

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	28/10/2024 16:48 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	25/10/2024 17:15 (SGT)
Exact Location of Accident	Jln. Ahmad Ibrahim, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMY7306L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	BJORN NG JUN HAO
NRIC No	S9616501C
Email Address	BJORN-96@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97104922
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
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	1800
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P10733284R02

DRIVER

Name of Driver	BJORN NG JUN HAO
NRIC No	S9616501C
Date Of Birth	12/05/1996
Occupation	Indoor
Driving Pass Date	19/11/2014
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	9 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97104922
Alt. Phone Number	-
Email Address	BJORN-96@HOTMAIL.COM
Address	BLK 127 PASIR RIS GROVE #01-06
Address complement	-
Postcode	518178
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?	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 POLICE REPORT: T/20241026/7074.

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	SLQ3094C
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	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	BJORN NG JUN HAO
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMY7306L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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.

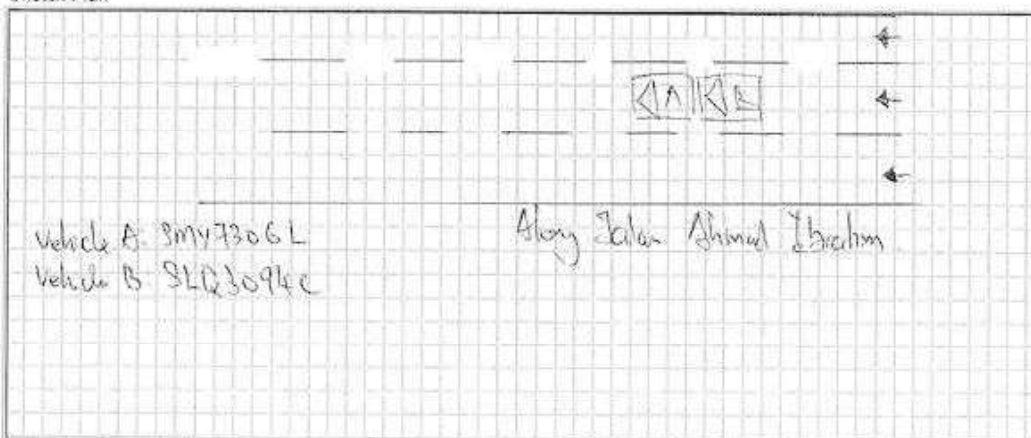


Policyholder's Signature / Date & Time



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: 9MY7306L
Vehicle B: SLQ3094e

Along Jalan Ahmad Ibrahim

Describe Circumstance of the Accident

Ref. to Alpha Report
Bike Report No. : 7/20/14/026/7074

Declaration

I/We declare the foregoing particulars are true in every respect.

Bhu

Policyholder's Signature / Date & Time

Bhu

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/20241026/7074

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

1 of 3

Report No. T/20241026/7074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/10/2024 17:27		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: BJORN NG JUN HAO			Address: 127 PASIR RIS GROVE #01-06 SINGAPORE 518178		
ID Type / ID No.: NRIC NO / S9616501C			Contact No.: Home/Office: Mobile: 97104922		
Nationality: SINGAPORE CITIZEN			Email: BJORN-96@HOTMAIL.COM		
Sex: Male	Age: 28	Date of Birth: 12/05/1996	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Technical/Engineering services manager (excluding transport)			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: 25/10/2024 17:15	Type of Location: Straight Road
Location: JALAN AHMAD IBRAHIM				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Controlled by Others e.g. Workmen		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLQ3094C	Car Transporter				Slightly Damaged	0
SMY7306L	Motor car	TOYOTA	WISH 1.8 CVT	White	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SMY7306L	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10733284R02	19/02/2024	18/02/2025



**SINGAPORE
POLICE FORCE**



T/20241026/7074

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

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Report No. T/20241026/7074

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	BJORN NG JUN HAO	ID No.	S9616501C
Related Vehicle	SMY7306L (Motor car)	Contact No.	97104922
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	26/10/2024	Date Discharge	26/10/2024
No. of Days granted Medical Leave (MC)	05	Degree of Injury	Slight

Brief Details.

It was heavy traffic, I was following the front vehicle slowing down according to traffic. Out of sudden SLQ3094C did not slow down and follow traffic, rather accelerate and ram hard to the rear of my vehicle. My vehicle suffered damages and I suffered injury.



**SINGAPORE
POLICE FORCE**

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



T/20241026/7074

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Report No. T/20241026/7074

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
LOW MENG FATT
Contact No.: 97577566

NP168

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

Date/Time:
26/10/2024 17:27

Classification Of Case:



POLIS DIRAJA MALAYSIA REPOT POLIS

Balai : TRAFIK ISKANDAR PUTERI Pegawai Penyiasat : R207135
 Daerah : ISKANDAR PUTERI
 Kontinjen : JOHOR
 No. Repot : TRAFIK IPUTERI/015918/24
 Tarikh : 25/10/2024
 Waktu : 1855 PM
 Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot :

Nama : MUHAMMAD FAISAL BIN No. Badan : R225590 Pangkat : KONST/P
 SHAHRUN

Butir-butir Jurubahasa (Jika Ada) :

Nama : --- No. K/P (Baru) : --- No. Polis/Tentera : ---
 No. Pasport : --- Bahasa Asal : ---
 Alamat : ---

Butir-butir Pengadu :

Nama : BJORN NG JUN HAO
 No. K/P (Baru) : --- No. Polis/Tentera : --- No. Pasport : K4073820H
 No. Sijil Beranak : --- Jantina : Lelaki Tarikh Lahir : 12/05/1996
 Umur : 28 Tahun 5 Bulan Keturunan : Cina Warganegara : SINGAPORE
 Pekerjaan : OPERATION MANAGER
 Alamat Tinggal : 126 PASIR RIS GROVE, #01-07, 518178 SINGAPURA
 Alamat IbuBapa : ---
 Alamat Pejabat : ---
 No. Tel (Rumah) : --- No. Tel (Pejabat) : --- No. Tel (Bimbit) : 80355966
 Emel : ---

Pengadu Menyatakan :

On 25/10/2024 at about 1719hrs I was driving car registration number SMY7306L heading from Singapore go to Johor Bahru. Upon reaching KM2.1 Lebuhraya Linkedua I was going straight at the middle lane while got traffic jam, suddenly from the rear came a car registration number SLQ3094C breaking into my back car. In the incident I have injured at my back neck. While my vehicle was damaged in the rear bumper/bonnet and other damage is uncertain. This is my report.

Tandatangan Pengadu:

Tandatangan Jurubahasa (Jika ada):

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

: R225590 | 25/10/2024 07:20:41 PM