

## 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	10/03/2023 16:46 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/03/2023 17:25 (SGT)
Exact Location of Accident	Near 1390 ECP, Singapore
Additional Location Information	ECP TOWARDS CHANGI
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT3228G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	SRINARA NOP
NRIC No	S8318392F
Email Address	NOPSTER83@GMAIL.COM
Mobile Phone No	(Phone) +65-91529502
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Cayman
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	2687

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	-

### DRIVER

Name of Driver	SRINARA NOP
NRIC No	S8318392F
Date Of Birth	18/06/1983
Occupation	Outdoor

Date Of Driving Pass	01/11/2012
Driving experience	10 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91529502
Alt. Phone Number	-
Email Address	NOPSTER83@GMAIL.COM
Address	470 SIGLAP ROAD #02-30 S 454943
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	SND9773G
Insurance Company of Other Vehicle Owned by Driver	Great Eastern General Insurance Limited

#### 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	3
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
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?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU6457Z
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	SLX6114Y
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)	-

## SKETCH PLAN

## IMPORTANT NOTICE

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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 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 claim and any necessary investigations relating to the claim;
    - (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.
  - (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

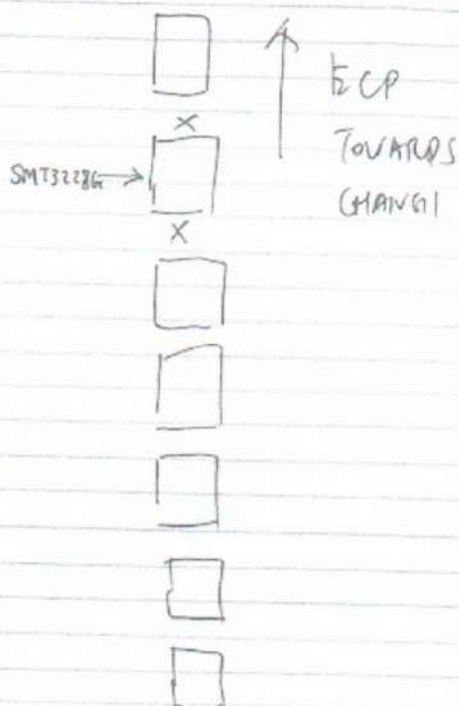
Sketch Plan

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

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident



On 9-Mar-2023, 5.20 pm I was driving along ECP towards Changi airport, when the car in front of me stopped which made me stop as well. I managed to brake in time and not hit the first car. However, I heard a loud bang a few cars behind after which I felt the car behind me hit my rear which caused me to hit the first car in front of mine.

