

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 First Submission	17/09/2024 13:55 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	17/09/2024 09:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PUNGGOL WAY SLIP ROAD TOWARDS TPE (CHANGI)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU5528J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG YONG JIAN
NRIC No	S9620444B
Email Address	edward9052@gmail.com
Mobile Phone No	(Phone) +65-83831680
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	CIVIC 1.5 TURBO VTIS SR
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	1498
Vehicle Fuel	Petrol
First Registration Date	06/12/2017
Chassis no	MRHFC1660HT000313
Effective Date/Time of Ownership	29/04/2024 01:04 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	RV02006300105

DRIVER

Name of Driver	NG YONG JIAN
NRIC No	S9620444B
Date Of Birth	11/06/1996
Occupation	Indoor
Driving Pass Date	15/06/2017
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	7 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83831680
Alt. Phone Number	-
Email Address	edward9052@gmail.com
Address	BLK 212A PUNGGOL WALK #14-741
Address complement	-
Postcode	821212
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	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)	2
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	TEH CHAO HUI
Gender	Female

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

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

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 SMF4166T
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJP626S
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) -

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SKX1216G
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 NG YONG JIAN
Gender Male
Phone No (Phone) +65-83831680

Address	BLK 212A PUNGOOL WALK #14-741
Address Complement	-
Post Code	821212
Approximate Age Years Old	28
Injuries Sustained	OBTAINED 3 DAYS MC
Injured person in which vehicle?	SLU5528J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' 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

Sketch Plan

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

Punggol Way slip road towards TPE (Changi)

