

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	11/07/2023 16:17 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/07/2023 18:05 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE CHANGI BEFORE KALLANG WAY EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR7927E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM EMAN
NRIC No	S8003660D
Email Address	emandaniel@gmail.com
Mobile Phone No	(Phone) +65-90670825
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	B180
Variant	SKR7927E
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	1595

INSURANCE COMPANY

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

DRIVER

Name of Driver	NURINA BINTE AB RASID
NRIC No	S8313982Z
Date Of Birth	10/05/1983
Occupation	Indoor

Date Of Driving Pass	11/10/2005
Driving experience	17 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91081750
Alt. Phone Number	-
Email Address	rina.rasid@gmail.com
Address	37 BEDOK SOUTH AVE 2 #06-461 SPORE 460037
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	LIM EMAN
Gender	Male

PASSENGER 2

Name	ELIAV EMAN LIM
Gender	Male

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 SKETCH PLAN/POLICE REPORT

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	SHA1695M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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 2

Vehicle Registration Number	YN6497R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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 3

Vehicle Registration Number	YJ9966E
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	LIM EMAN
Gender	-
Phone No	-
Address	-
Address Complement	-

Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKR7927E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	NURINA BINTE AB RASID
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKR7927E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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:

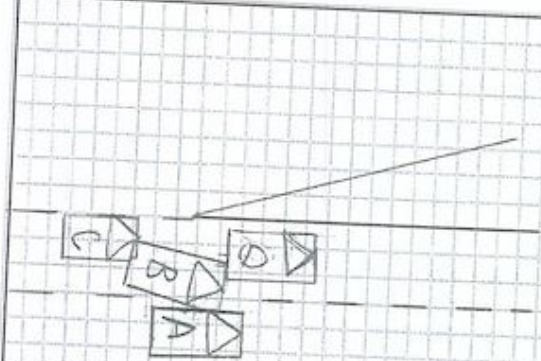
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (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



Vehicle

A - SKR 7927E

B - SHA 1695E

C - YJ9960E

D - YN6497R

Describe Circumstance of the Accident

REFER TO POLICE REPORT

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


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





















**SINGAPORE
POLICE FORCE**



T/20230710/7090

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

1 of 3
Report No. T/20230710/7090

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/07/2023 21:20		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LIM EMAN			Address: 37 BEDOK SOUTH AVENUE 2 #06-461 SINGAPORE 460037		
ID Type / ID No.: NRIC NO / S8003660D			Contact No.: Home/Office: Mobile: 90670825		
Nationality: SINGAPORE CITIZEN			Email: EMANDANIEL@GMAIL.COM		
Sex: Male	Age: 43	Date of Birth: 05/02/1980	Type of Informant: Passenger		
Race: Chinese			Language: English		
Occupation: Certis			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/07/2023 18:05	Type of Location: Straight Road
Location: KALLANG SECTOR				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHA1695M	Car				Seriously Damaged	0
SKR7927E	Car				Seriously Damaged	2



**SINGAPORE
POLICE FORCE**

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



T/20230710/7090

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Report No. T/20230710/7090

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
YJ9966E	Tow truck				Seriously Damaged	0
YN6497R	Lorry				Seriously Damaged	1

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	LIM EMAN	ID No.	S8003660D
Related Vehicle	SKR7927E (Car)	Contact No.	90670825
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	10/07/2023	Date	10/07/2023
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details.

On the stated date and time I was a passenger seating in the back left passenger seat of a car, bearing plate number SKR 7927 E along the stated location. Suddenly, I felt a large impact from the left side of my vehicle. I got down to check. I realised I was involved in a 4 car chain collision and A taxi's front right portion had collided into my vehicle's left portion. The vehicle bearing plate number YJ9966E had collided with a taxi bearing plate number SHA1695M causing it to be propelled forward and sideways into the back of stationary lorry bearing plate number YN6497R and into the side of my car.

The list of the vehicles are as follows

- 1) YN6497R
- 2) SHA1695M
- 3) SKR7927E
- 4) YJ9966E

My vehicle sustained severe damages to the left portion and my driver and I felt soreness and pain. I later proceeded to a GP clinic to seek treatment for my injuries. I was prescribed medication and 5 days of MC.



**SINGAPORE
POLICE FORCE**



T/20230710/7090

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

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Report No. T/20230710/7090

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

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

Signature Of Informant:

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

Date/Time:
10/07/2023 21:20

Classification Of Case:

NP168



**SINGAPORE
POLICE FORCE**



T/20230710/7091

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

1 of 4

Report No. T/20230710/7091

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/07/2023 21:21		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: NURINA BINTE AB RASID			Address: 37 BEDOK SOUTH AVENUE 2 #06-461 SINGAPORE 460037		
ID Type / ID No.: NRIC NO / S8313982Z			Contact No.: Home/Office: Mobile: 91081750		
Nationality: SINGAPORE CITIZEN			Email: RINA.RASID@GMAIL.COM		
Sex: Female	Age: 40	Date of Birth: 10/05/1983	Type of Informant: Driver		
Race: Malay			Language: English		
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/07/2023 18:05	Type of Location: Straight Road
Location: KALLANG SECTOR				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHA1695M	Car			Blue	Seriously Damaged	0
SKR7927E	Car				Seriously Damaged	2



**SINGAPORE
POLICE FORCE**



T/20230710/7091

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

2 of 4

Report No. T/20230710/7091

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
YJ9966E	TOW TRUCK			Yellow	Seriously Damaged	0
YN6497R	Lorry				Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	LIM EMAN	ID No.	S8003660D
Related Vehicle	SKR7927E (Car)	Contact No.	90670825
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	10/07/2023	Date	10/07/2023
No. of Days granted Medical Leave	05	Degree of	Serious
Driver			
Name	NURINA BINTE AB RASID	ID No.	S8313982Z
Related Vehicle	SKR7927E (Car)	Contact No.	91081750
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	10/07/2023	Date	10/07/2023
No. of Days granted Medical Leave	03	Degree of	Serious

Brief Details.

On the stated date and time I was driving my car, bearing plate number SKR 7927 E along the stated location. Suddenly, I felt a large impact from the left side of my vehicle. I stopped my car and got down to check. I realised I was involved in a 4 car chain collision and A taxi's front right portion had collided into my vehicle's left portion. The vehicle bearing plate number YJ9966E had collided with a taxi bearing plate number SHA1695M causing it to be propelled forward and sideways into the back of stationary lorry bearing plate number YN6497R and into the side of my car.

The list of the vehicles are as follows

- 1) YN6497R
- 2) SHA1695M



**SINGAPORE
POLICE FORCE**



T/20230710/7091

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

3 of 4

Report No. T/20230710/7091

CONTINUATION OF REPORT

3) SKR7927E

4) YJ9966E

My vehicle sustained severe damages to the left portion and my passenger and I felt soreness and pain. I later filed an accident report and proceeded to seek treatment for my injuries. I was prescribed medication and 3 days of MC.



**SINGAPORE
POLICE FORCE**



T/20230710/7091

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

4 of 4

Report No. T/20230710/7091

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2023 21:21
Officer In Charge Of Case: TP / TPIB / TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:

NP168