

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	27/06/2023 19:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/06/2023 08:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLE (TOWARDS WOODLANDS) NEAR MANDAI DEPOT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGK380L

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YEO HAI WEE EDWARD
NRIC No	SXXXX417I
Email Address	EDWARD76YEO@GMAIL.COM
Mobile Phone No	(Phone) +65-81812210
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	C4
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	1600

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/00905071/02

DRIVER

Name of Driver	YEO HAI WEE EDWARD
NRIC No	SXXXX417I
Date Of Birth	04/10/1976
Occupation	Indoor

Date Of Driving Pass	21/06/1999
Driving experience	24 YEARS
Gender	Male
Mobile Number	(Phone) +65-81812210
Alt. Phone Number	-
Email Address	EDWARD76YEO@GMAIL.COM
Address	224 BISHAN STREET 23 #25-127
Address complement	-
Postcode	570224
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	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
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	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

REFER TO THE SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMU2968E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHIA KOK HENG
NRIC No	SXXXX592J
Contact Number	(Phone) +65-97616708
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	SLH7484G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	WONG CHIEW HUAT
NRIC No	SXXXX933F
Contact Number	(Phone) +65-96301828
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	GBC4141K
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SMN3640E
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

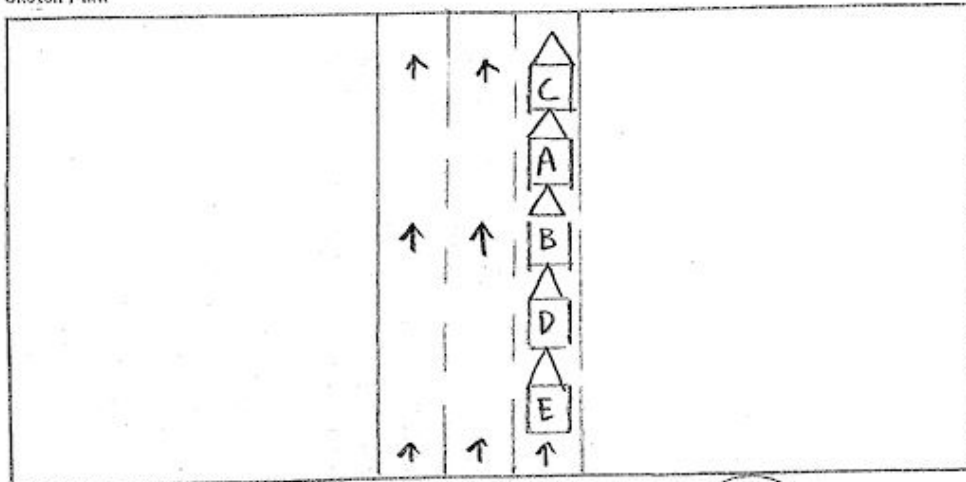
Name of injured person	YEO HAI WEE EDWARD
Gender	Male
Phone No	(Phone) +65-81812210
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	PAIN IN LEFT LEG AND LEFT SIDE OF THE NECK
Injured person in which vehicle?	SGK380L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report accurately the details of the accident to speed up the claims process.
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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 be 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/postal 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 be 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 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.

Sketch Plan



[Signature] 27/6/23
Policyholder's Signature / Date & Time

[Signature] 27/6/23
Driver's Signature (if driver is not the policyholder) / Date & Time

[Signature] 27/6/2023
Witnessed by Reporting Centre Personnel

ALLIAN MOTOR COMPANY

Date of accident: 27/6/23 Time: 0825 Location: SLE (Towards Woodlands)
 My Vehicle A: SGK380L Vehicle B: SMU2968E Vehicle C: SLH7484G
 Vehicle D: GBC4141K Vehicle E: SMN3640E

SKETCH PLAN

Describe Circumstances of the Accident.

On 27 June 2023, at 0825am, I was travelling along SLE towards Woodlands. Near the 9km mark (beside Mandai Depot), the traffic was slowing down along lane 1.

Veh C in front of me came to complete stop due to road conditions in front. I also came to a complete stop behind Veh C.

Shortly after, Veh B hit me from the rear. As it was too sudden, my car moved forward and hit Veh C.

Upon surveying the accident site, there were a total of 5 vehicles involved.


From the video footages, Veh D hit Veh B and caused a chain collision involving me (Veh A) and Veh C.

