

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	20/06/2023 17:50 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	20/06/2023 14:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE IN THE DIRECTION OF CHANGI, 100M BEFORE EXIT TO SIMS AVENUE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR5540A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG CHOON YONG
NRIC No	SXXXXX250D
Email Address	CYNG3@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-96900827
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A3
Variant	SEDAN 1.4 TFSI
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1395

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100402824-08

DRIVER

Name of Driver	NG CHOON YONG
NRIC No	SXXXXX250D
Date Of Birth	03/11/1967

Occupation	Indoor
Date Of Driving Pass	07/10/1988
Driving experience	34 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96900827
Alt. Phone Number	-
Email Address	CYNG3@SINGNET.COM.SG
Address	15 TONG WATT ROAD
Address complement	#13-12, WHARF RESIDENCE
Postcode	238026
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?	Yes
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)	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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JVY6661
Vehicle Category	Commercial vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

DRIVING ALONG THE EXPRESSWAY. HIT FROM THE RIGHT REAR END BY A LONG VEHICLE. DRAGGED FOR A FEW SECONDS, CAUSING THE CAR TO SPIN 180 DEGREES ACROSS ALL LANES OF THE EXPRESSWAY.

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	JVY6661
Vehicle Manufacturer	Volvo
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Commercial vehicle
Name of Driver	HISHQMUDDIN BIN ARIFFIN
Contact Number	(Phone) +60-1111753233
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

WITNESS DETAILS

WITNESS 1

Name	AHMAD SUHAIMI BIN MD
Phone	-
Email	-

SKETCH PLANIMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
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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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

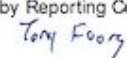
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 20/6/23
Policyholder's Signature / Date & Time

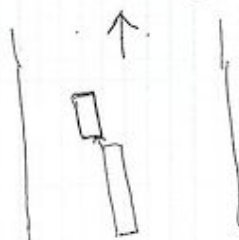
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel 

Sketch Plan

ONEWAY (P12)



Describe Circumstances of the Accident

Driving along expressway. Hit from the right rear end by long vehicle. Dragged for few seconds, causing car to spin 180° across all four lanes of the expressway.

Declaration

We declare the foregoing particulars are true in every respect.

 20/6/23
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel



























































**SINGAPORE
POLICE FORCE**



T/20230620/2067

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

1 of 3

Report No. T/20230620/2067

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/06/2023 15:46	Vide Report No.:	Station Diary No.: 84
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Informant's Particulars

Name of Informant: NG CHOON YONG	Address: 15 TONG WATT ROAD #13-12 SINGAPORE 238026		
ID Type / ID No.: NRIC NO / S1805250D	Contact No.: Home/Office: Mobile: 96900827		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 55	Date of Birth: 03/11/1967	Type of Informant: Driver
Race: Chinese	Language:		
Occupation: DOCTOR	Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 20/06/2023 14:15	Type of Location:
Location: PAN-ISLAND EXPRESSWAY				
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: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JVY6661 (Not Accurate)	Lorry	VOLVO		Blue	Slightly Damaged	0
SKR5540A	Car	AUDI	A3 SEDAN 1.4 TFSI AMBIENTE MY 15	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20230620/2067

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

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Report No. T/20230620/2067

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR5540A	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100402824-08	13/02/2023	12/02/2024

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	HISHAMUDDIN BIN ARIFFIN		ID No.	930328065571
Related Vehicle	JVY6661 (Lorry)		Contact No.	+60 1111 753233
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL
Driver				
Name	NG CHOON YONG		ID No.	S1805250D
Related Vehicle	SKR5540A (Car)		Contact No.	96900827
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On the 20 June 2023, at around 1415 hrs, while I was driving along PIE towards the exit of Sims avenue, a long vehicle malaysian lorry, JVY6661 hit into the right rear of my vehicle, SKR5540A and it caused my vehicle to spin 180 degrees across all 4 lanes of the expressway.

No one was injured and no Traffic Police attended to the incident.
I exchanged particulars with the driver of JVY6661 and I have particulars of a witness driver who was behind the lorry however no contact was exchanged.
I do not have an in-vehicle camera.

My right rear bumper and right rear door has been damaged.
I am lodging this report for record purposes and insurance claims.



**SINGAPORE
POLICE FORCE**



T/20230620/2067

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

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Report No. T/20230620/2067

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SGT 2 LEE ZI EN, JOHANNA

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SSI TAY CHUN KEEN
Contact No.: 65476436

Signature Of Informant:

Date/Time:
20/06/2023 15:46

Classification Of Case:

NP168