



## 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	26/05/2023 17:49 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	24/05/2023 18:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS CHANGI
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG113D
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIM CHOON HUAT
NRIC No	SXXXX708F
Email Address	andrewsg777@gmail.com
Mobile Phone No	(Phone) +65-93364868
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Hr-v
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	1496

### INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01017254

### DRIVER

Name of Driver	LIM CHOON HUAT
NRIC No	SXXXX708F
Date Of Birth	07/03/1977
Occupation	Indoor

Date Of Driving Pass	21/06/2017
Driving experience	5 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93364868
Alt. Phone Number	-
Email Address	andrewsg777@gmail.com
Address	BLK 613B TAMPINES NORTH DRIVE 1 #08-220
Address complement	-
Postcode	522613
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	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?	Yes
Police Station Name	Queenstown Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004719999
Alt. Police Station Phone No	(Fax) +65-64715299
Police Station Address	No. 3 Queensway #01-03 Singapore 149073
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230525/2082

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNG3698P
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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 CHOON HUAT
Gender	Male
Phone No	(Phone) +65-93364868
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLG113D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## SKETCH PLAN

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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.

Policyholder's Signature / Date & Time

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

  
26/05/2023  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan

A: SLG113D	B	C	VEHICLE - C LEFT THE SCENE BEFORE I COULD EXCHANGE PARTICULARS
B: 3698P			
C: UNKNOWN VEHICLE			

Describe Circumstance of the Accident

REFER TO POLICE REPORT. 7/20230525/2082

Was there any video captured by Car Camera? ☒ Yes / ☐ No

Has the driver been approached by unknown person(s)? ☐ Yes / ☒ No

Number of Passengers (Including Driver)? 01

Name Gender:

Name Gender:

Name Gender:

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

  
26/05/2023  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)



**SINGAPORE  
POLICE FORCE**



T/20230525/2082

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

1 of 3

Report No. T/20230525/2082

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 25/05/2023 16:34		Vide Report No.:		Station Diary No.: 37	
<b>Informant's Particulars</b>					
Name of Informant: LIM CHOON HUAT			Address: APT BLK 613B TAMPINES NORTH DRIVE 1 #08-220 SINGAPORE 522613		
ID Type / ID No.: NRIC NO / S7706708F			Contact No.: Home/Office: Mobile: 93364868		
Nationality: SINGAPORE CITIZEN			Email: ANDREWSG777@GMAIL.COM		
Sex: Male	Age: 46	Date of Birth: 07/03/1977	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Food and beverage operations manager			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>					
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/05/2023 18:15	Type of Location: Flyover	
Location:  PAN-ISLAND EXPRESSWAY					
Weather: Clear		Road Surface: Dry			
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG113D	Car	HONDA	HRV 1.5 DX CVT	Silver	Seriously Damaged	0
SNG3698P	Car				Slightly Damaged	0

<b>Details of Vehicle Insurance</b>					
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date	
SLG113D	TENET SOMPO INSURANCE PTE. LTD.	D22MTPV0101725 4	17/10/2022	16/10/2023	



**SINGAPORE  
POLICE FORCE**



T/20230525/2082

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

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Report No. T/20230525/2082

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	LIM CHOON HUAT	ID No.	S7706708F
Related Vehicle	SLG113D (Car)	Contact No.	93364868
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	25/05/2023	Date Discharge	25/05/2023
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

On 24/05/2023 @1815hrs, I was driving my vehicle bearing plate SLG 113D on the first lane of PIE towards Ubi Area. The nearest exit I can recall is Exit 16 towards Lor 6 Toa Payoh on the opposite side of the road. Whilst driving, I was rear ended on my left rear by car bearing plate SNG3698P. This resulted in my car to hit the car in front with unknown plate number. I sustained damages to my rear and front parts of my car. Traffic Police attended to the accident, and nobody was conveyed by ambulance. I was not given any case card by Traffic Police Officer on duty. On 25/05/2023, I visited the doctor at Mt Alvernia Hospital as I felt pain in my body, and I was given 5 days MC. I have an incar camera in my vehicle.