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

We declare the foregoing particulars are true in every respect.

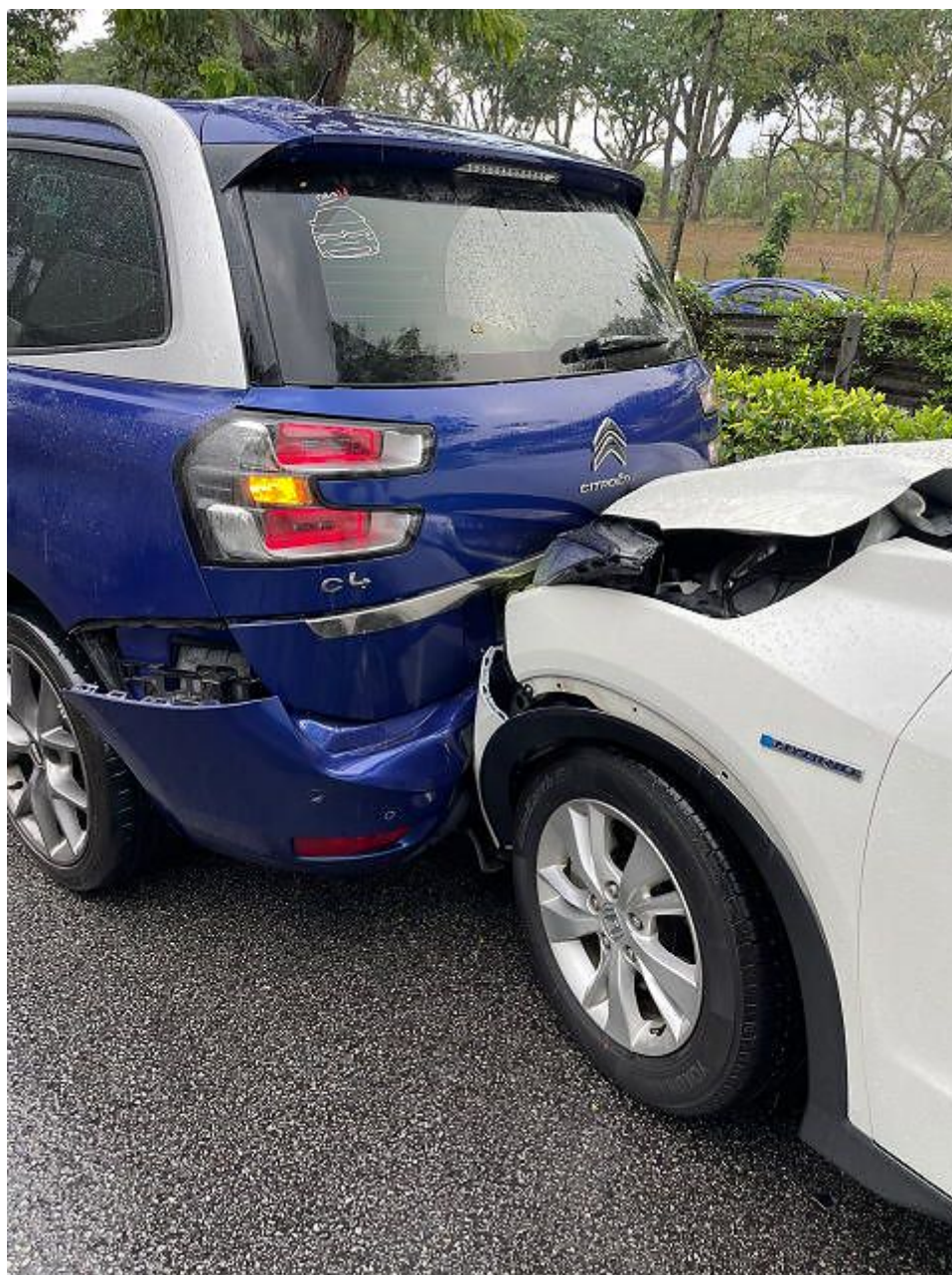
 27/6/23
 Policyholder's Signature / Date & Time

