

## 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 .....	12/07/2023 17:38 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	11/07/2023 12:55 (SGT)
Exact Location of Accident .....	Telok Blangah Way, Singapore
Additional Location Information .....	BETWEEN BLK 27 AND 33
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SDK1128D
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIM TONG WENG
NRIC No .....	SXXXX023D
Email Address .....	eugenelim@era.com.sg
Mobile Phone No .....	(Phone) +65-90223122
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Mercedes
Model .....	B180
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 .....	1595

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMPCSNA00060002303

#### DRIVER

Name of Driver .....	ANGELINE TAN POH HONG
NRIC No .....	SXXXX892Z
Date Of Birth .....	30/01/1966
Occupation .....	Indoor

Date Of Driving Pass .....	26/03/1986
Driving experience .....	37 YEARS AND 4 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-83223226
Alt. Phone Number .....	-
Email Address .....	eugenelim@era.com.sg
Address .....	50 WEST WEST COAST CRESCENT #06-08
Address complement .....	-
Postcode .....	128035
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 .....	Side Swipe
Weather Conditions .....	Raining
Road Surface .....	Wet

#### 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? .....	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 .....	Kampong Java Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002959999
Alt. Police Station Phone No .....	(Fax) +65-63913442
Police Station Address .....	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH AND STAEMENT AND POLICE REPORT T/20230712/2116

#### 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 .....	XE6039P
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 .....	ANGELINE TAN POH HONG
Gender .....	Female
Phone No .....	(Phone) +65-83223226
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SDK1128D
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN**

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- 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 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.

(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.

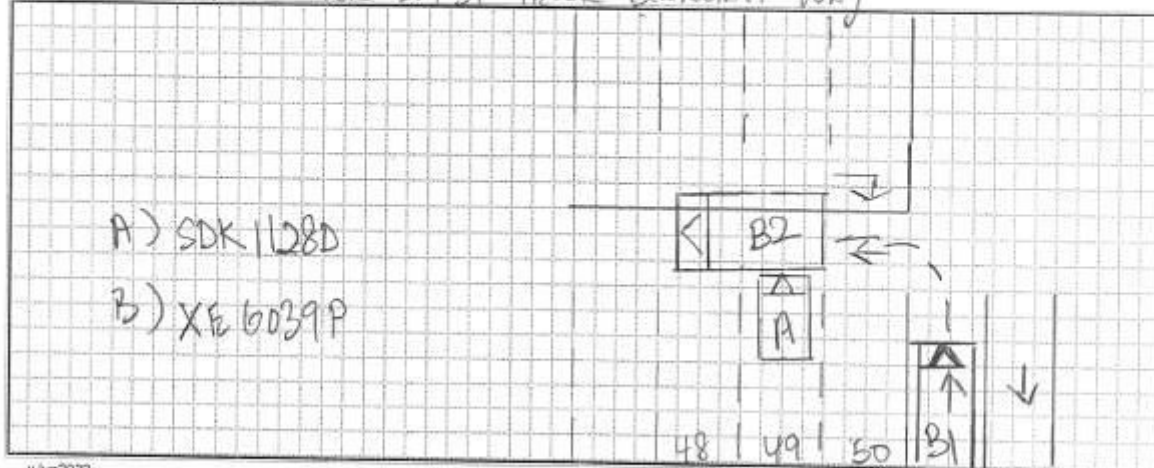
Policyholder's Signature / Date & Time

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

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

Sketch Plan

B7WN BLK 22/37 TRIOK BLANGAH WAY



WJun2022

1

Describe Circumstance of the Accident

AT APPROX 1255HRS, I GOT INTO MY VEHICLE AND WAS GOING OFF (CARPARK LOT #49) AS I MOVED, I NOTICED A HUGE VEHICLE COMING ON MY RIGHT. I HAD TO STOP MY CAR IMMEDIATELY AND JAMMED MY BRAKES QUICKLY AND SOUNDED THE HORN CONTINUOUSLY.

THE DRIVER OF THIS TRUCK SPED AS HE MADE A LEFT TURN INTO THE TRUNKING 2-WAY ROAD, IN SPITE OF MY SOUNDING OF HORN WHICH I WAS ALREADY STATIONARY.