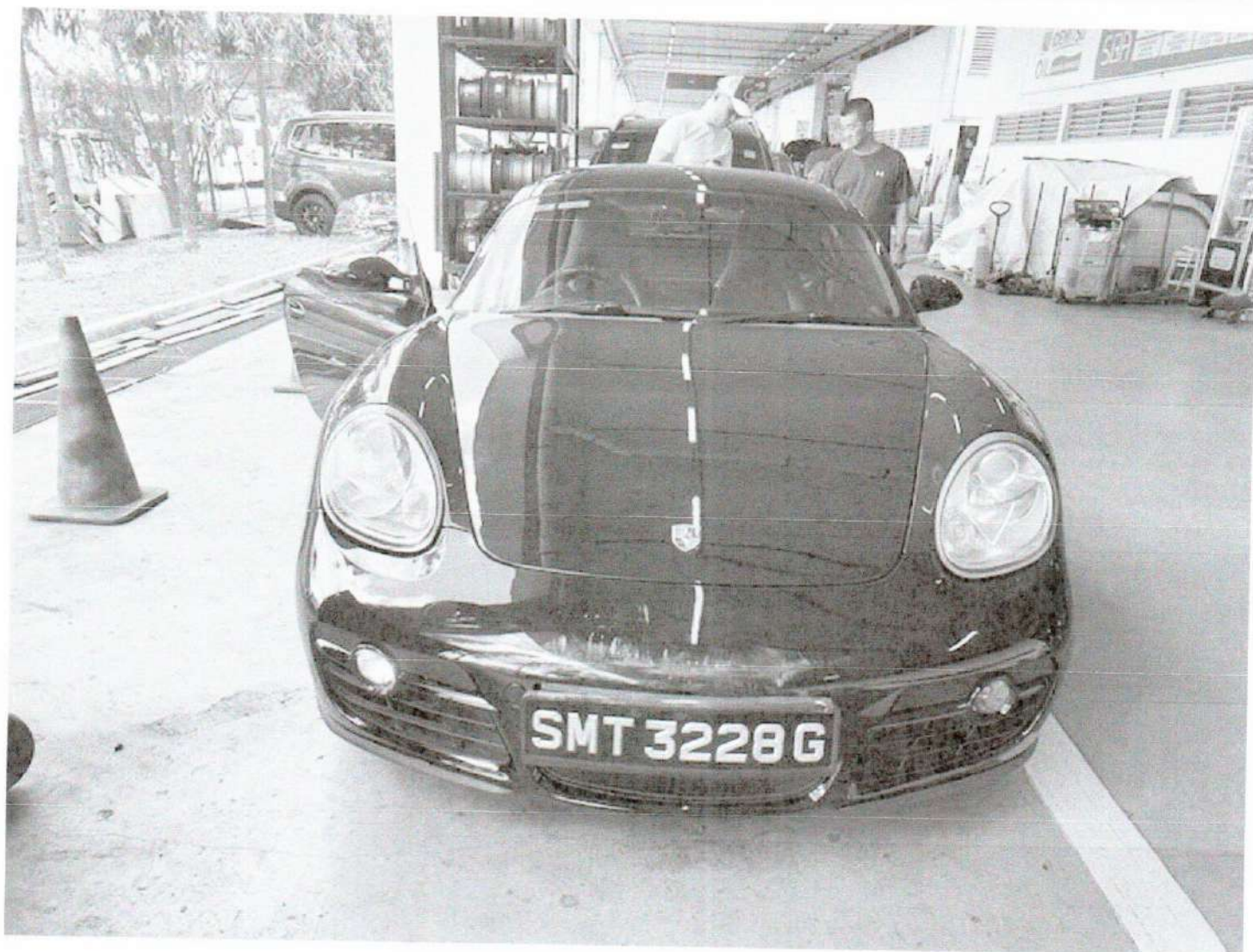
Declaration

We declare the foregoing particulars are true in every respect.