 27/6/23
 Driver's Signature (if driver is not the policyholder) / Date & Time

 27/06/2023
 Witnessed by Reporting Centre Personnel

ahlimmotor.com.sg





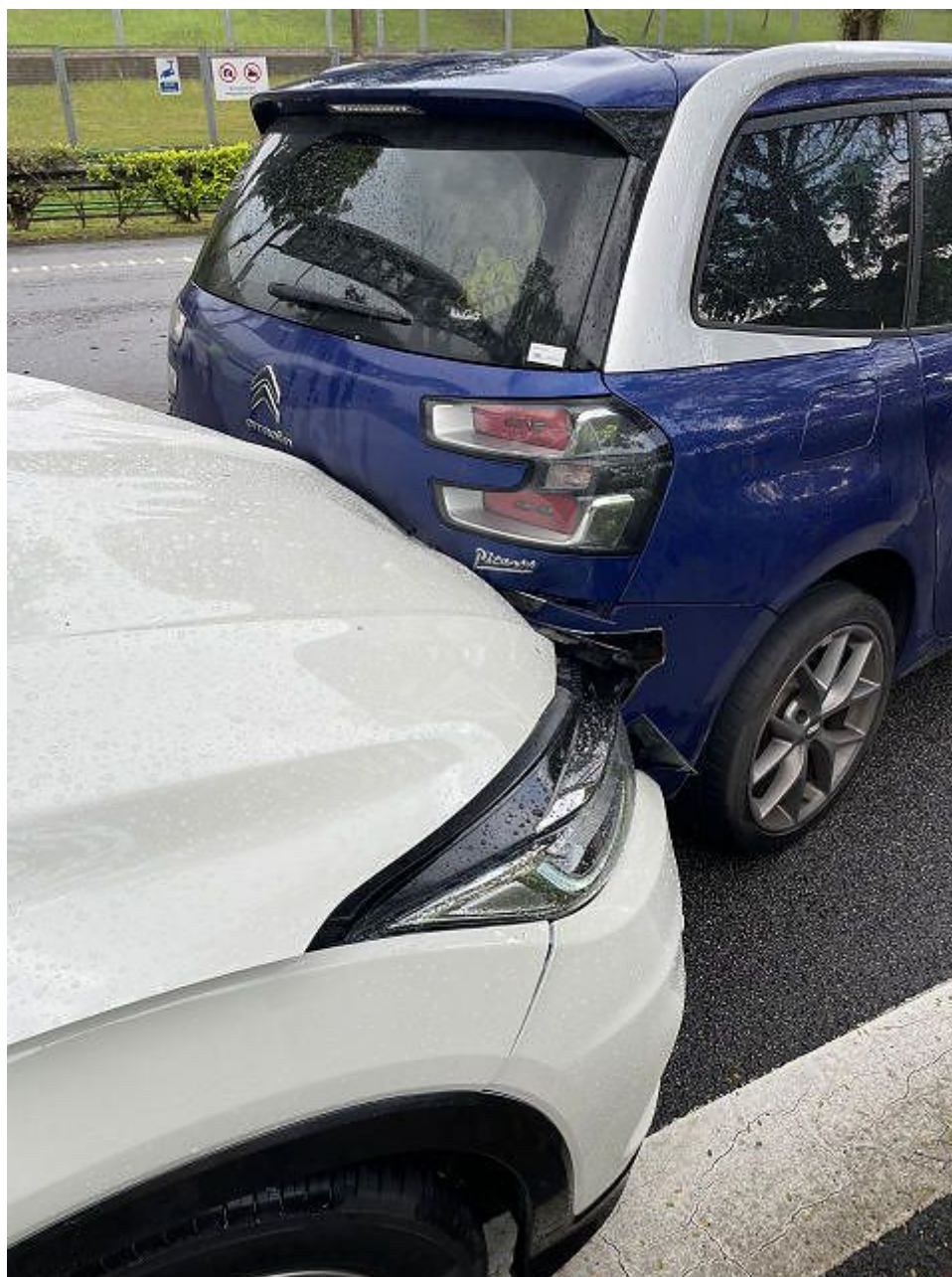












































































**SINGAPORE
POLICE FORCE**



T/20230627/7055

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

1 of 4

Report No. T/20230627/7055

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/06/2023 16:59		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: YEO HAI WEE EDWARD			Address: 224 BISHAN STREET 23 #25-127 SINGAPORE 570224		
ID Type / ID No.: NRIC NO / S76314171			Contact No.: Home/Office: Mobile: 81812210		
Nationality: SINGAPORE CITIZEN			Email: edward76yeo@gmail.com		
Sex: Male	Age: 46	Date of Birth: 04/10/1976	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Polytechnic lecturer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/06/2023 08:25	Type of Location: Straight Road
Location: SLE				
Weather: Raining		Road Surface: Wet		
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	Conditio	No of
GBC4141K	Car					0
SGK380L	Car	CITROEN	GRAND C4 PICASSO 1.6 BLUEHDI EAT6 S/R	Blue		0
SLH7484G	Car					0