THE INEVITABLE HAPPENED AS THE BACK OF THE TRUCK OBVIOUSLY DID NOT CLEAR AS THE TURNING RADIUS WASN'T SUFFICIENT IN SPITE OF THE FACT HE WAS TAKEN INTO THE OPPOSITE SIDE OF THE ROAD WHICH IS AGAINST TRAFFIC NOW.

THE DRIVER COULD BE HARD OF HEARING AND HAVE SUPPLEMENT ISSUES, CLEARLY EXTREMELY DANGEROUS DRIVING IN THIS MANNER, OBVIOUS TO HIS SURROUNDINGS.

NOT FORGETTING THIS IS A HUGE VEHICLE COMING INTO AN OLDER ESTATE WITH MORE ELDERLY PEOPLE. HE APPEARED ENRAGED IMMEDIATELY AFTER THE ACCIDENT AS HE CAME OUT OF HIS VEHICLE. HE WAS ALONE, NO OTHER PERSON TRAVELLING WITH HIM.

THE VEHICLE IS EXTREMELY HUGE AND TALL. THE VEHICLE NUMBER IS XE6030P.

THE DRIVER IS EXTREMELY AGGRESSIVE, MATCHED TO THE VEHICLE, IT WAS A RAINY DAY.

THERE IS ALSO A SECURITY CAMERA MANNED BY THE POLICE AT BLOCK 27. STN46363 WAS PARKED OPPOSITE LOT 60 - ADDITIONAL FOOTAGE

Declaration MAY 14/22  
I/We declare the foregoing particulars are true in every respect.