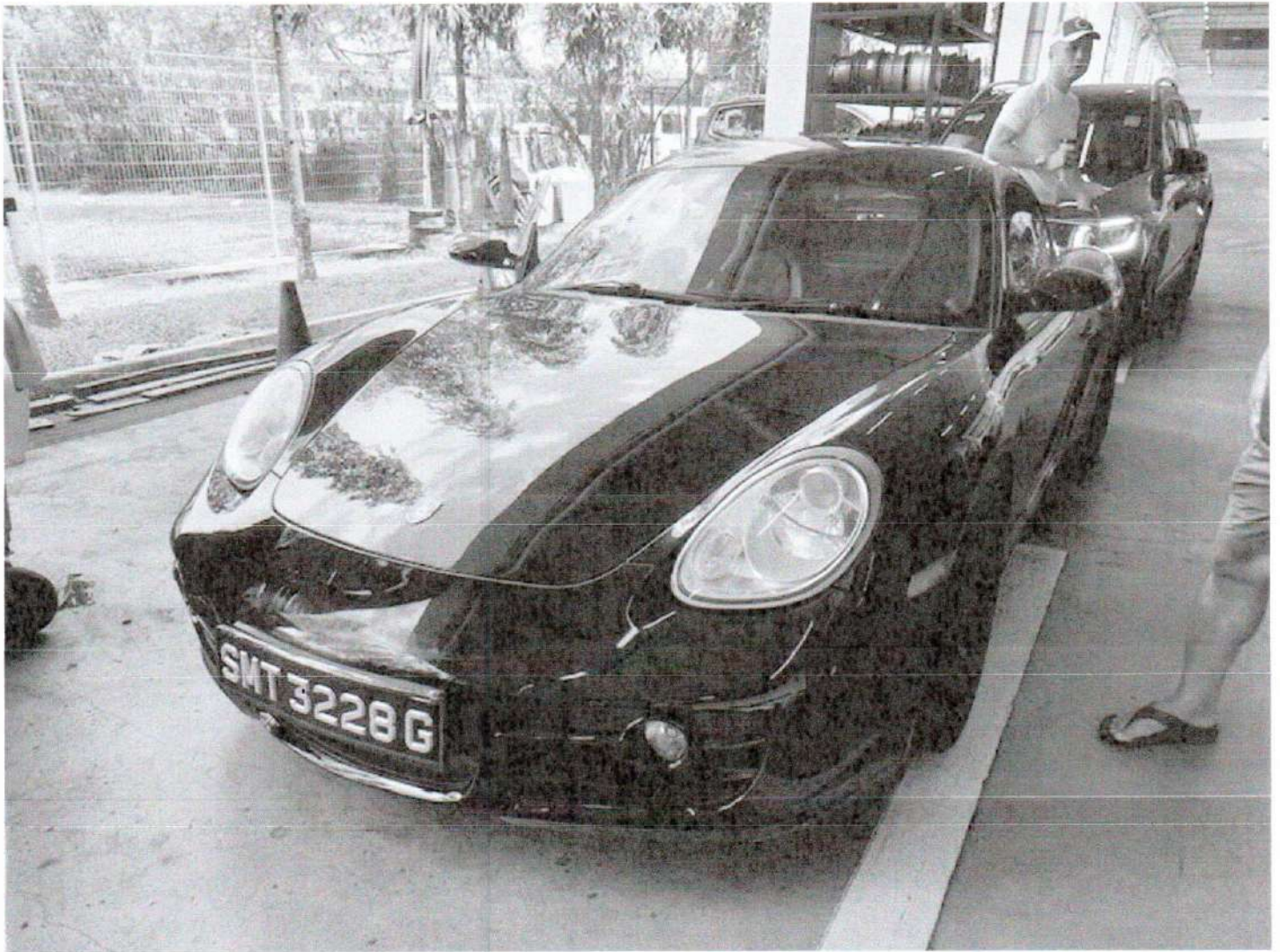
Policyholder's Signature / Date & Time

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

