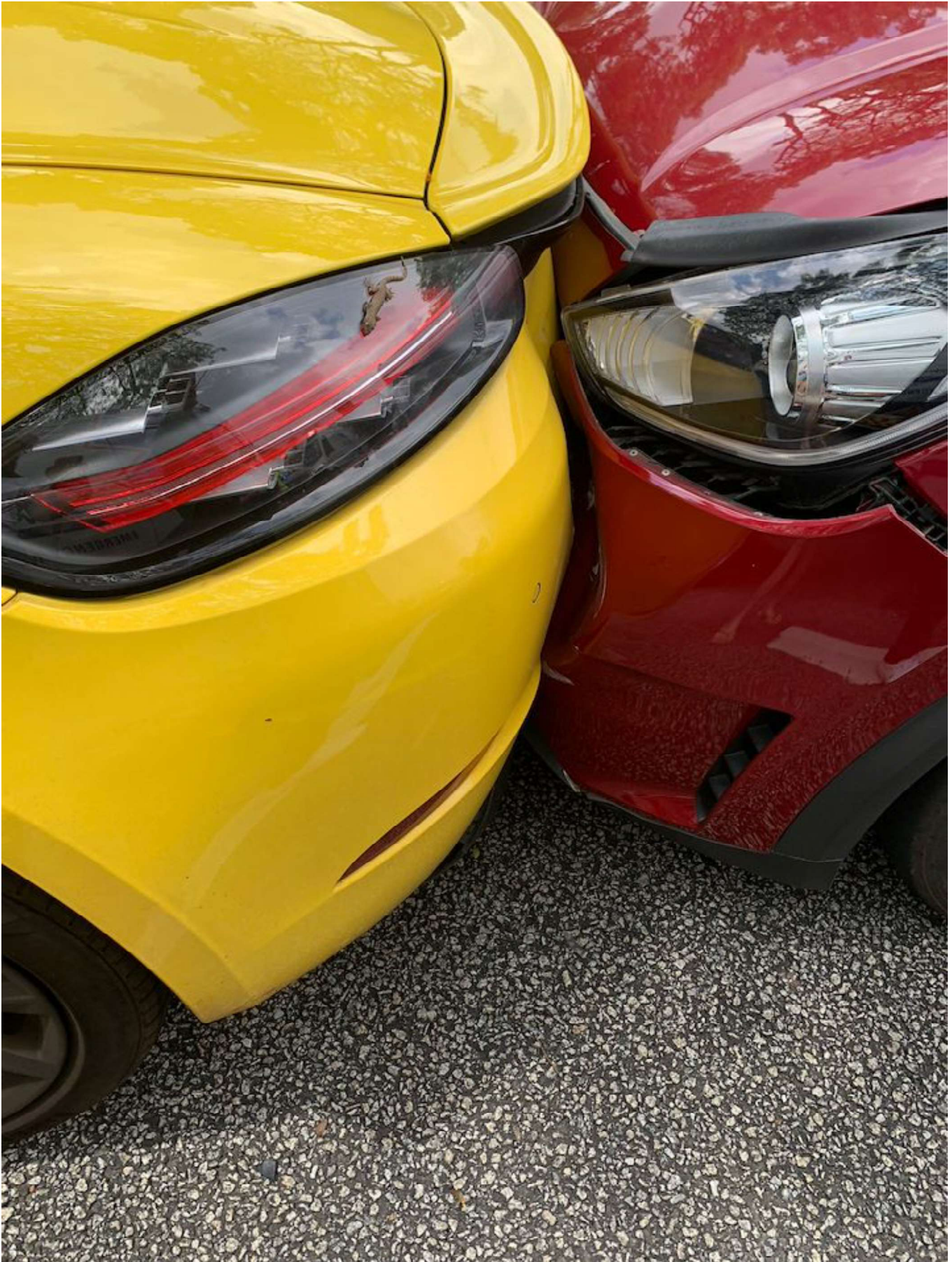















**SINGAPORE
POLICE FORCE**


T/20230312/2066

1 of 3

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20230312/2066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/03/2023 19:57	Vide Report No.:	Station Diary No.: 36
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Informant's Particulars

Name of Informant: LIM ZHI JIAN, CLINTON	Address: 160 LENTOR LOOP #06-03 SINGAPORE 789094		
ID Type / ID No.:	Contact No.:		
NRIC NO / S8805825I	Home/Office:		Mobile: 94523347
Nationality: SINGAPORE CITIZEN	Email: clintonlimzj@gmail.com		
Sex: Male	Age: 35	Date of Birth: 26/02/1988	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Real estate agent	Driving Licence Information: Class: 3A		
			Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/03/2023 14:00	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
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
SML5277T	Car	PORSCHE	718 BOXSTER (982) PDK E6 SES	Yellow	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SML5277T	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001274 12201	24/05/2022	23/05/2023



**SINGAPORE
POLICE FORCE**



T/20230312/2066

2 of 3

Report No. T/20230312/2066

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM ZHI JIAN, CLINTON	ID No.	S88058251
Related Vehicle	NIL	Contact No.	94523347
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I was driving my car (SML5277T) along PIE towards Tuas, in between Stevens Rd and Adam Rd, on 12/03/2023 at about 2pm when the car in front of me suddenly jammed break. I managed to jam break to avoid a collision with the front car, however, the nature of the incident resulted in the car (SJH5445G) behind to crash headfirst onto me. The front of my car was slightly dented with my rear being even more dented. There were about 10 - 11 vehicles in this chain collision accident. Several parties were conveyed to the hospital. I was not physically injured but I went to the Mount Alvernia Hospital for a CT scan, no injuries so far. Traffic Police Sgt (3) T09915 Md Ridwan attended to me on the scene. I have in car camera footage of the accident and my SD card has been seized by the traffic police officer.



