

## 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	17/04/2023 11:37 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	17/04/2023 07:32 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BEDOK NORTH ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB951C
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KWOK LI YU, MICHELLE
NRIC No	SXXXX676J
Email Address	MSMICHELLEKWOK@GMAIL.COM
Mobile Phone No	(Phone) +65-90622334
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Golf
Variant	1.4 TSI CL
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	1395

#### INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00869020/02

#### DRIVER

Name of Driver	KWOK LI YU, MICHELLE
NRIC No	SXXXX676J
Date Of Birth	17/12/1985
Occupation	Indoor

Date Of Driving Pass .....	03/06/2004
Driving experience .....	18 YEARS AND 10 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-90622334
Alt. Phone Number .....	-
Email Address .....	MSMICHELLEKWOK@GMAIL.COM
Address .....	5000L MARINE PARADE FD #21-52
Address complement .....	-
Postcode .....	449293
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 .....	Collision - Change/cross lane
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? .....	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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE STATEMENT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SLE6311U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-

## Accident Toolkit

### Sketch plan

Sketch of accident scene:

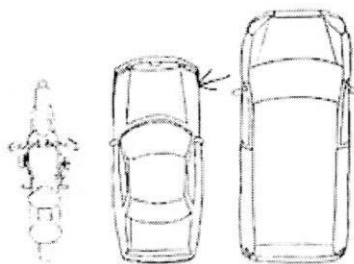
Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

If safe, please take photos or videos from all angles.

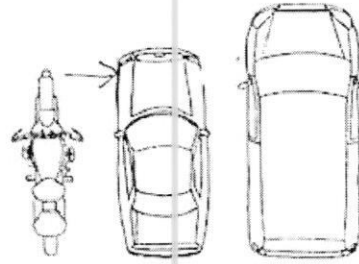


On 17 April 2023, at 7.45am, I was at the junction of Bedok North Rd and Bedok Reservoir Road. I was in the straight-going lane of Bedok North Road (lane 3). When the traffic light turned green, the front car moved, and I also started moving as well. Suddenly, there was a bang on my right side. On my right, there was a BMW in the right-turning-only lane (there are 2 right-turning lanes), towards Bedok Reservoir Road. She suddenly turned into my lane, clearly trying to cut the long queue that was backed up on the way to the flyover. It was a very busy road, and there are queues every day. I take this road to work every day (Mon-Fri). The BMW had one passenger (her daughter). We got out to take pictures and videos of the accident, and exchange info.

Please indicate on vehicle A (your vehicle) and, vehicle B (third party vehicle), the point of impact and area(s) of visible damage with an arrow.



Vehicle A  
(SLB951C)



Vehicle B  
(SLE63114)

17/4/2023  
10:05

**direct  
asia**  
Insurance

Call us direct  
Customer Care  
**6665 5555**  
Claims Support 24/7 Hotline  
**6532 1818**  
+65 6602 3629 (from overseas)