

# 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 .....	29/05/2023 15:10 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	27/05/2023 11:15 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	KPE TOWARDS ECP AFTER TAMPINES ROAD EXIT
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLS6395D
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LEE WEE THIAM ( LI WEITIAN )
NRIC No .....	SXXXX198J
Email Address .....	skyliweitian@yahoo.com.sg
Mobile Phone No .....	(Phone) +65-85685848
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Lexus
Model .....	Es250
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 .....	2494

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	2070118190-02

### DRIVER

Name of Driver .....	LEE WEE THIAM ( LI WEITIAN )
NRIC No .....	SXXXX198J
Date Of Birth .....	24/08/1978
Occupation .....	Indoor

Date Of Driving Pass .....	27/01/1999
Driving experience .....	24 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-85685848
Alt. Phone Number .....	-
Email Address .....	skyliweitian@yahoo.com.sg
Address .....	BLK 24 SUMANG WALK
Address complement .....	# 15-05
Postcode .....	828678
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 .....	4
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 .....	HUANG SHAO RONG
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230527/7038

#### 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 .....	SLX340A
Vehicle Manufacturer .....	Renault
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	Brown
Vehicle Category .....	Private car
Name of Driver .....	THIRUGNANASAMBANDAM KUMANAN
NRIC No .....	SXXXX967F
Contact Number .....	(Phone) +65-98442524
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 .....	SNJ4972A
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Sienta
Vehicle Variant .....	-
Vehicle Colour .....	White
Vehicle Category .....	Private car
Name of Driver .....	LEW CHEE LEONG
NRIC No .....	SXXXX978Z
Contact Number .....	(Phone) +65-91442333
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 3

Vehicle Registration Number .....	SLF5955M
Vehicle Manufacturer .....	Mazda
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	Brown
Vehicle Category .....	Private car
Name of Driver .....	MR.KWEK
NRIC No .....	SXXXX553G
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN**

**IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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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 \_\_\_\_\_  
 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) \_\_\_\_\_

Sketch Plan: KPE towards ECP after Tampines Road Exit  
KPE → ECP

(A) SL56395D  
 (B) SLX340A  
 (C) SNJ4972A  
 (D) SLF5955m.

Describe Circumstance of the Accident

Please refer to police report:

T/20230527/7038

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

 29/05/2023  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20230527/7038

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Report No. T/20230527/7038

**CONTINUATION OF REPORT**

<b>Passenger</b>			
Name	HUANG SHAORONG		ID No. S8180063D
Related Vehicle	SLS6395D (Car)		Contact No. 98566409
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 2B,2A,3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
<b>Driver</b>			
Name	THIRUGNANASAMBANDAM KUMANAN		ID No. S7982967F
Related Vehicle	SLX340A (Car)		Contact No. 98442524
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
<b>Driver</b>			
Name	LEW CHEE LEONG		ID No. S7419978Z
Related Vehicle	SNJ4972A (Car)		Contact No. 91442333
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On 27may2023 at 11 15 am I was driving straight on lane 1 along kpe towards ecp after tampines road.

Infront vehicle slow down and stop I also slow down and stop.suddenly I heard a loud bang from behind. I came down and take a look and realised it was SLX340A that had hit on my rear causing damages.it was a Chain collusion on total 4 vehicle.

I got one passenger in my car which is my wife.

















# SINGAPORE POLICE FORCE



T/20230527/7038

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230527/7038

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/05/2023 14:05		Vide Report No.: G/20230527/0101		Station Diary No.:
<b>Informant's Particulars</b>				
Name of Informant: LEE WEE THIAM		Address: 24 SUMANG WALK #15-05 SINGAPORE 828678		
ID Type / ID No.: NRIC NO / S7825198J		Contact No.: Home/Office: Mobile: 85685848		
Nationality: SINGAPORE CITIZEN		Email: skylweitian@yahoo.com.sg		
Sex: Male	Age: 44	Date of Birth: 24/08/1978	Type of Informant: Driver	
Race: Chinese		Language: English		
Occupation: Ceo		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/05/2023 11:15	Type of Location: Straight Road
Location:  KPE TOWARDS ECP AFTER TAMPINES ROAD EXIT				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No. of
SLF5955M	Car	MAZDA		Brown		2
SLS6395D	Car	TOYOTA	LEXUS ES250 LUXURY A/T S/R	Grey	Slightly Damaged	1
SLX340A	Car	RENAULT		Brown	Seriously Damaged	3



**SINGAPORE  
POLICE FORCE**



T/20230527/7038

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Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230527/7038

**CONTINUATION OF REPORT**

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of
SNJ4972A	Car	TOYOTA	Sienta	White	Seriously Damaged	2

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLS6395D	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070118190-02	29/09/2022	28/09/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MR KWEK	ID No.	S8419553G
Related Vehicle	SLF5955M (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight
Driver			
Name	LEE WEE THIAM	ID No.	S7825198J
Related Vehicle	SLS6395D (Car)	Contact No.	85685848
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,3 Date of Expiry: NIL
Date	NIL	Date	NIL
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10 Ubi Avenue 3 SINGAPORE 408865  
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T/20230527/7038

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Report No. T/20230527/7038

**CONTINUATION OF REPORT**

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
MUHAMMAD KHAIRI SUFRIE BIN SUHAIMI  
Contact No.: 96207105

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
27/05/2023 14:05

Classification Of Case:

NP168