

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 29/04/2023 14:49 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 28/04/2023 07:55 (SGT)
Exact Location of Accident Singapore
Additional Location Information PASIR RIS DRIVE 6
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJJ3464D

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM CHENG CHUAN
NRIC No S2512432D
Email Address MODERNDDESIGNLLP@GMAIL.COM
Mobile Phone No (Phone) +65-90210857
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 0

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5103405504-04

DRIVER

Name of Driver LIM CHENG CHUAN
NRIC No S2512432D
Date Of Birth 19/06/1946
Occupation Indoor

Date Of Driving Pass	22/04/1974
Driving experience	49 YEARS
Gender	Male
Mobile Number	(Phone) +65-90210857
Alt. Phone Number	-
Email Address	MODERNDDESIGNLLP@GMAIL.COM
Address	111 PASIR RIS STREET 11 #03-635
Address complement	-
Postcode	510111
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	Side Swipe
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	LEE SIEW ENG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Pasir Ris Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005852999
Alt. Police Station Phone No	(Fax) +65-65855261
Police Station Address	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	SJJ4507H
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 CHENG CHUAN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJJ3464D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	LEE SIEW ENG
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJJ3464D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.



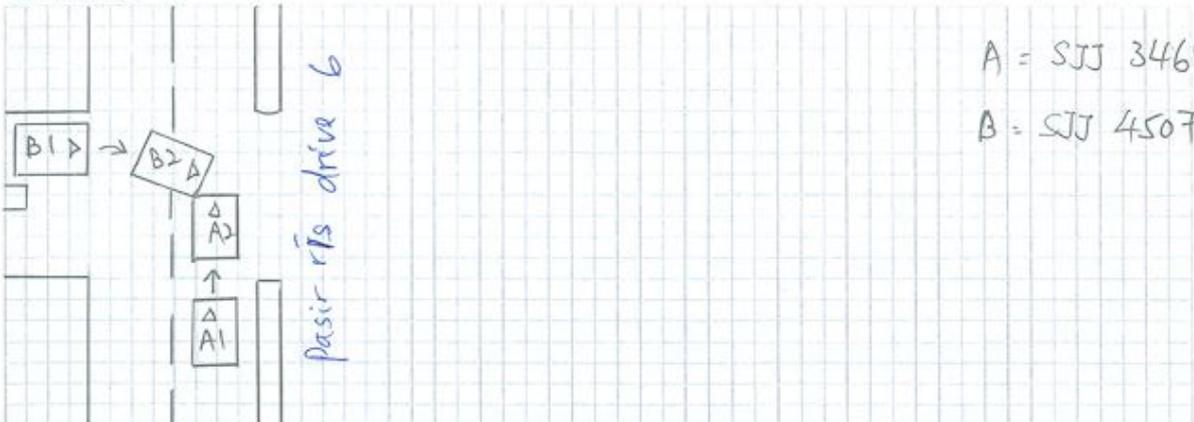
 Policyholder's Signature / Date & Time



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

 Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

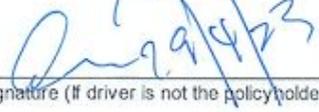
On 28-04-2023 at about 07:55 AM. I was travelling along Pasir Ris Drive 6. I was going straight. Suddenly, a vehicle B (SJS 4507H) dashed out from the Exit of Block 107 HDB Pasir Ris and hit my vehicle ^{of the} left front portion.

Please refer the police report: T/20230428/2063.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date & Time

10:50 AM

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

 Witnessed by Reporting Centre Personnel











TOYOTA MOTOR CORPORATION
MODEL NP93R-BEPRKT 1497 mL
ENGINE 1NZ-FE
FRAME No. MR053HY9305079625
COLOR 4RO EE10 Z35 GVM(kg)
TRIM U340E -02A AUG 08
PLANT
MADE IN THAILAND
TOYOTA MOTOR THAILAND CO., LTD.










**SINGAPORE
POLICE FORCE**


T/20230428/2063

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20230428/2063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/04/2023 16:02	Video Report No.:	Station Diary No.: 67
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Informant's Particulars

Name of Informant: LIM CHENG CHUAN		Address: APT BLK 111 PASIR RIS STREET 11 #03-635 SINGAPORE 510111	
ID Type / ID No.: NRIC NO / S2512432D		Contact No.:	Mobile: 90210857
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 76	Date of Birth: 19/06/1946	Type of Informant: Driver
Race: Chinese		Language:	
Occupation: Carpenter		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 28/04/2023 07:55	Type of Location: Straight Road
Location: PASIR RIS DRIVE 6			
Weather: Clear	Road Surface: Dry		
Traffic Flow: Dual Carriage Way	Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJJ3464D	Car	TOYOTA	VIOS E AUTO	Beige	Slightly Damaged	1
SJJ4507H	Car	TOYOTA	RUSH 1.5X A	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJJ3464D	NTUC Income Insurance Co-Operative Limited	5103405504-04	10/09/2022	09/09/2023



**SINGAPORE
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T/20230428/2063

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20230428/2063

CONTINUATION OF REPORT

Brief Details.

On the 28/04/2023 at about 0755hrs, i was driving my vehicle bearing plate number of SJJ3464D with my wife being a passenger, along Pasir Ris Dr 6, traffic conditions were light. As i was driving along the said road, a red color Toyota car bearing a plate number of SJJ4507H suddenly came out of a carpark on the left and i did not manage to stop in time as such our vehicles collided into one another. We alighted from our vehicle and took photos of the incident. My wife and i went to the doctor and both of us were given 3 days MC. No traffic police or ambulance came down to scene.



**SINGAPORE
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T/20230428/2063

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3
Report No. T/20230428/2063

CONTINUATION OF REPORT

Signature of Officer Recording The Report: G / SGT 1 MUHAMMAD NASRULLAH AFIQ BIN ZULKIFLIE	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / GIA / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	

Signature Of Informant:	
Date/Time: 28/04/2023 16:02	
Classification Of Case:	

NP168