**SINGAPORE  
POLICE FORCE**



T/20230525/2082

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

3 of 3

Report No. T/20230525/2082

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:

D /

INSP (1) MUHAMMAD AFIQ BIN  
ATAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI TAN JEOK LENG LESLIE

Contact No.: 65476151

Signature Of Informant:

Date/Time:

25/05/2023 16:34

Classification Of Case:

NP168



*Serve all with Love*

## Mount Alvernia Hospital Medical Certificate

24-Hour Walk-in Clinic and  
Emergency Department  
No. M230000117936

This is to certify that LIM CHOON HUAT, S7706708F, is granted Outpatient Sick Leave for 5 day(s) from 25-May-2023 to 29-May-2023.

Remark :

This medical certificate is not valid for absence from Court or judicial proceeding unless specifically stated.

Dr. Muhammad Azmi Hezan Bin, Abdul  
Latiff  
MCR : 60924B

A & E / 24-HOUR WALK-IN CLINIC  
Mount Alvernia Hospital  
820 Thomson Road  
Singapore 574623  
Tel: 63476210

25/05/2023

Date

Send/Fax to: \_\_\_\_\_

Submitted: \_\_\_\_\_

## SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION	
Date of Accident:	24/05/23
Time of Accident:	1815
Exact Location:	ALONG PIE TO CHANGI
DETAILS OF OWN VEHICLE	
Vehicle Registration No.	SLG 113D
NRIC / FIN / Passport no:	S7706708F
Name of Registered Owner:	MR LIM CHUAN HUAT
Owner's Email:	
Owner's Address:	PAK 613B TAMPINES NORTH DR / #08-220
Vehicle Make:	HONDA
Vehicle Model:	HRV (522613)
Engine Capacity (cc):	1500
Transmission:	Auto Manual
Type of Claim:	Own Damage / (Third Party) Reporting Only
Vehicle Category:	Private / Commercial / Motorcycle / Private Hire
Name of Insurance Co:	TENET Somp0
Type of Policy:	Comprehensive / Third Party / Third Party, Fire & Theft
Policy Number:	D22 MTPV0101725

DRIVER	
Name of Driver:	<input checked="" type="checkbox"/> same as
NRIC / FIN / Passport no:	
Date of Birth:	07/03/1977
Occupation:	Indoor / Outdoor
Driving Pass Date:	21/06/2017
Contact Number:	93364868
Gender:	Male / Female
Address:	
Relationship with Owner:	Owner / Employee / Spouse / Child / Hirer / Other:
Translator Name:	
Translator NRIC:	
Translator Contact no:	
Translator email:	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Collision:	Chain collision / Side Swipe / Front to Rear / Others:
Weather Condition:	Clear / Raining / Others:
Road Surface:	Dry / Wet
Video available:	Yes / No
Was anybody injured?	Yes / No
Police Report Made?	Yes / No
No. of passenger onboard (including driver):	01
QUEENSTOWN NPC	

DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	SLG 3698 P		
Vehicle Make / Model:			
Name of Driver:			
NRIC / FIN / Passport no:			
Contact Number:			
Name of Insurance Co:			

DETAILS OF WITNESS	
Name:	Contact Info:

DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / In which vehicle?:			

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.

Signature of Driver \_\_\_\_\_

Date and time \_\_\_\_\_

**Certificate of Insurance****ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)**

Certificate/Policy No. : D22MTPV01017254  
Insured : LIM CHOON HUAT  
Motor Vehicle (Registration No.): SLG113D  
Coverage : Comprehensive - ExcelDrive GOLD  
Policy Commencement Date : 17 OCTOBER 2022 00:00  
Policy Expiry Date : 16 OCTOBER 2023 23:59  
Maximum Liability (Section I) : Market value at time of loss  
Excess\* : \$500 - Section I  
Voluntary Excess\* : N.A  
Windscreen Excess\* : S\$100.00 for each and every applicable claim.

\* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive\*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
  - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
  - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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 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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

**Limitations As To Use**

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

**ExcelDrive Workshops and Accident Reporting**

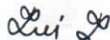
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: ~~(65) 6926 9999~~  
(65) 8498 1618

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.30

**Sompo Insurance Singapore Pte. Ltd.**



**Authorised Signatory**

Date/Time of Issue : 11 OCTOBER 2022 12:16

**IMPORTANT NOTICE**

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11M16010 & META AGENCY PTE. LTD. CI Code: 22A DJDPZO2KKTMTJKA0