POLICE REPORT 1/20230712/2116

Policyholder's Signature / Date & Time

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

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





















































































































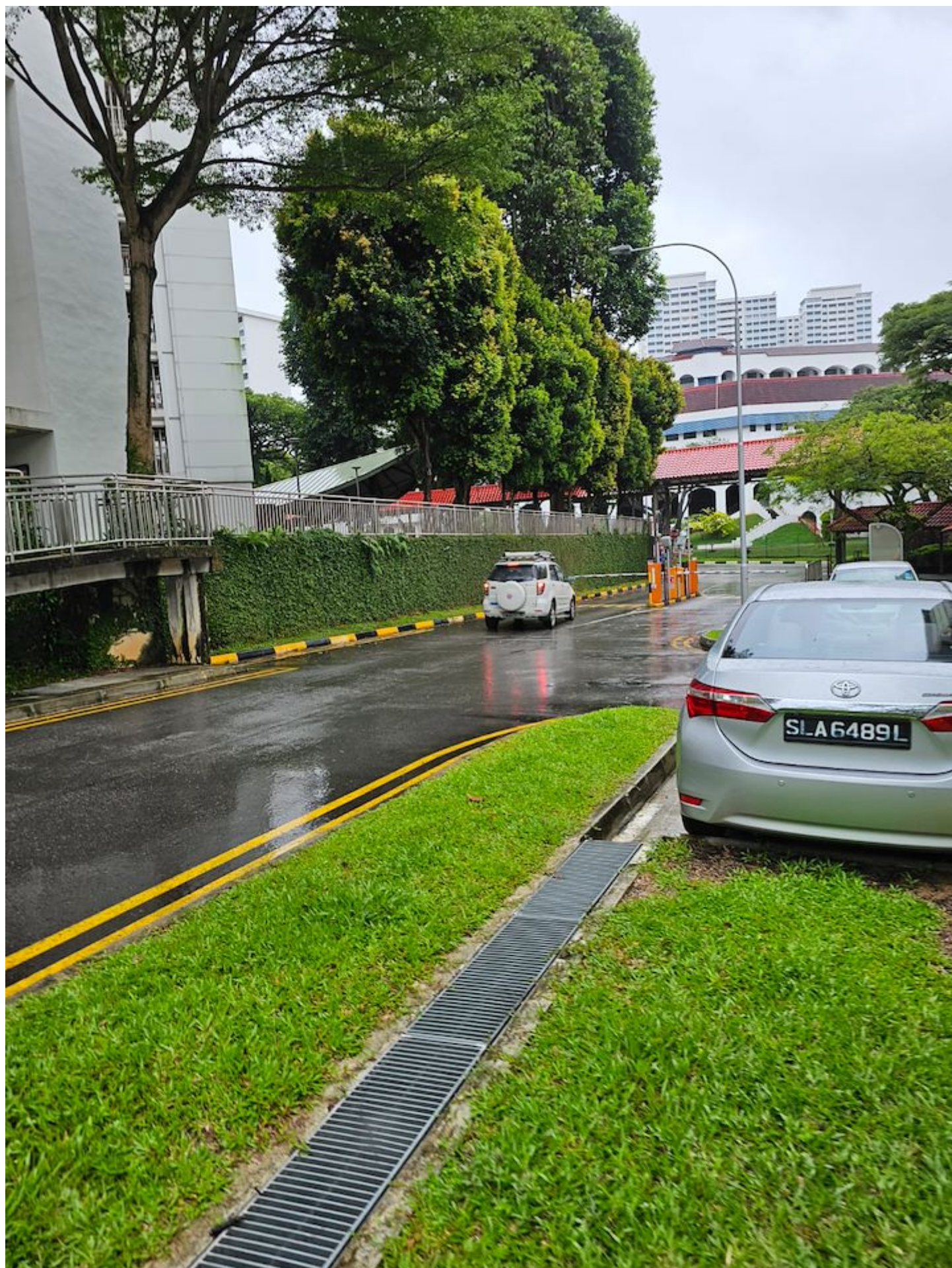








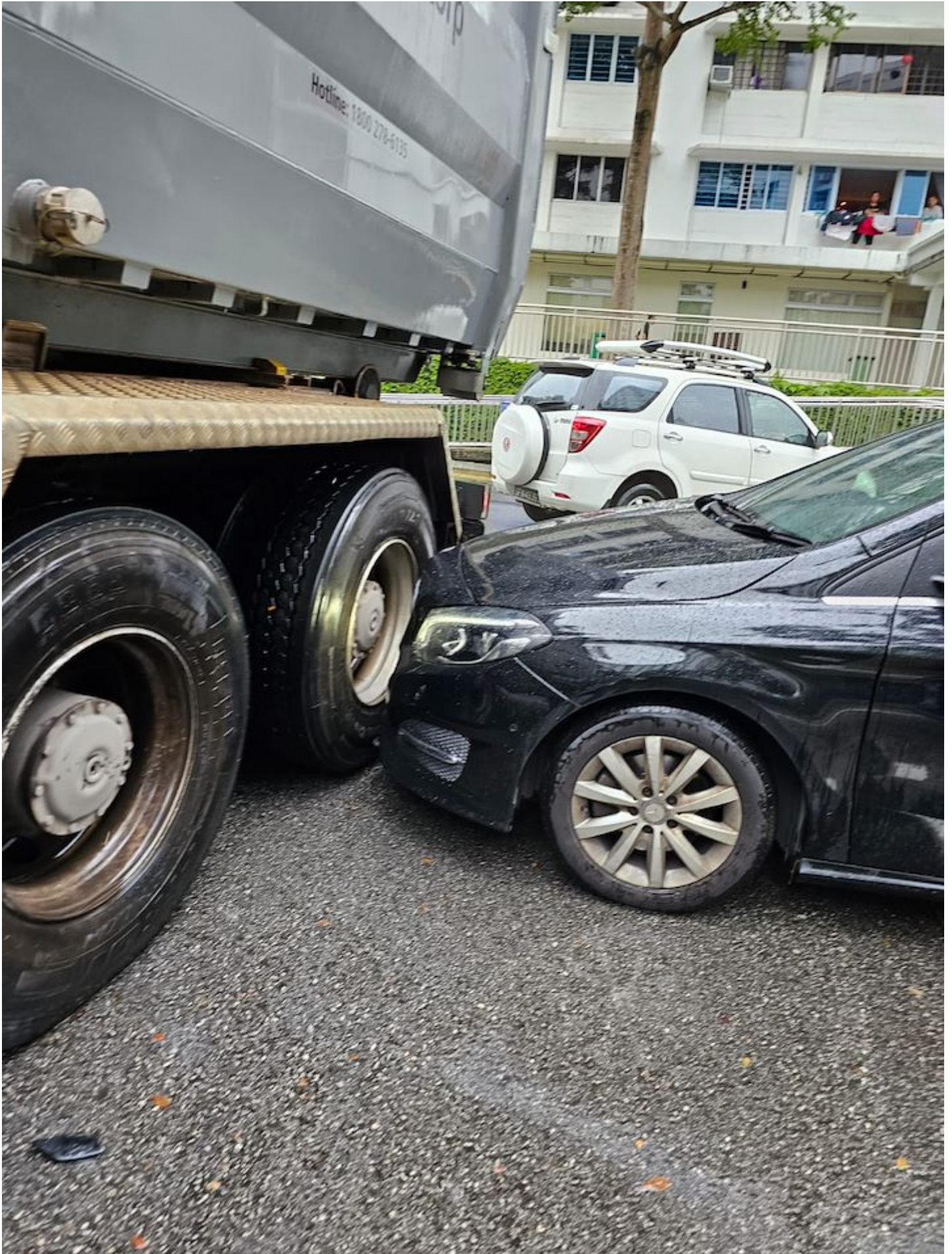



























**SINGAPORE  
POLICE FORCE**


T/20230712/2116

1 of 3

Report No. T/20230712/2116

Police Station Of Origin:  
Kampong Java N.P.C  
21 Kampong Java Road SINGAPORE  
228892  
Tel No: 1800-2959999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/07/2023 17:05		Vide Report No.: A/20230711/0065	Station Diary No.: 66
<b>Informant's Particulars</b>			
Name of Informant: ANGELINE TAN POH HONG		Address: 50 WEST COAST CRESCENT #06-08 SINGAPORE 128035	
ID Type / ID No.: NRIC NO / S1750892Z		Contact No.: Home/Office: Mobile: 83223226	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 57	Date of Birth: 30/01/1966	Type of Informant: Driver
Race: Chinese		Language:	
Occupation: Unemployed		Driving Licence Information: Class: 3 Date of Expiry: 26/03/1985	

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/07/2023 12:55	Type of Location: Car Park
Location:  TELOK BLANGAH RISE				
Weather: Drizzling		Road Surface: Wet		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SDK1128D	Car	MERCEDES BENZ	B180	Black	Slightly Damaged	0
XE6039P	Garbage Truck		Palfinger	White	No Damage	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDK1128D	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.			





**SINGAPORE  
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T/20230712/2116

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2 of 3

Report No. T/20230712/2116

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ANGELINE TAN POH HONG	ID No.	S1750892Z