Witnessed by Reporting Centre Personnel

Joelle Tan
AMK Autopoint PL



Vehicle A - SUW55285

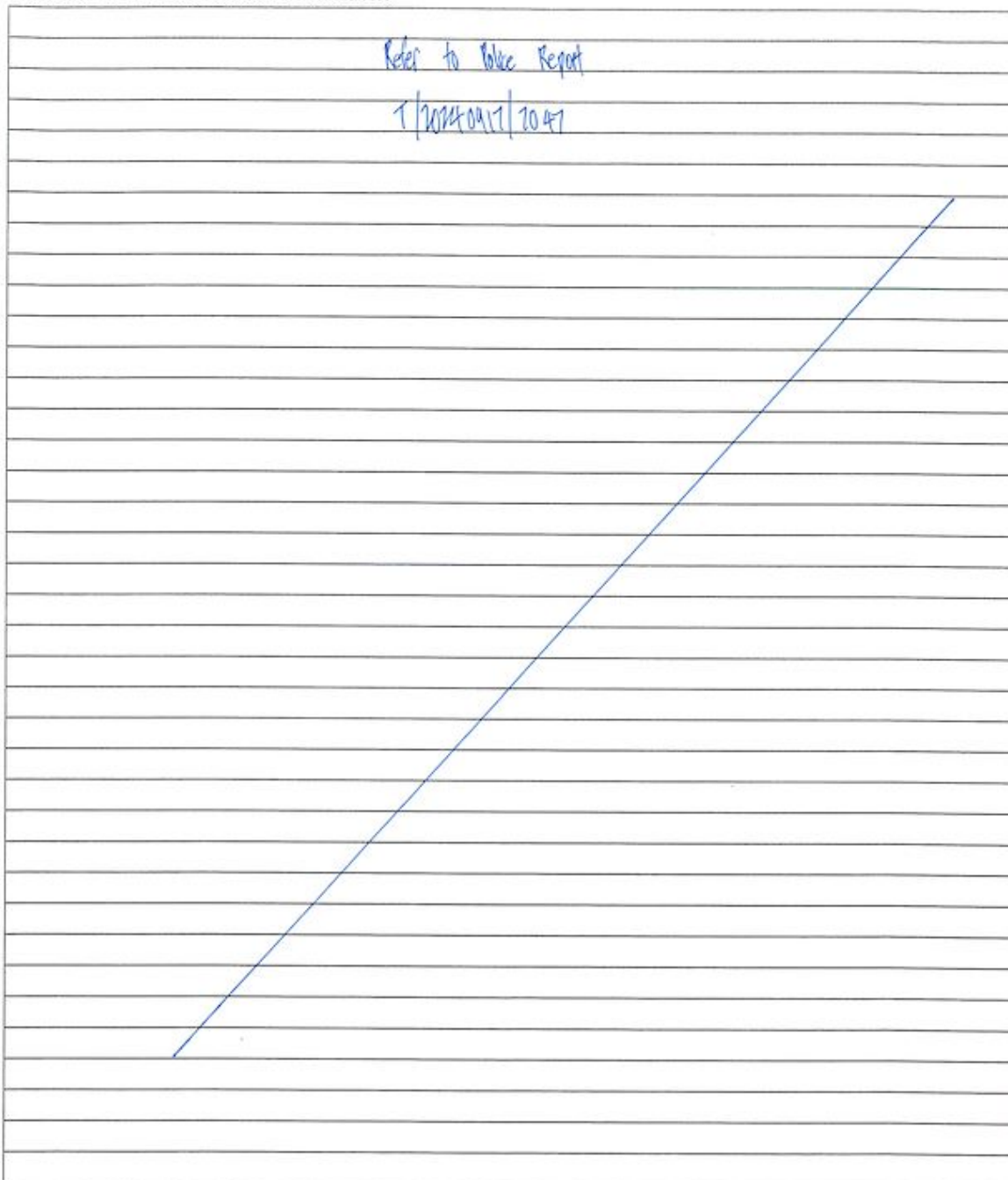
Vehicle B - SMF9166T

Vehicle C - SSP6265

Vehicle D - SKX1216G

Describe Circumstances of the Accident

Refer to Police Report
1/20240917/2047




Declaration

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

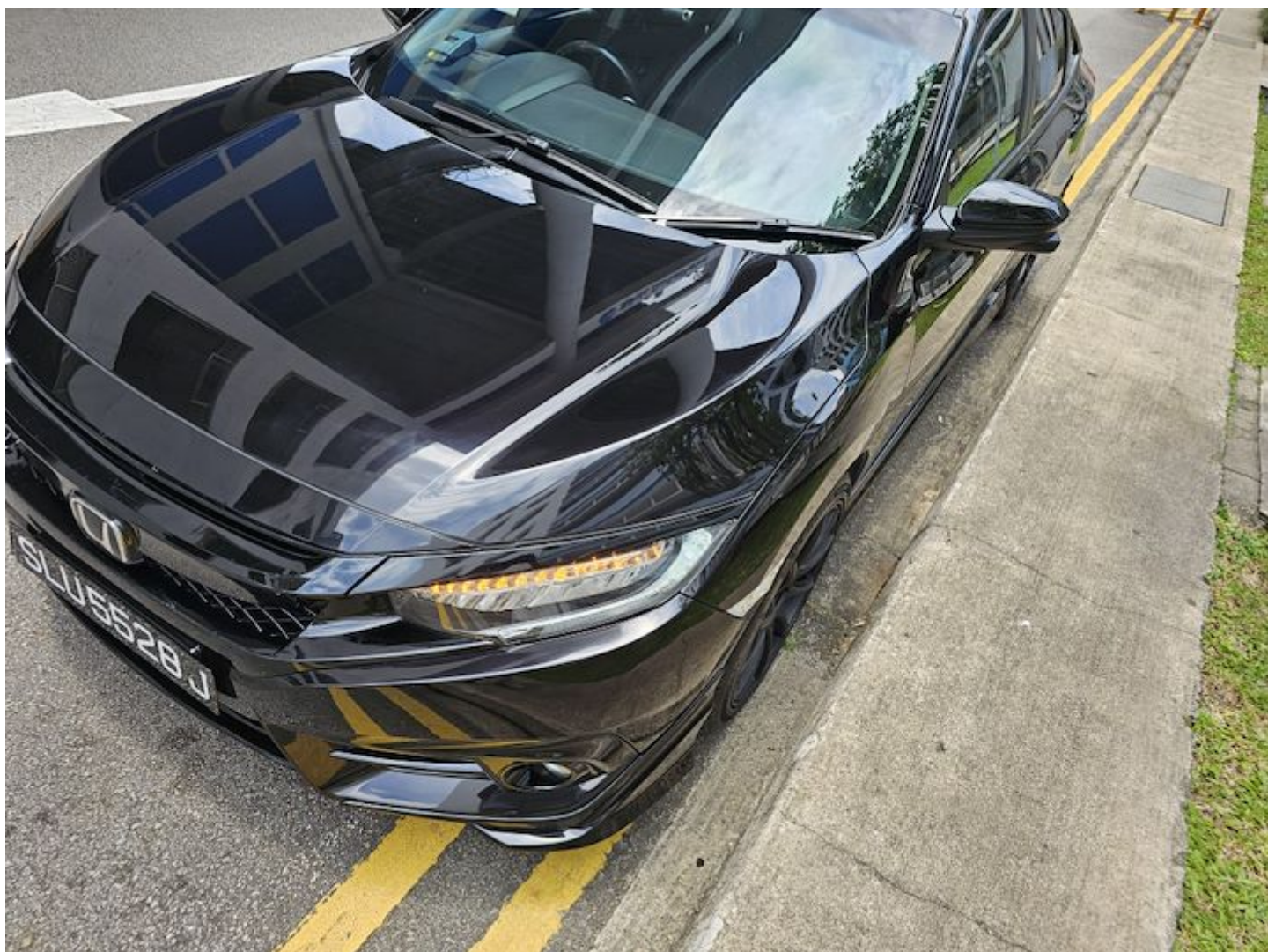


Witnessed by Reporting Centre Personnel
Joelle Tan
Amic Autopoint Pte Ltd



















**SINGAPORE
POLICE FORCE**



T/20240917/7047

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Report No. T/20240917/7047

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/09/2024 13:13			Vide Report No.:		Station Diary No.:
Informant's Particulars					
Name of Informant: NG YONG JIAN			Address: 212A PUNGGOL WALK #14-741 SINGAPORE 821212		
ID Type / ID No.: NRIC NO / S9620444B			Contact No.: Home/Office: Mobile: 83831680		
Nationality: SINGAPORE CITIZEN			Email: EDWARD9052@GMAIL.COM		
Sex: Male	Age: 28	Date of Birth: 11/06/1996	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: TECHNOLOGY ANALYST			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/09/2024 09:25	Type of Location:
Location: PUNGGOL WAY				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLU5528J	Motor car	HONDA	CIVIC 1.5 TURBO VTIS SR	Purple		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SLU5528J	NTUC Income Insurance Co-Operative Limited	RV02006300105	27/04/2024	26/04/2025



**SINGAPORE
POLICE FORCE**

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



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Report No. T/20240917/7047

