

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	22/06/2023 17:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/06/2023 17:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS ROAD TURNING INTO TURF CLUB
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR7767L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH SHIANG TECK
NRIC No	SXXXX122H
Email Address	kelvingohst@gmail.com
Mobile Phone No	(Phone) +65-96622028
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	1591

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VP05031656

DRIVER

Name of Driver	GOH SHIANG TECK
NRIC No	SXXXX122H
Date Of Birth	05/06/1967
Occupation	Indoor

Date Of Driving Pass	20/07/1988
Driving experience	34 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96622028
Alt. Phone Number	-
Email Address	kelvingohst@gmail.com
Address	3 ST.MICHAEL'S ROAD
Address complement	# 20-04
Postcode	328007
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	NBX1568
Vehicle Category	Private car

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230622/2052

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No



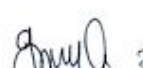
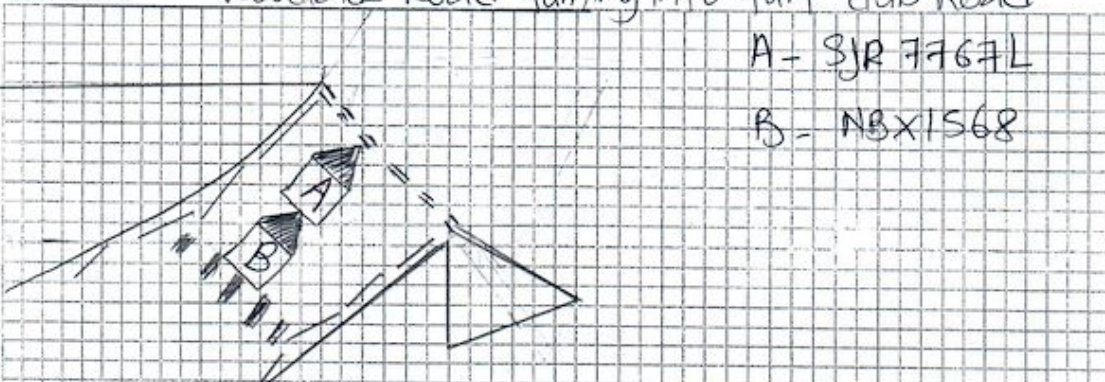
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	NBX1568
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LAW SIONG YAO
Passport No/FIN	AXXXX0724
Contact Number	(Phone) +60-127397919
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
6. The 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.
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.

 22/6/2023 Policyholder's Signature / Date & Time	 22/6/2023 Driver's Signature (if driver is not the policyholder) / Date & Time	 22/06/2023 Witnessed by Reporting Centre Personnel
Sketch Plan: woodlands Road turning into turf club Road A - SJR 7767L B - NBX1568		
		

Describe Circumstance of the Accident

Please Refer to the attached
police Report
- 7120230622/2052

Declaration

We declare the foregoing particulars are true in every respect.

[Signature] 22/6/2023

Policyholder's Signature / Date & Time

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

[Signature] 22/06/2023

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



**SINGAPORE
POLICE FORCE**



T/20230622/2052

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

2 of 3

Report No. T/20230622/2052

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LAW SIONG YAO	ID No.	A54780724
Related Vehicle	NBX1568 (Car)	Contact No.	+60 12-7397919
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	GOH SHIANG TECK	ID No.	S1791122H
Related Vehicle	SJR7767L (Car)	Contact No.	96622028
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 21/06/2023 at about 1715hrs, I was driving my vehicle bearing the plate number (SJR7767L) along woodlands road. I was at the junction with the intention of filtering to the left to the main road.

As there was a vehicle on coming at the main road, I stopped my vehicle to give way. Subsequently, I felt an impact from the rear and noticed that a foreign vehicle bearing the plate number (NBX1568) had hit my rear. I then stepped out of my vehicle and exchanged particulars with the driver.

No one injured. No traffic police or ambulance came. I wish to state that I do not have any in-car dash camera.







