

## 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	10/04/2023 10:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/04/2023 23:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OCEAN WAY, SENTOSA
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG911S
-----------------------------	---------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WINSTON QUEK SENG SOON
NRIC No	S1661388F
Email Address	WINSTON@WINSTONQUEKLAW.COM
Mobile Phone No	(Phone) +65-96779990
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Porsche
Model	911
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	3800

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220067699

#### DRIVER

Name of Driver	ANNA SOH SOH NEO
NRIC No	S1762562D
Date Of Birth	22/06/1966
Occupation	Indoor

Date Of Driving Pass .....	08/05/1984
Driving experience .....	38 YEARS AND 11 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-90663990
Alt. Phone Number .....	-
Email Address .....	ANNA@WINSTONQUEKLAW.COM
Address .....	88 TANAH MERAH KECHIL AVE #06-22 SE 465518
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) .....	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 .....	WINSTON QUEK SENG SOON
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Tanah Merah Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18004499999
Alt. Police Station Phone No .....	(Fax) +65-62447251
Police Station Address .....	Blk 51 New Upper Changi Road #01-1514 Singapore 461051
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT AND 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 .....	SHD3163C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	LIM TIONG BIN
Contact Number .....	(Phone) +65-96818221
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 .....	WINSTON QUEK SENG SOON
Gender .....	Male
Phone No .....	(Phone) +65-96779990
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLG911S
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



## SKETCH PLAN


## 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 willful 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 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.