Related Vehicle	SDK1128D (Car)	Contact No.	83223226
Hospital/Clinic	RAFFLES MEDICAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 26/03/1985
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Driver			
Name	LEE CHUANYI	ID No.	G8239330M
Related Vehicle	NIL	Contact No.	92982068
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

**Brief Details.**

On 11/07/2023, at about 1255hrs, my vehicle (SDK1128D) was parked at lot 49 at Blk 33 Telok Blangah Way. I was already inside my vehicle and about to drive out. After inching forward, I immediately braked my vehicle as there was a large truck (XE6039P) turning into my lane from the right. I also sounded my horn as I saw him approaching on my right.

The truck had turned and eating up to both of the lanes. The rear wheel of the truck collided onto the front portion of my vehicle. My front portion of my vehicle was damaged. I wish to state the driver alighted from his vehicle and confronted me. The driver was very aggressive and started shouting at me. I felt that his vehicle drove towards the carpark was dangerous and fast in his manner of driving. I felt intimidated as such I called for police assistance. I wish to state that there was Police CCTV footage which captured the whole incident. The CCTV is located at Blk 27 Telok Blangah Way.





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21 Kampong Java Road SINGAPORE  
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T/20230712/2116

3 of 3

Report No. T/20230712/2116

## CONTINUATION OF REPORT

Signature of Officer Recording The Report: E / SGT 1 FIRDANSHAH BIN MOHAMED RAMLI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/07/2023 17:05
Officer In Charge Of Case: TP / GIT / SI MOHAMED SOPHIAN BIN MOHAMED AMIR Contact No.: 91874317	Classification Of Case:

NP168