

## 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	30/09/2024 20:41 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	29/09/2024 15:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	DUNEARN ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	ET9822X
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONG TERENCE
NRIC No	SXXXX724Z
Email Address	TERENCEONG@HOTMAIL.SG
Mobile Phone No	(Phone) +65-96961340
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Mazda
Model	2
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
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	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

#### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	-

#### DRIVER

Name of Driver	ONG TERENCE
NRIC No	SXXXX724Z
Date Of Birth	17/06/1963
Occupation	Indoor
Driving Pass Date	29/04/1986
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	38 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96961340
Alt. Phone Number	-
Email Address	TERENCEONG@HOTMAIL.SG
Address	56 ST PATRICKS ROAD
Address complement	-
Postcode	-
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?	No
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	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

#### 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	SHA7198S
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)	-

## SKETCH PLAN

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### 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.

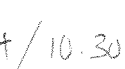
(collectively the "Purposes")


(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.

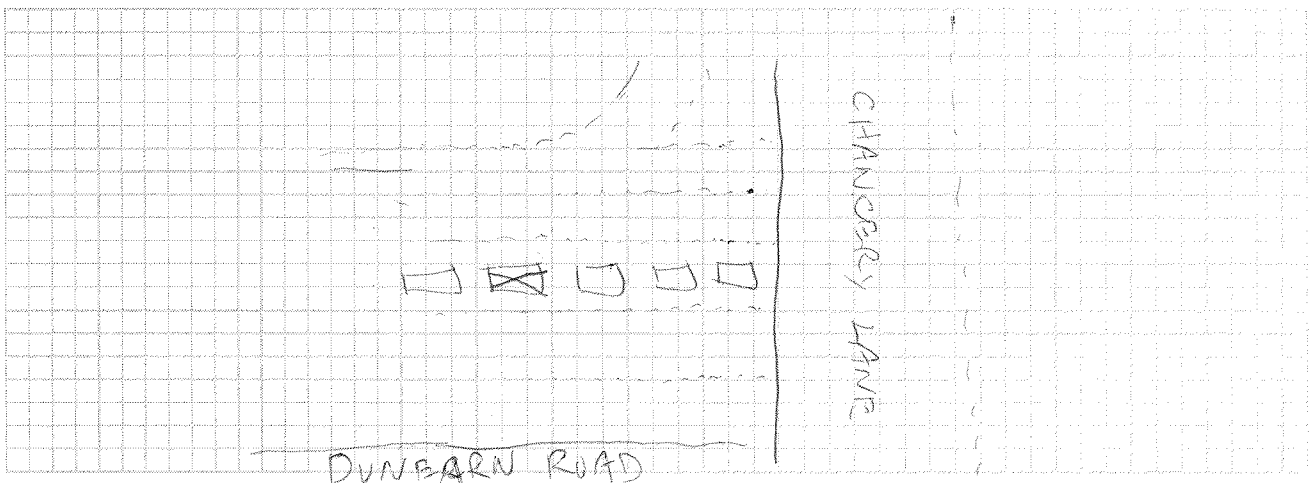
 30 SEP 2024 / 10.30 AM

Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

### Sketch Plan



 BT9822X

ON SUNDAY 29 SEP 2024 AROUND 3.50 PM, I WAS DRIVING ALONG DUNEARN ROAD TOWARD CITY. AT THE JUNCTION BETWEEN DUNEARN ROAD AND CHANCERY LANE, THE TRAFFIC LIGHT WAS RED AND I STOPPED BEHIND TWO TO THREE CARS BEHIND THE TRAFFIC LIGHT. I WAS IN THE MIDDLE OF THREE LANES. A BLUE COMFORT TAXI THEN COLLIDED INTO MY CAR DAMAGING MY REAR CAR BUMPER. I TOOK PHOTO OF THE DAMAGE AND THE TAXI. MOVING TO CHANCERY LANE TO AVOID BLOCKING TRAFFIC. I GOT THE DRIVER'S PHONE NUMBER.

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &  
Time

Witnessed by Reporting Centre Personnel


INSURER ENQUIRY

## Find insurer

Vehicle reg. no.

SHA7198S

Date of Accident

29/09/2024 

Reset

## % RESULT & RECEIPT

### TP Insurer Enquiry

Insurance ..... MS First Capital Insurance Ltd

Period of Insurance ..... 01/01/2024 - 31/12/2024

Requested By ..... TRANSEUROKARS PTE LTD - TA...

Requested Date ..... 30/09/2024 10:42

#### Payment details

Request Amount: **S\$2**

GST Amount: **S\$0.18**

Total Amount Due (GST Inclusive): **S\$2.18**

#### General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1579724Z**

Name: **ONG TERENCE**

Birth Date: **17 Jun 1963**

Issue Date: **17 Sep 2003**

000843501K



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1579724Z**




Name: **ONG TERENCE**

Race: **CHINESE**

Date of birth: **17-06-1963**

Country/Place of birth: **SINGAPORE**

Sex: **M**




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(IES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **29 Apr 1986**

NP 428A

Licence No: **S1579724Z**





6216293

NRIC No. **S1579724Z**

Date of issue: **13-06-2019**

Address: **56 ST. PATRICK'S ROAD  
#01-10  
SINGAPORE 424171**





## QUOTATION

CODE: F0001  
CUSTOMER: MS FIRST CAPITAL INSURANCE LTD  
ADDRESS: 16 RAFFLES QUAY  
#42-01  
HONG LEONG BUILDING  
SINGAPORE 048581  
ATTN: MOTOR CLAIM DEPT  
CONTACT NO.: 6507 3848  
MODEL: MAZDA2 IPM HB HIGH WHITE  
CHASSIS NO.: JM6DJ2HAA01200187  
ENGINE NO.: P520484407  
REG NO.: ET9822X  
REGN DATE: 30/11/2017