 10/4/23

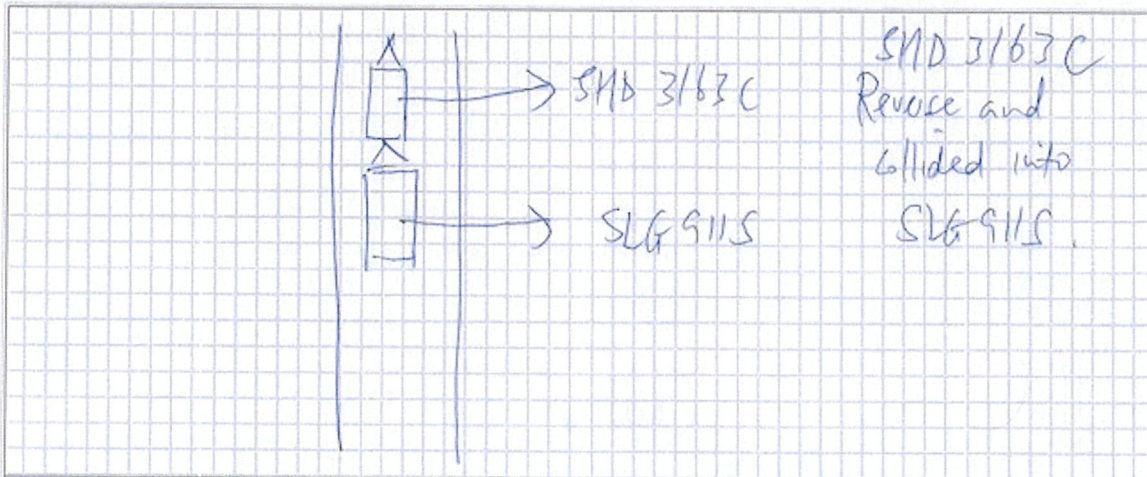
Policyholder's Signature / Date & Time



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 No. T/20230409/2050

Declaration

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



Policyholder's Signature / Date & Time

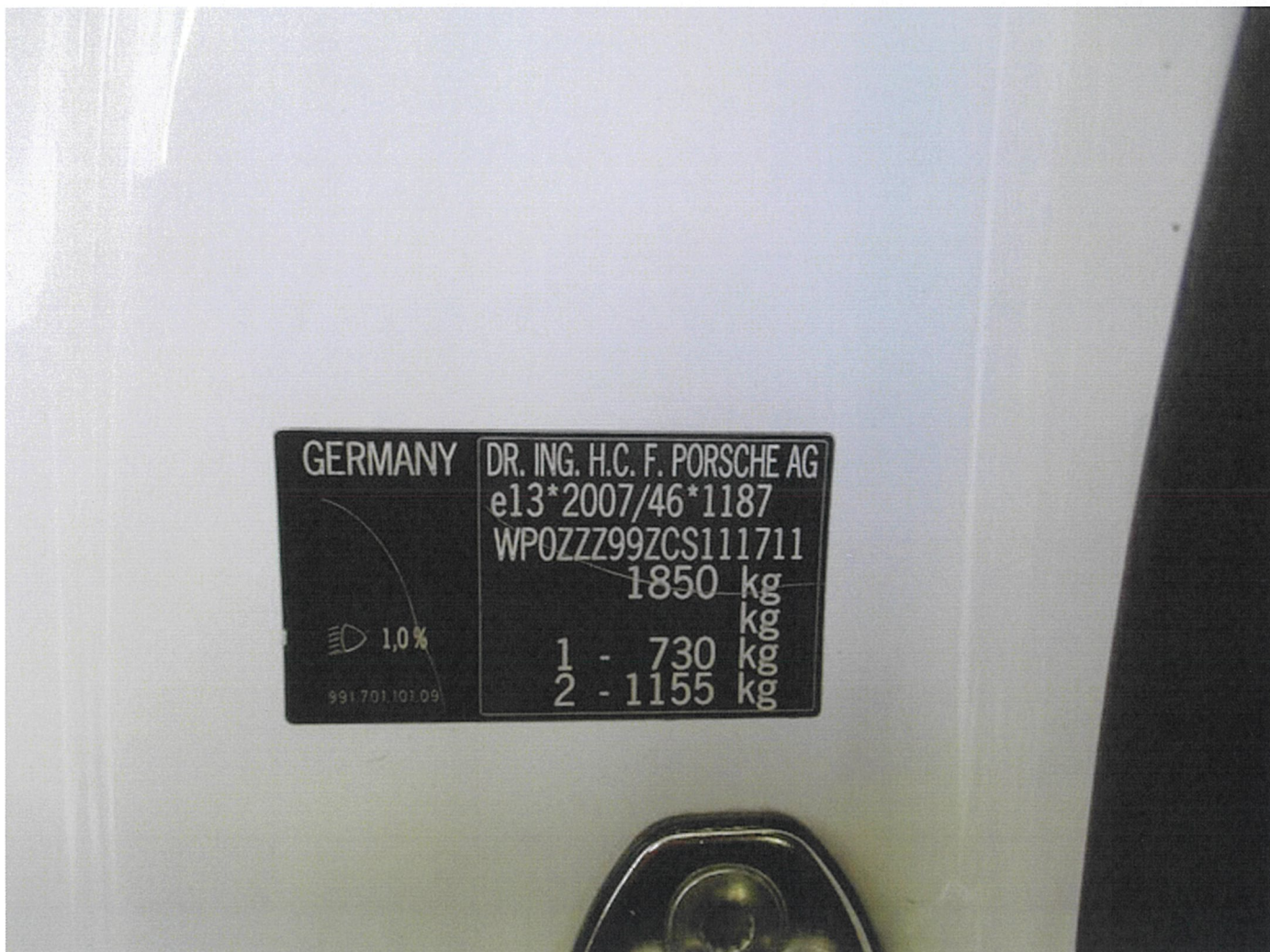


Driver's Signature (if driver is not the policyholder) / Date & Time

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





































**SINGAPORE  
POLICE FORCE**



T/20230409/2050

Police Station Of Origin:  
Tanah Merah NPP  
51 New Upper Changi Road #01-1514  
SINGAPORE 461051  
Tel No: 1800-4499999

1 of 3  
Report No. T/20230409/2050

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 09/04/2023 15:06	Video Report No.:	Station Diary No.: 12
--	-------------------	--------------------------

**Informant's Particulars**

Name of Informant: WINSTON QUEK SENG SOON	Address: 88 TANAH MERAH KECHIL AVENUE #06-22 SINGAPORE 465518		
ID Type / ID No.: NRIC NO / S1661388F	Contact No.: Home/Office: Mobile: 96779990		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 58	Date of Birth: 07/07/1964	Type of Informant: Passenger
Race: Chinese	Language:		
Occupation: LAWYER	Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/04/2023 11:10	Type of Location: Straight Road
Location:  OCEAN WAY				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SHD3163C	Car	HYUNDAI		Blue		0
SLG911S	Car	PORSCHE		White		1

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**

T/20230409/2050

Police Station Of Origin:  
Tanah Merah NPP  
51 New Upper Changi Road #01-1514  
SINGAPORE 461051  
Tel No: 1800-4499999

3 of 3

Report No. T/20230409/2050

CONTINUATION OF REPORT

Signature of Officer Recording The Report:  
G /  
SGT 2 NORISHAM BIN KAMIZAN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
SR STAFF SGT MUHAMMAD NOOR BIN  
ABDUL RAHMAN  
Contact No.: 65476219

Signature Of Informant:

Date/Time:  
09/04/2023 15:06

Classification Of Case:

NP168



**SINGAPORE  
POLICE FORCE**



T/20230409/2050

2 of 3

Report No. T/20230409/2050

Police Station Of Origin:  
Tanah Merah NPP  
51 New Upper Changi Road #01-1514  
SINGAPORE 461051  
Tel No: 1800-4499999

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	LIM TIONG BIN	ID No.	S1431993Z
Related Vehicle	SHD3163C (Car)	Contact No.	96818221
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Passenger</b>			
Name	WINSTON QUEK SENG SOON	ID No.	S1661388F
Related Vehicle	SLG911S (Car)	Contact No.	96779990
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
<b>Driver</b>			
Name	SOH SOH NEO ANNA	ID No.	S1762562D
Related Vehicle	SLG911S (Car)	Contact No.	90663990
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 8/4/2023 at 2310hrs, my wife Soh Soh Neo Anna (H/P: 90663990) was driving a car which belongs to me, SLG911S along Ocean Way when a blue taxi SHD3163C had stopped in front of my car. My wife had stopped the car as there were no available lanes to overtake the taxi as the said road is a two-way lane road with a single lane for both directions.

Suddenly, the taxi reversed. My wife honked to alert the said taxi driver however the taxi continued to reverse, and the rear portion of the taxi had hit onto the front portion of my car. There were two independent witnesses that had witnessed the said accident. No police or ambulance was at scene. There were no in car camera in my car.

I was a passenger and was sitting at the rear passenger seat during the accident. I felt pain on the right elbow, back and neck and I will proceed to the clinic for further medical treatment after lodging a report.