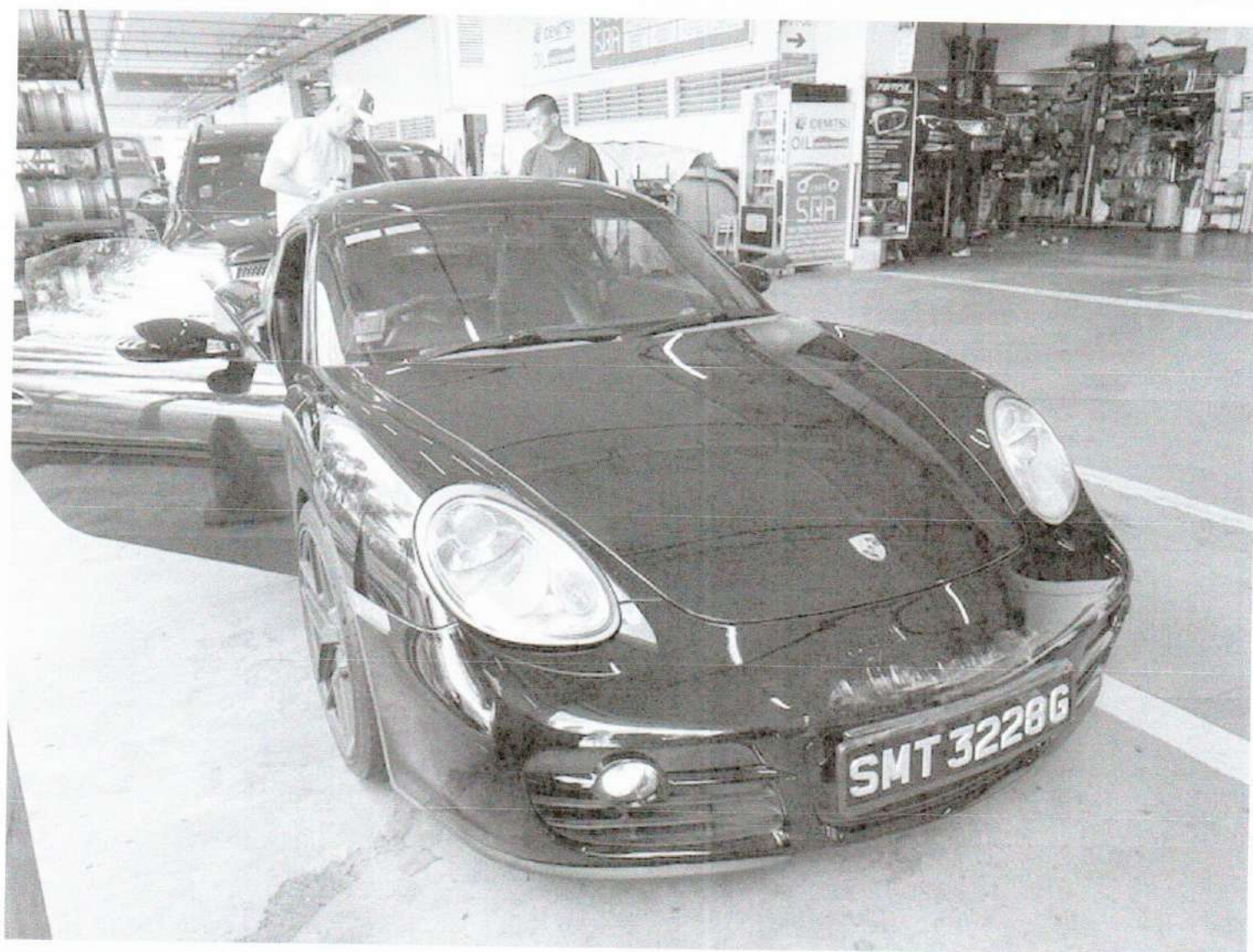
Tan Wai N.  
Witnessed by Reporting Centre Personnel





