

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	28/04/2023 13:45 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/04/2023 17:40 (SGT)
Exact Location of Accident	KJE, Singapore
Additional Location Information	KJE (TO PAYA LEBAR WAY)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX6649H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE HONG LIANG
NRIC No	SXXXX269B
Email Address	OETIDEVIL71@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-98712023
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	1500

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5134701755

DRIVER

Name of Driver	LEE HONG LIANG
NRIC No	SXXXX269B
Date Of Birth	15/01/1971
Occupation	Indoor

Date Of Driving Pass	15/06/2011
Driving experience	11 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98712023
Alt. Phone Number	-
Email Address	OETIDEVIL71@YAHOO.COM.SG
Address	APT BLK 123 PAYA LEBAR WAY #02-2911
Address complement	-
Postcode	381123
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 - 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?	No
Was any injured conveyed to hospital by ambulance?	-
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	HELEN PHUA
Gender	Female

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

ON 27/4/23, AT ABOUT 540PM, I WAS DRIVING ALONG KJE ON THE MOST OUTER RIGHT LANE (1). SUDDENLY A COACH ON MY LEFT CAME INTO MY LANE (1). I STEPPED ON MY BRAKE TO STOP MY CAR TO AVOID HITTING THE COACH. THEN, I FELT AN IMPACT AT THE REAR OF MY CAR (A). CAR B (GBF6917K) HAS HIT THE REAR OF MY CAR (A).

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	GBF6917K
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	LUCUS WONG
NRIC No	SXXXX365A
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Describe Circumstance of the Accident

On 28/4/23, at about 12:00pm, I was driving along KSE on the most outer right lane (1). Suddenly a coach on my left came into my lane (1). I stepped on my brake to stop my car to avoid hitting the coach. Then, I felt an impact at the rear of my car (A). Car B (BF69HK) has hit the rear of my car (A).

Declaration

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



[Signature]
Policyholder's Signature / Date & Time

28/4/23, 12pm

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

28/4/23, 12pm

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

IMPORTANT NOTICE

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Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 2/21/22

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

Sketch Plan

28/4/23, 12pm

28/4/23

COACH

1

2

3

4

A - SKK6649H

A - SKK6649H
B - GBF6917K