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG YONG JIAN	ID No.	S9620444B
Related Vehicle	SLU5528J (Motor car)	Contact No.	83831680
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 (MC)	NIL	Degree of Injury	Serious

Brief Details.

ON THE STATED DATE AND TIME OF ACCIDENT, I WAS DRIVING MY VEHICLE SLU5528J ALONG PUNGGOL WAY SLIP ROAD TOWARDS TPE (CHANGI) WITH MY GIRLFRIEND, TEH CHAO HUI, ONBOARD.

I WAS TRAVELLING ON THE SLIP ROAD AND STARTED TO SLOW DOWN AS I WAS LOOKING AT THE ONCOMING TRAFFIC ON THE HIGHWAY. AS THERE WAS TRAFFIC AHEAD OF ME AND ALL THE VEHICLES CAME TO A COMPLETE STOP INCLUDING ME.

AS I WAS STATIONARY WAITING FOR THE VEHICLES IN FRONT TO MOVE OFF, I FELT A SUDDEN IMPACT FROM THE REAR. THE SUDDEN IMPACT CAUGHT ME OFF GUARD AS I GOT PULLED BY MY SEATBELT. I RESTED FOR AWHILE AND ALIGHTED MY VEHICLE. UPON ALIGHTING, I NOTICED 3 VEHICLES BEHIND ME. THE CHAIN COLLISION IS AS FOLLOWS:

VEH 1: SLU5528J (MY VEH)
VEH 2: SMF4166T
VEH 3: SJP626S
VEH 4: SKX1216G

AFTER THAT, WE TOOK PHOTOS AND EXCHANGED PARTICULARS THEN LEFT THE SCENE. AFTER AWHILE, I FELT SORENESS ON MY NECK, SHOULDERS AND LOWER BACK THEN PROCEEDED TO A CLINIC NEARBY. I WENT TO INTAMEDICAL KOVAN AND GOT AWARDED 3 DAYS MC FOR THE INJURIES CAUSED BY THE ACCIDENT.



**SINGAPORE
POLICE FORCE**

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



T/20240917/7047

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Report No. T/20240917/7047

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: 17/09/2024 13:13
Officer In Charge Of Case: TP / AEIT / PHNG KAR SOON Contact No.: 65476439	Classification Of Case:

NP168