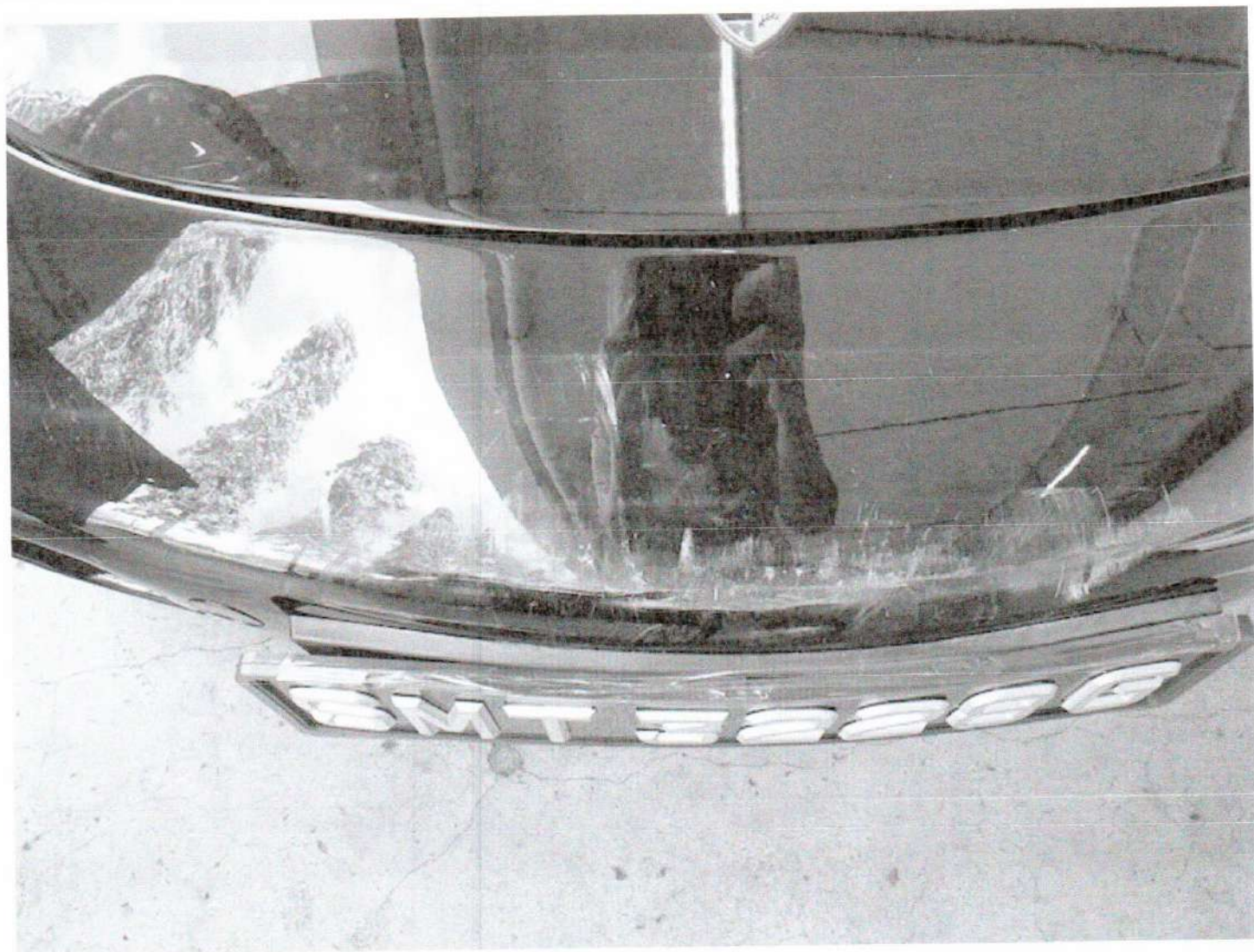


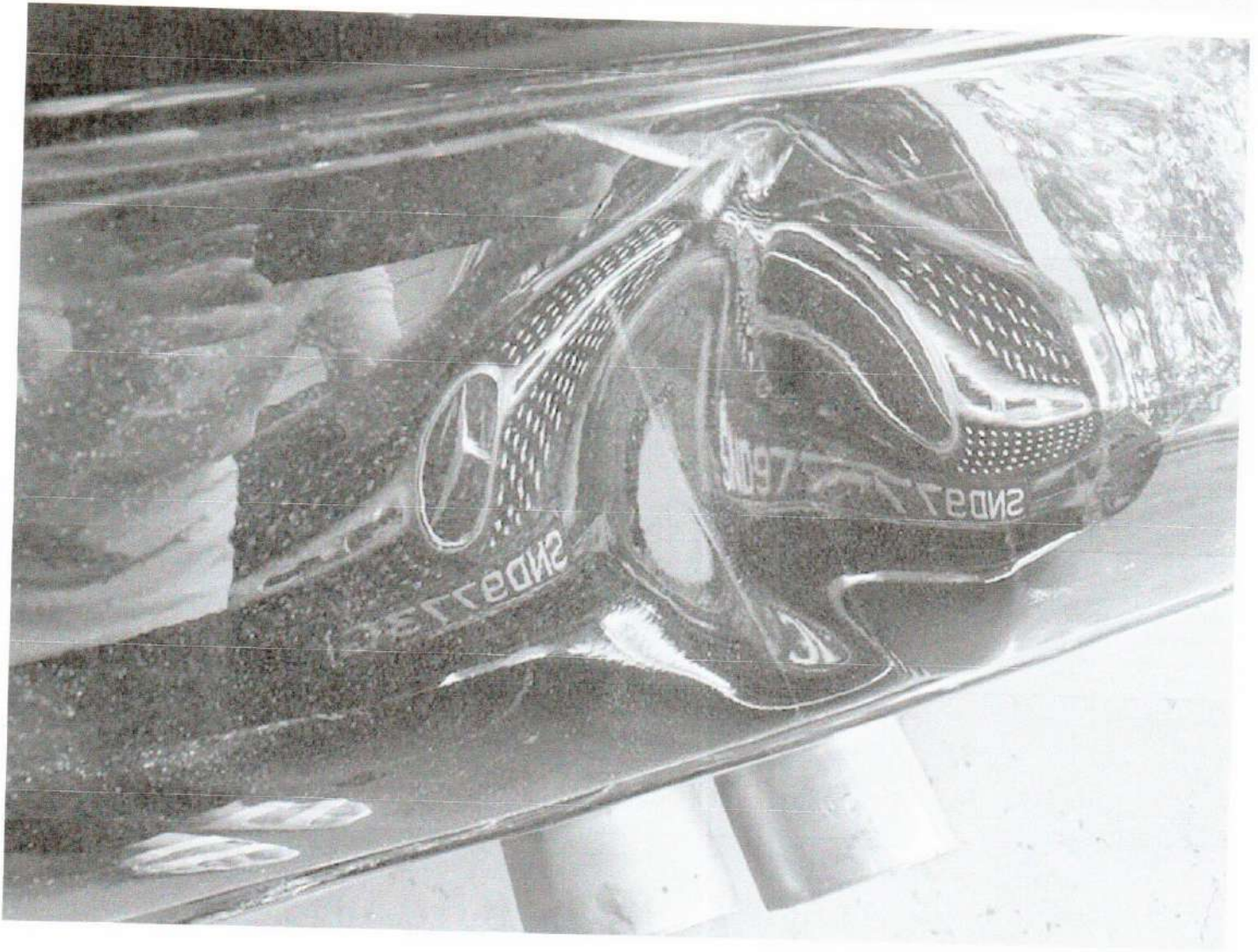




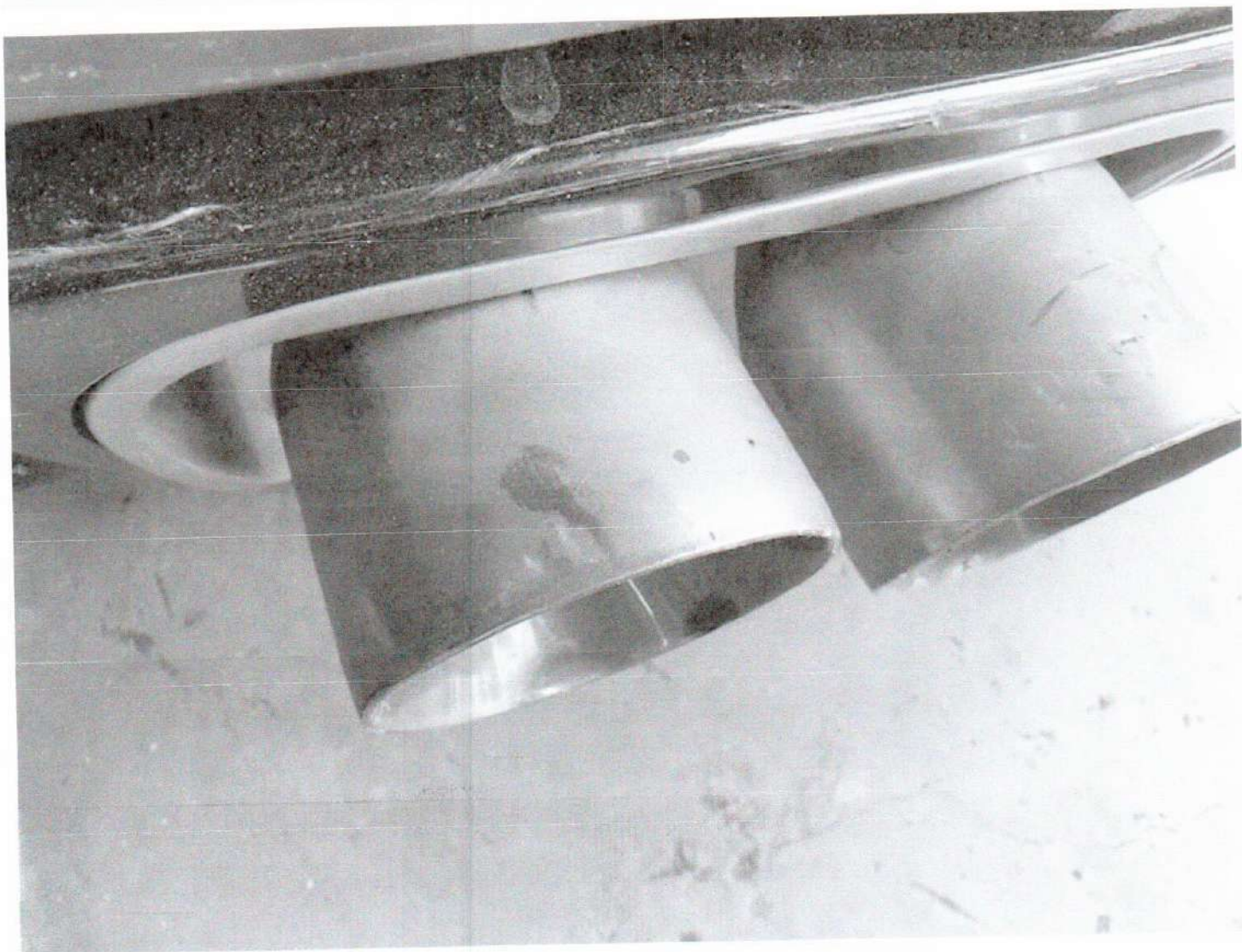


IMAGES #4



















SINGAPORE  
POLICE FORCE

## POLICE REPORT (NP299)

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2440000



G/20230310/7024

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Report No. G/20230310/7024

Date/Time Report Made 10/03/2023 10:51		Vide Report No.		Station Diary No.	
Name Of Informant SRINARA NOP		Address 470 SIGLAP ROAD #02-30 SINGAPORE 454943			
ID Type / ID No. NRIC NO / S8318392F		Contact No. Home/Office: Mobile: 91529502			
Nationality SINGAPORE CITIZEN		Email Address NOPSTER83@GMAIL.COM			
Occupation Salesperson (door-to-door)		Sex Male	Age 39	Date of Birth 18/06/1983	Race Thai
Institution/School Name		Language English			
Date/Time Of Incident 09/03/2023 17:25 - 09/03/2023 17:30		Location Of Incident 1000 EAST COAST PARKWAY SINGAPORE 449876			
Brief details.					

On the evening of 9th march 2023, I was driving (license plate SMT3228G, black Porsche Cayman) on the furthest right lane on the way back home from work on the ECP at around 5.20-5.25pm when the car in front of me began to slow down before fully