**SINGAPORE
POLICE FORCE**



T/20230627/7055

2 of 4

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

Report No. T/20230627/7055

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMN3640E	Car					0
SMU2968E	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGK380L	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00905071/02	25/04/2021	24/04/2024

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	YEO HAI WEE EDWARD		ID No.	S7631417I
Related Vehicle	SGK380L (Car)		Contact No.	81812210
Hospital/Clinic	RAFFLES MEDICAL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	03	Degree of	Slight	
Driver				
Name	WONG CHIEW HUAT		ID No.	S2593933F
Related Vehicle	SLH7484G (Car)		Contact No.	96301828
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	



**SINGAPORE
POLICE FORCE**



T/20230627/7055

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

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Report No. T/20230627/7055

CONTINUATION OF REPORT

Driver			
Name	CHIA KOK HENG	ID No.	S7605592J
Related Vehicle	SMU2968E (Car)	Contact No.	97616708
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.

On 27th June 2023 at about 0825am. I was travelling along SLE towards Woodlands, near the 9KM mark(beside Mandai Depot), the traffic was slowing down along lane 1. Vehicle C(SLH7484G) that Infront of me came to a complete stop due to road conditions Infront. I also came to a complete stop behind vehicle C. Shortly after, Vehicle B(SMU2968E) hit me from the rear. As it was too sudden, the impact pushed my vehicle forward and hit vehicle C. Upon surveying the accident site, there were a total of 5 vehicles involved. From the video footages, Vehicle D(GBC4141K) hit Vehicle B and caused a chain collision including me (Vehicle A) and Vehicle C. After the collision I felt pain on my left leg and left side of my neck, I have consult a doctor at Raffles medical and was given 3 days MC.

Vehicle A - SGK380L
Vehicle B - SMU2968E
Vehicle C - SLH7484G
Vehicle D - GBC4141K
Vehicle E - SMN3640E



**SINGAPORE
POLICE FORCE**



T/20230627/7055

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

4 of 4

Report No. T/20230627/7055

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
LEE GUANG HUI
Contact No.: 65476204

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

Date/Time:
27/06/2023 16:59

Classification Of Case:

NP163



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SA1B236R0004 Vehicle Registration No: SGK380L
 Name (as shown in NRIC): YEO HAI WEE EDWARD NRIC/FIN/Passport No: S7631417I
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: 224 BISHAN STREET 23 #25-127 Singapore (570224)
 Contact (Tel): _____ Mobile No.: _____
 Email Address: EDWARD76YEO@GMAIL.COM
 Date of Accident: 27/06/2023 Time of Accident: 08:25 HRS
 Place of Accident: SLE (TOWARDS WOODLANDS) NEAR MANDAI DEPOT
 Insurance Company: DIRECT ASIA

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

To amend the vehicle B vehicle number from SMU2986E to SMU2968E.

OPERATOR

Policyholder / Driver's Signature
Date:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

28/06/2023



Contact us at
 Hotline: (65) 6665 5555
 E-mail: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00905071/02
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	: SGK380L
Chassis No.	: VF73ABHZTGJ879629
2) Name of Policy Holder	: YEO HAI WEE EDWARD
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 25/04/2023 00:00
4) Date/Time of Expiry of Insurance	: 24/04/2024 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any named person under the policy who is driving on the Policyholder's permission.	
(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 500.00
Windscreen Excess	: S\$ 100.00
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: YEO HAI WEE EDWARD
Named driver	: None
Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.	

I/We hereby certify that the Policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 10/03/2023

Direct Asia Insurance (Singapore) Pte. Ltd.


 Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd
 20 Anson Road #08-01 Twenty Anson Singapore 079912
 www.DirectAsia.com

Company Registration: 200822611C

M-CI-001