

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 Authorised 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 Report 23/09/2020 15:00
 Date Of Accident 22/09/2020 19:35
 Exact Location Of Accident TELOK BLANGAH ROAD.
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDP9166P
Insured/Policyholder
 Name Of Registered Owner PHIA SIEW HONG JOLEEN
 NRIC No S1828600I
 Email Address JOLEEN27@GMAIL.COM
 Mobile Phone No (LOCAL) +65-96644033
 Alternative Phone No Office-96644033

Vehicle Particulars

Manufacturer MERCEDES-BENZ
 Model C180

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? YES

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number P10220172R01
 Cover Note Number

Driver

Name of Driver PHIA SIEW HONG JOLEEN
 NRIC No S1828600I
 Date Of Birth 29/05/1967
 Occupation INDOOR
 Date Of Driving Pass 02/01/1996
 Driving Experience 24 YEARS AND 8 MONTHS
 Gender FEMALE
 Mobile Number (LOCAL) +65-96644033

Fax Number	
Contact Number	OFFICE-96644033
EMail Address	JOLEEN27@GMAIL.COM
Address	199 TELOK KURAU ROAD #02-03
Postcode	423833
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MARINE PARADE NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4428999 - FAX NO: 62447678
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

POLICE REPORT NO.T/20200923/2003.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBH800S
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name RYDER
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBH800S
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

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1. Please report correctly the details of the accident to speed up the claims process.
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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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

Refer to Police Report

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

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



**SINGAPORE
POLICE FORCE**



T/20200923/2003

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

1 of 4

Report No. T/20200923/2003

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/09/2020 00:28	Vide Report No.:	Station Diary No.: 5
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Informant's Particulars

Name of Informant: PHIA SIEW HONG JOLEEN			Address: 199 TELOK KURAU ROAD #02-03 SINGAPORE 423833		
ID Type / ID No.: NRIC NO / S1828600I			Contact No.: Home/Office: Mobile: 96644033		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 53	Date of Birth: 29/05/1967	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: FINANCIAL SERVICES CONSULTANT			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/09/2020 19:35	Type of Location: Straight Road
Location: TELOK BLANGAH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		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	Condition	No of Passenger
FBH800S	Motorcycle				Seriously Damaged	0
SDP9166P	Car	MERCEDES BENZ	C180K	Beige	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDP9166P	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10220172R01	28/08/2020	27/08/2021

Accident Sketch Plan



SINGAPORE POLICE FORCE



T/20200923/2003

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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Report No. T/20200923/2003

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	PHIA SIEW HONG JOLEEN	ID No.	S1828600I
Related Vehicle	SDP9166P (Car)	Contact No.	96644033
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	NIL

Brief Details.

On 22/09/2020, I was from Alexandra Road, AIA Building heading back to Telok Kurau Road. I was driving my vehicle SDP9166P (Mercedes 180) travelling along Telok Blangah Road. I was on the right most lane and I decided to drive slower and as such I signaled left, checked my rearview mirrors, left side mirror and blind spot and switch to the middle lane. After I filtered to the second lane, I decided to go to the left most lane. My signal was still on. I checked my left side mirror and blind spot and slowly moved into the lane, my car was in a slow speed. The motorcycle coming from the back of my car. Shortly after, I felt a hit and heard a bang. Then I saw a motorcycle skid and the motorcyclist spinning in front of me. This was in front of SPC along Telok Blangah Road and it happened at about 1938hrs.

I stopped my car, I alighted from the vehicle as soon as the traffic was clear for me to do so. While I was waiting for the traffic to clear, I noticed a passer by who was jogging and was attending to the motorcyclist. I also noticed that the passer by was on the phone.

After the traffic was clear, I went to the motorcyclist and the passer by. I asked if ambulance was called and when the passer by informed that he had already called for the ambulance, I went back to my car and moved it to the roadside as not to obstruct traffic. I then attended to the injured motorcyclist and waited for the ambulance and Traffic Police to arrive.

After explaining what happened to both the paramedics and traffic police officer, the traffic police officer returned my driving license and handed me a case card with reference number D/20200922/0093. He also told me to lodge a report. He then told me that I could leave. I drove my car to NUH as I wanted to see how the injury condition of the motorcyclist. I stayed there for about 2 hours before leaving for home as I could not visit the motorcyclist. I drove passed the accident site on my way back and did not see the motorcycle broken pieces on the roadside.

Damage to my car:

- Scratches and slight dent on the front left side
- Broken left side mirror

I do not have in car camera. I am not injured.

I will be calling the insurance tomorrow and seek further advise from them.

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20200923/2003

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Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No. T/20200923/2003

CONTINUATION OF REPORT

I do not have the details of the motorcyclist. I met his wife at NUH however she was not comfortable with providing me the details of her husband. I only have his vehicle registration number which is FBH800S.

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20200923/2003.

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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Report No. T/20200923/2003

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 3 NUR AMERA KHAIRYANI BINTE ALI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 23/09/2020 00:28
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD AFIQ BIN RAHMAT Contact No.: 65476171	Classification Of Case:
Authentication Stamp NP168	

CERT OF INS

It pays to choose

**Budget
Direct**
insurance

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10220172R01

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

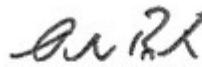
Certificate Number P10220172R01 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	:	SDP9166P
Chassis Number	:	WDD2040462A165961
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	28/08/2020 (00:00)
3) Date / Time of Expiry of Insurance	:	27/08/2021 (23:59)
4) Excess (i) Policy	:	S\$ 0.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Phia Siew Hong Joleen
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
<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. 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 cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.</p>		
Main Driver / Date of Birth	:	Phia Siew Hong Joleen(29/05/1967)
Named Driver(s) / Date of Birth	:	No driver is named.
7) Limitation as to use*		
<p>Use only for social, domestic and pleasure purposes and for the occasional business purposes of the drivers listed above. 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 (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.</p>		
8) Finance Company	:	NA

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 (Chapter 189) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 23/07/2020

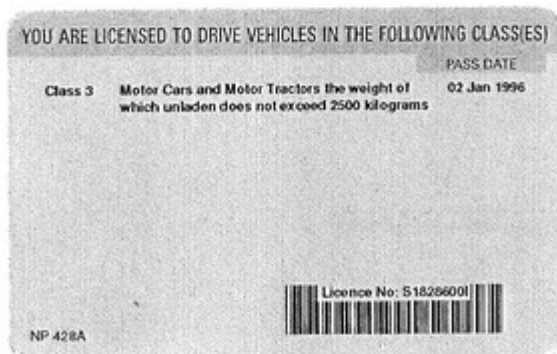
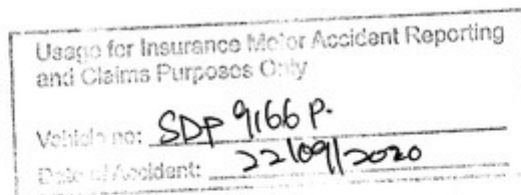
Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance



Simon Birch

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

Identification Card



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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