stopping. I managed to slow down to stop my car from hitting the front car in time. However, I heard a loud sound from the back after which I felt the car behind mine bang into my car rear which caused me to hit the car in front of me. I turned off my engine and came out to assess the damage and /or any injury to myself and the fellow drivers. The front driver (license plate SLX6114Y), Rohaizad Bin Mohammed Ismail, S1792891J, said that the car in front of him at suddenly stopped so he had to suddenly hard brake. He acknowledged to

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: 10/03/2023 10:51
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230310/7024

me that I had stopped in time and didn't initially bang his car but later heard a delayed banging sound which led to my car banging into his car rear. He told me he was fine and assumed everyone was ok so he left but gave his details for insurance claim purposes.

I spoke to the car driver behind me, Muhammad Siraaj Bin Mohamed Anwar, S8532751H, license plate SLU6457Z, and he said he managed to stop in time as well but heard a loud bang behind his car before feeling his car get hit which caused his car to bang into my mine. He mentioned that his family who were in the car and he were all fine albeit in shock because it was their first road accident on the express way. After observing the accident as a whole, I realised that my car was the second car in a 7 car pile up accident on the ECP towards Changi Airport (10km from Changi Airport). I waited for the police officer on the scene to take all of our particulars and statements for his report (E/20230309/0110) before allowing us to leave then I drove off home.

Subjects Involved			
Victim			
Person Name	SRINARA NOP		
ID Type	NRIC NO	ID No	S8318392F
Gender	Male	Age	39
Race	Thai	Language	English
Occupation	Salesperson (door-to-door)	Address	470 SIGLAP ROAD #02-30 SINGAPORE 454943
Mobile No	91529502	Is Informant A Victim?	Yes
Person Name	SRINARA NOP (Informant)		

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:  
10/03/2023 10:51

Classification Of Case:

SINGAPORE  
POLICE FORCE

G/20230310/7024

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230310/7024

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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.
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Officer In-Charge Of Case:	Classification Of Case: