

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	16/06/2023 16:45 (SGT)
Reported by	Actual Driver
Date of Accident	16/06/2023 12:00 (SGT)
Exact Location of Accident	Seletar Expw., Singapore
Additional Location Information	TOWARDS BKE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM7599D
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	RISHENG LOGISTIC
Company Reg No	5XXXX189M
Email Address	wendaoyi@hotmail.com
Mobile Phone No	(Phone) +65-91179849
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fe84be6srdea
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2977

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMCG23001490

DRIVER

Name of Driver	WEN YI
NRIC No	SXXXX987E
Date Of Birth	17/01/1974
Occupation	Outdoor

Date Of Driving Pass	12/09/1998
Driving experience	24 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91179849
Alt. Phone Number	-
Email Address	wendaoyi@hotmail.com
Address	BLK 26B ST.GEORGE'S LANE #16-33
Address complement	-
Postcode	322026
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	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 POLICE REPORT T/20230616/7033

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	GBJ9759J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	UNKNOWN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SERIOUS INJURY
Injured person in which vehicle?	GBJ9759J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

Describe Circumstance of the Accident

— REF: TO POLICE REPORT — T/20230616/7033

Declaration:
We declare the foregoing particulars are true in every respect.

Police Officer's Signature (Date & Time)

Driver's Signature (If Available and the circumstances, Date & Time)

Witness's Signature (If Available and the circumstances, Date & Time)

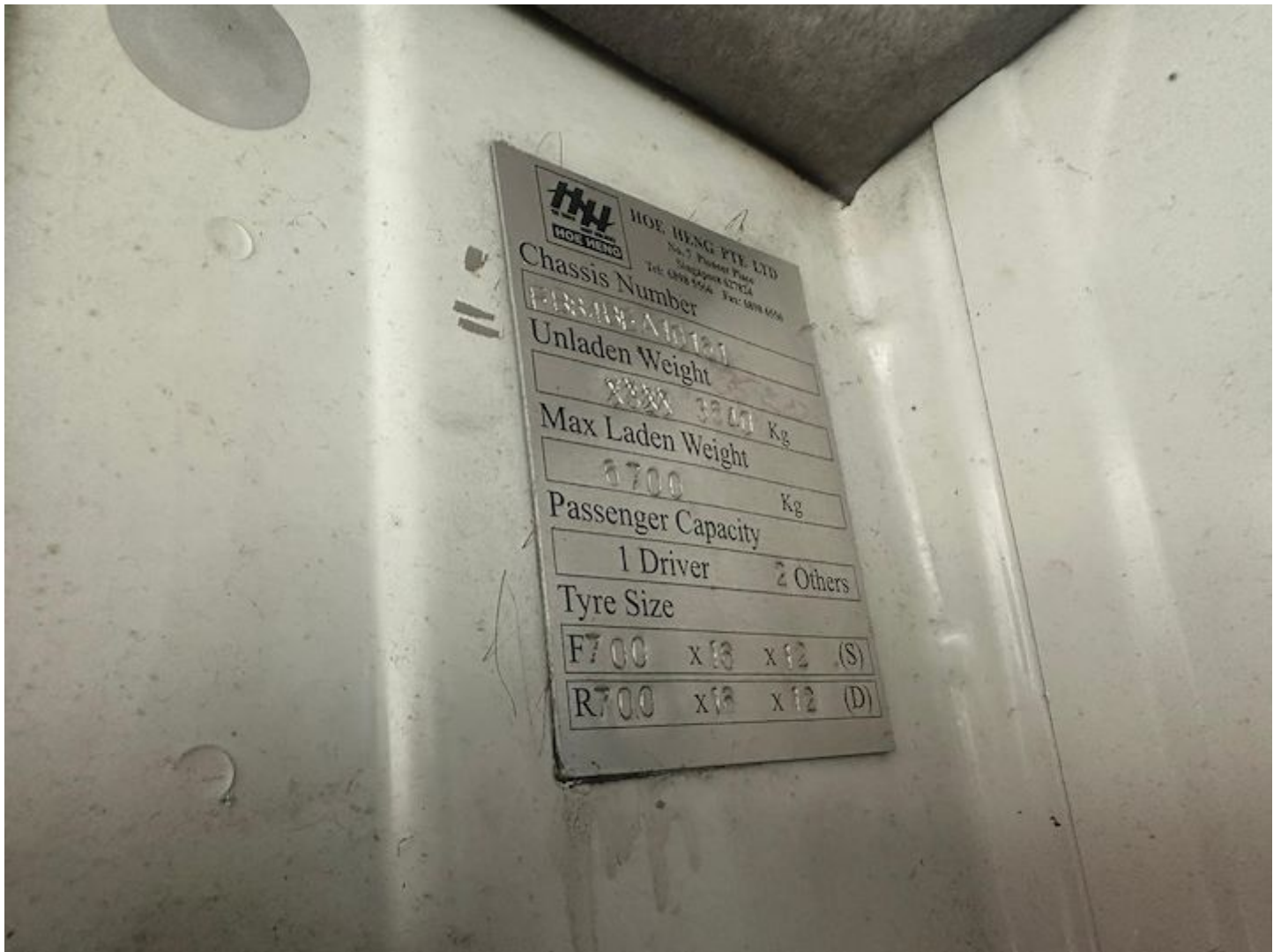
16/06/2023

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**SINGAPORE
POLICE FORCE**



T/20230616/7033

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

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Report No. T/20230616/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/06/2023 15:17	Video Report No.: L/20230616/0052	Station Diary No.:
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Informant's Particulars

Name of Informant: WEN YI			Address: 26B ST. GEORGE'S LANE #16-33 SINGAPORE 322026		
ID Type / ID No.: NRIC NO / S7488987E			Contact No.: Home/Office: Mobile: 91179849		
Nationality: CHINESE			Email: wendaoyi@hotmail.com		
Sex: Male	Age: 49	Date of Birth: 17/01/1974	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		
Occupation: Lorry driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance:	Drink Drive: No	Date/Time of Accident: 16/06/2023 12:00	Type of Location: Straight Road
Location: SLE (BKE) 6KM				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
GBJ9759J	Lorry				Seriously Damaged	0
YM7599D	Lorry				Slightly Damaged	0



**SINGAPORE
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T/20230616/7033

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

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Report No: T/20230616/7033

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	UNKNOWN	ID No.	NIL
Related Vehicle	GBJ9759J (Lorry)	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
Vehicle Owner			
Name	WEN YI	ID No.	S7488987E
Related Vehicle	YM7599D (Lorry)	Contact No.	91179849
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	NIL

Brief Details.

I was travelling along SLE towards BKE.
The vehicle in front of mine came to a stop. I followed to slow down and stop.
A few seconds later, I felt an impact. I alighted and found my vehicle being rear ended.
The vehicle behind mine was badly damaged and the driver was conveyed to the hospital.
I was informed by the police officer to lodge a police report.



SINGAPORE
POLICE FORCE



T/20230616/7033

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

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Report No: T/20230616/7033

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
PHUA TIAK YEE
Contact No: 65476200

Signature Of Informant:

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

Date/Time:
16/06/2023 15:17

Classification Of Case:

NP168