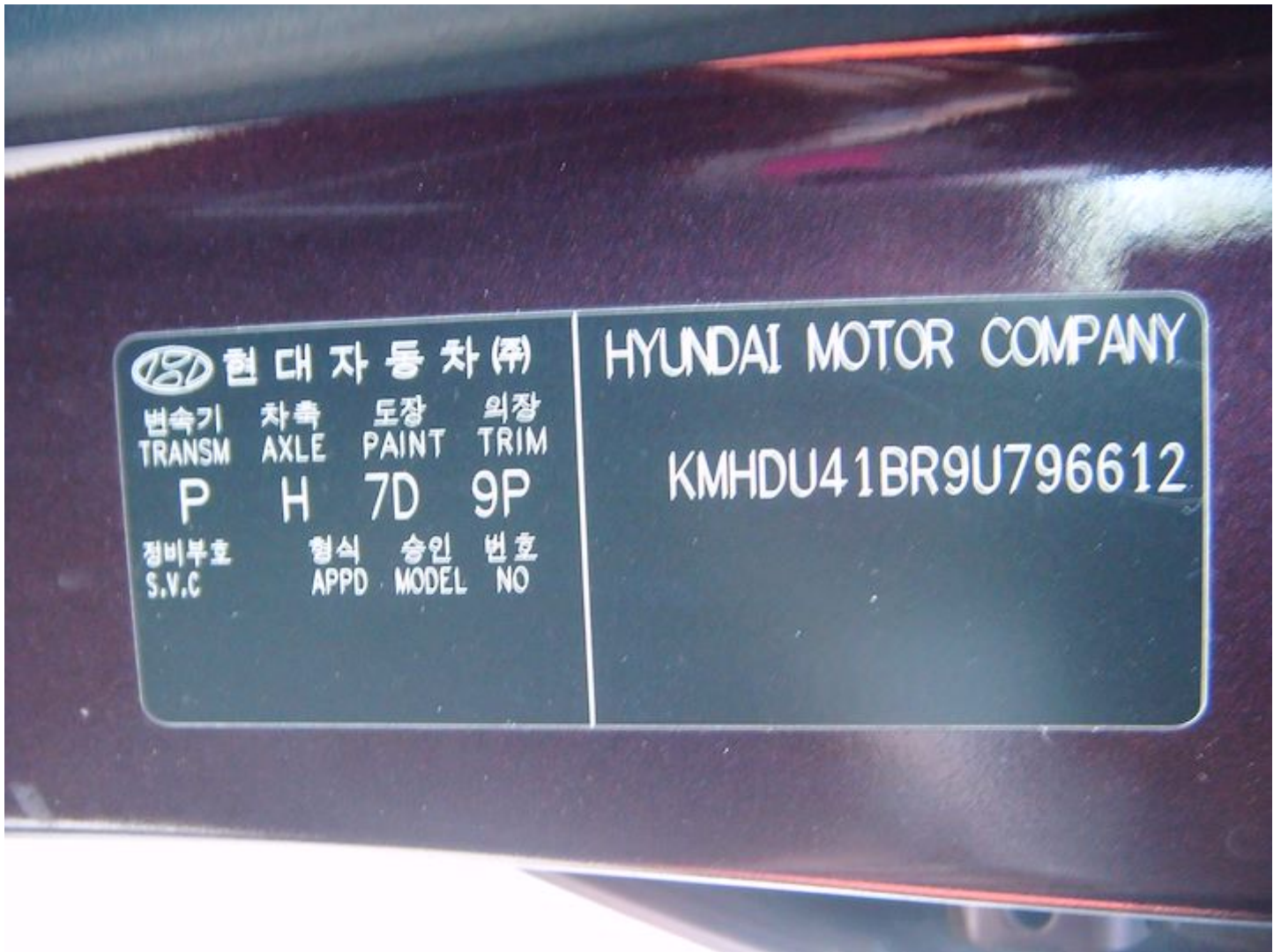














**SINGAPORE
POLICE FORCE**



T/20230622/2052

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Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

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Report No. T/20230622/2052

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/06/2023 14:17	Vide Report No.:	Station Diary No.: 66
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Informant's Particulars

Name of Informant: GOH SHIANG TECK			Address: 3 ST. MICHAEL'S ROAD #20-04 SINGAPORE 328007		
ID Type / ID No.: NRIC NO / S1791122H			Contact No.: Home/Office: Mobile: 96622028		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 56	Date of Birth: 05/06/1967	Type of Informant: Driver		
Race: Chinese			Language:		
Occupation: SALES EXECUTIVE			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 21/06/2023 17:15	Type of Location: X-Junction
Location: WOODLANDS ROAD				
Weather: Clear	Road Surface: Dry			
Traffic Flow: One Way	Traffic Control: Pedestrian Crossing		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
NBX1568	Car					0
SJR7767L	Car	HYUNDAI	HD AVANTE 1.6 A	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJR7767L	LONPAC INSURANCE BHD.	Z22VP05031656	14/07/2022	13/07/2023



**SINGAPORE
POLICE FORCE**



T/20230622/2052

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

2 of 3

Report No. T/20230622/2052

CONTINUATION OF REPORT

Details of Person Involved			
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Related Vehicle	NBX1568 (Car)	Contact No.	+60 12-7397919
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	GOH SHIANG TECK	ID No.	S1791122H
Related Vehicle	SJR7767L (Car)	Contact No.	96622028
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
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**SINGAPORE
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T/20230622/2052

3 of 3

Police Station Of Origin:
Bedok N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20230622/2052

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SGT 1 MUHAMMAD FAZLI
IDHAM BIN MOHD YAZID

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
→ SI ANG YI TING, STEPHANIE
Contact No.: 65476414

Signature Of Informant:

Date/Time:
22/06/2023 14:17

Classification Of Case:

NP168