PAGE NO.: 1  
DOCUMENT NO.: 1504  
DOCUMENT DATE: 02/10/2024  
POS ID: MU  
PRINTED BY: Lee Yao Sheng  
SERVICE ADV:  
CSP/OP CODE: Lee Yao Sheng  
DEPT: I  
WIP NO.: 20732  
REF. NO.:  
DATE IN:  
EXT. WTY:  
MILEAGE: 0

### DESCRIPTION:

Item	Description	Qty.	Unit Price	Stk/Status	Gross amount	GST Code
			SGD		SGD	
NOTES	MS FIRST CAPITAL TP CLAIM				0.00	O
SUB	TO REMOVE & REPLACE REAR BUMPER, END PANEL & REAR FENDER LOWER PANEL LH. AND ALL ACCIDENT AFFECTED AREA.				4,752.00	S
SUB	TO RESPRAY REAR BUMPER, END PANEL & REAR FENDER LOWER PANEL LH.				3,780.00	S
SUB	TO TRANSFER REVERSE SENSORS.				330.00	S
SUB	TO SUPPLY NUMBER PLATE.				70.00	S
SUB	TO SUPPLY SPRAY THEROSTAT SEALANT ON THE CUTTING				180.00	S
SUB	TO REMOVE & REFIT CARPET & TRIMS ON THE REAR SECTION TO GIVE WAY TO THE REPAIR ON THE REAR SECTION.				792.00	S
SUB	TO CARRY OUT BODY CAVITY PRESERVATION.				250.00	S
SUB	TO CHECK ELECTRICAL SYSTEM FOR PROPER FUNCTIONING.				250.00	S
SUB	TO REPROGRAMME AFTER THE ACCIDENT REPAIR WORKS.				300.00	S

*\*This is only an estimate from our visual inspection and should there be more damages found during the process of works you will then be informed for your approval before proceeding with the repairs.*

*\*Take note that should you decide not to proceed with the repairs "a service quotation fee" with a minimum of \$180.00 will be applied and it will vary depending on the time unit that was taken for the checking and diagnosis of your vehicle.*



Corporate Head Office : Trans Eurokars Pte Ltd, 11 Kung Chong Road Singapore 159147  
Tel: 6363 3003, Fax: 63693003, BRN.199103859N, GST Regn. No.: M90364005A

**ZOOM-ZOOM**

Showrooms & Service Centres :

5 Ubi Close Singapore 408605

Sales Tel: 6395 8888 Service Tel: 6395 8899

Sales Fax: 68461700 Service Fax: 6744 9402

23 Leng Kee Road Singapore 159095

Sales Tel: 6603 6118 Service Tel: 6603 6128

Sales Fax: 6476 7073 Service Fax: 6476 7417





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EXT. WTY:  
MILEAGE: 0

### DESCRIPTION:

Item	Description	Qty.	Unit Price	Stk/Status	Gross amount	GST Code
			SGD		SGD	
SUB	SUNDRIES.				50.00	S
DH4T-50-221	BEREAR BUMPER DJ W/SENSOR	1.00	1,024.24	*NO STOCK	1,024.24	S
B45A-56-146A	FASTENER	7.00	2.36	STOCK	16.52	S
D09W-50-271A	STAY RR BUMPER DJ	2.00	9.78	*NO STOCK	19.56	S
D09H-50-2J1A	RETAINER LHR DJ	1.00	27.57	*NO STOCK	27.57	S
BHN1-50-0Z1A	GROMMET, SCREW	4.00	2.36	*NO STOCK	9.44	S
DFR5-50-251	BRACKET, BUMPER SKYACTIV	1.00	4.64	*NO STOCK	4.64	S
D09H-50-350	SHIELD LHR SPLASH M2 DJ	1.00	67.10	*NO STOCK	67.10	S
GS1D-50-EM1A	TAPE, PROTECTOR	5.00	7.42	*NO STOCK	37.10	S
D23P-67-SH0	CORD, SHORT DJ	1.00	187.54	*NO STOCK	187.54	S
KD47-67-UC5A	RETAINER REV SENSOR	4.00	15.77	*NO STOCK	63.08	S
GMK6-67-UC1	SENSOR, ULTRASONIC GJ/GL	2.00	184.59	STOCK	369.18	S
KD47-67-UC1	6.SENSOR, ULTRASONIC SKYACTIV	2.00	184.59	*NO STOCK	369.18	S
D0YH-70-75Z	PANEL, REAR END DJ	1.00	546.93	*NO STOCK	546.93	S
D0YH-71-44Y	PILLAR(L), REAR OUTER	1.00	748.71		748.71	S

	* GST Code	Rate	Service/ Goods	GST	Before GST	GST	Total
Parts	3,490.79	O	-	-			
Surcharge	0.00	S	9.00%	14,244.79	1,282.03		
Labour	10,754.00						
Menus	0.00						
Gross					14,244.79	1,282.03	15,526.82
Less: Deposit**					0.00	0.00	0.00
Amount Due					14,244.79	1,282.03	15,526.82

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\*\*Deposit tax invoice No.:

CASH / NETS / AMEX / VISA / MASTER / CHEQUE  
No.

Date:

Customer signature

Authorised signature



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