**SINGAPORE
POLICE FORCE**



T-20230312/2056

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No: T/20230312/2056

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:

E /
SCCPL KEON LEE

#hkg

Signature Of Informant:

[Handwritten Signature]

Signature Of Interpreter:
Not applicable

Date/Time:
12/03/2023 19:57

Officer In Charge Of Case:
TP / GIT /
SR STAFF SGT TAN JUN YAN
Contact No.: 65476311

Classification Of Case:

NP168



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref. Report No. E/2023.312/0105

I,

SGT (R) 09475 189 RICHAN

(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of

TD HP

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 ROAD 32GB MICRO SD

2

3

4

5

6

7

8

9

10

from

Lim Zhi Jian Clinton

S880582SI

(Name, NRIC or Passport No. / Rank and No.)

of

S8 clutches Avenue #04-04, S269200

(Address / Police Station / NPC / NPP)

on

12/03/2023

(Date)

at

1535hrs

(Time)

Witnessed by / * Handed over by:

(* Delete if applicable)

Received by:

(Signature)

Lim Zhi Jian Clinton

(Name, NRIC or Passport No. / Rank and No.)

(Signature)

SGT (R) 09475

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks:

INVESTIGATION OFFICER: 6547 AF10
TEL: 6547 6171



820 THOMSON ROAD SINGAPORE 574623
 MAIN LINE: 6347 6688 WEBSITE: www.mta.alvernia.sg
 GST REGN NO: M4-0003321-8

Patient Name : LIM ZHI JIAN CLINTON Receipt No. : 230027710
 ID No. : S88058251 Date : 12/03/2023
 Account No. : 0230707298 Page : 1 of 2

Item	Qty	UOM	Amount (\$)
ARCOXIA TAB 120MG	5	EA	20.50
CT HEAD	1	EA	463.00
FASTUM GEL 30G	1	EA	6.88
NECK (2 VIEWS)	1	EA	63.00
OUTPATIENT NURSING SERVICE	1	EA	24.00
RAD'GRAPHER CALLBACK MR,CT,OT	1	EA	134.00
RADIOGRAPHER CALL BACK 1	1	EA	85.00
RADIOLOGIST CALL BACK BF MIDNIGHT	1	EA	320.00
RMO CONSULTATION FEE	1	EA	65.00
Total Charges			1,181.38
GST @ 8%			94.51
			1,275.89

Paid: 1,275.89
 VISA BY LIM ZHI JIAN CLINTON
 Mode of Payment : VISA
 Reference No. : ---

DBS
MOUNT ALVERNIA HOSPITAL
820 THOMSON ROAD
SINGAPORE 574623

DBS
DATE/TIME: 12MAR23 19:16
TID: 4008874 MID: 168168013951
INVOICE#: 138501 BATCH#: 006693
VISA XXXX XXXX 9484 XX/XX
APPR CODE: 001800 HOST: DBS
PAYHAVE RRN: 307111466888
TC: 84CD83A91050117 AID: A0000000031010
DBS VISA TVR: 0000000000

DBS
TOTAL SGD 1275.89

DBS
SIGN X
I AGREE TO PAY THE ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
*** CUSTOMER COPY ***



LIM ZHI JIAN CLINTON Receipt No. : 230027710
S88058251 Date : 12/03/2023
O230707298 Page : 1 of 2

	Qty	UOM	Amount (\$)
120MG	5	EA	20.50
	1	EA	463.00
30G	1	EA	6.88
VS)	1	EA	63.00
NURSING SERVICE	1	EA	24.00
CALLBACK MR, CT, OT	1	EA	134.00
R CALL BACK 1	1	EA	85.00
CALL BACK BF MIDNIGHT	1	EA	320.00
ATION FEE	1	EA	65.00
			1,181.38
			94.51
			1,275.89

Paid:
VISA BY LIM ZHI JIAN CLINTON
Mode of Payment : VISA

Reference No. : ---



Mount Alvernia Hospital Medical Certificate

24-Hour Walk-in Clinic and
Emergency Department

No. M230000111418

Serve all with Love

This is to certify that LIM ZHI JIAN CLINTON, S88058251, is granted Outpatient Sick Leave for 5 day(s) from 12-Mar-2023 to 16-Mar-2023.

Remark :

This medical certificate is not valid for absence from Court or judicial proceeding unless specifically stated.

Dr. Mark Chin
MCR : 10883I

A & E / 24-HOUR WALK-IN CLINIC
Mount Alvernia Hospital
820 Thomson Road
Singapore 574623
Tel: 63476210

12/03/2023

Date