

## 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 Authorised 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 ability.
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 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 Report             | 29/12/2017 01:40    |
| Date Of Accident           | 11/10/2017 17:45    |
| Exact Location Of Accident | ALONG GAMBAS AVENUE |
| Country/State of Loss      | SINGAPORE           |

### DETAILS OF OWN VEHICLE

|                             |                       |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SKC4916K              |
| <b>Insured/Policyholder</b> |                       |
| Name Of Registered Owner    | TAN NGOH PHENG        |
| NRIC No                     | S1093379Z             |
| Email Address               | KOOPPF@SINGNET.COM.SG |
| Mobile Phone No             | (LOCAL) +65-91746188  |
| Alternative Phone No        | OFFICE-91746188       |

### Vehicle Particulars

|  |                |
|--|----------------|
| Manufacturer   | CHERY          |
| Model  | T11 1.6 MT ABS |
| Exact Purpose for which vehicle was being used at time of accident           | PRIVATE        |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO             |
| If No, Please state action to be taken                                       | REPORTING ONLY |
| Vehicle Category   | PRIVATE CAR    |

### Insurance Company

|                           |                         |
|---------------------------|-------------------------|
| Name of Insurance Company | FWD SINGAPORE PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE           |
| Fleet Policy              | NO                      |
| Policy Number             | PNPV2017-00004756       |
| Cover Note Number         | N.A.                    |

### Driver

|                      |                       |
|----------------------|-----------------------|
| Name of Driver       | KOO AH SIM            |
| NRIC No              | S1093379Z             |
| Date Of Birth        | 06/06/1948            |
| Occupation           | INDOOR                |
| Date Of Driving Pass | 31/05/1968            |
| Driving Experience   | 49 YEARS AND 4 MONTHS |
| Gender               | MALE                  |
| Mobile Number        | (LOCAL) +65-91746188  |
| Fax Number           |                       |
| Contact Number       | OFFICE-91746188       |
| Email Address        | KOOPPF@SINGNET.COM.SG |

|   |                                       |
|---|---------------------------------------|
| Address   | BLK 688F WOODLANDS DRIVE 75<br>#02-80 |
| Postcode  | 736688                                |
| Was driver an employee of the Insured's Company     | NO                                    |
| If No, Relationship of the Driver with the Insured  | SPOUSE                                |
| Vehicle Registration Number of Driver's Own Vehicle | -<br>-<br>-                           |
| Insurance Company of Driver's Own Vehicle           | -<br>-<br>-                           |

#### General Information of the Accident

|                    |              |
|--------------------|--------------|
| Type Of Accident   | NO COLLISION |
| Weather Conditions | CLEAR        |
| Road Surface       | DRY          |

#### Other Information

|   |     |
|---|-----|
| Was any foreign vehicle involved in this accident?  | NO  |
| Number of vehicles involved in the accident   |     |
| Was any body injured in the Accident?   | NO  |
| Was any injured conveyed to hospital by ambulance?  |     |
| Was any other material or property damaged?   | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO  |
| Number of Passengers (Including Driver)   | 1   |

#### Details of Police Action

|   |   |
|---|---|
| Was the accident reported to the police?  | YES   |
| If Yes, Please state which Police Station |   |
| Police Station Name                       | ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)  |
| Police Station Address                    | <b>ROAD:</b> 51 ANG MO KIO AVENUE 9 , <b>POSTCODE:</b> 569929 , <b>COUNTRY:</b> SINGAPORE |
| Police Station Contact                    | <b>TEL NO:</b> 1800-2180000 - <b>FAX NO:</b> 64814246                                     |
| Was notice of intended Prosecution given? | NO  |
| If Yes, against whom?                     |   |

#### Circumstances of Accident

REFER TO POLICE REPORT F/20171121/7047 LODGE AT ANG MO KIO POLICE DIVISIONAL HQ Brief details Your ref: F/20171011/0180 I am making this report following instruction from IO Rizwan (traffic Police). According to IO Rizwan, he received a police report naming my vehicle SKC4916k as an involved party in a traffic incident that happen on 11 Oct 2017 @5.45pm along Gambas Ave towards Woodlands Ave 9 I would like to put on record that I am not aware of having been involved in any traffic incident on 11 Oct .

#### Attachment(s)

|   |     |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera?   | NO  |
| Was there any audio recorded?                 | NO  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |               |
|-----------------------------|---------------|
| Vehicle Registration Number |               |
| Vehicle Make/Model/Colour   |               |
| Details Of Properties       | UNKNOWN RIDER |
| Vehicle Category            | NA/UNKNOWN    |
| Name of Driver              |               |
| NRIC/Passport Number        |               |
| Contact Number              |               |
| Address                     |               |

Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### 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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. The 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.
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

VERIFIED BY AJAX MARS  
REPORTING OFFICER  
EUGENE KOH

Witnessed by Reporting Centre  
Personnel

Sketch Plan

UNAWARE OF ACCIDENT.

## Sketch Plan #2

### ACCIDENT STATEMENT (2000 characters)

REFER TO THE ATTACHMENT OF POLICE REPORT.

Taxi Voucher No.:

### DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
EUGENE KOH YEW KIAT

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

28 December 2017 at 7:30 PM

Date/Time:

28 December 2017 at 7:30 PM

POLICE REPORT



**SINGAPORE  
POLICE FORCE**

**POLICE REPORT (NP299)**

Police Station Of Origin  
Ang Mo Kio Police Divisional HQ  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No:1800-2180000



F/20171121/7047

1 of 2

*on line*

*在网上报案 (prove)*

Report No. F/20171121/7047

|   |  |   |           |                             |                 |
|---|--|---|-----------|-----------------------------|-----------------|
| Date/Time Report Made<br>21/11/2017 19:12 |  | Vide Report No.   |           | Station Diary No.           |                 |
| Name Of Informant<br>KOO AH SIM           |  | Address<br>APT BLK 688F WOODLANDS DRIVE 75 #02-80<br>SINGAPORE 736688 |           |                             |                 |
| ID Type / ID No.<br>NRIC NO / S1093379Z   |  | Contact No.<br>Home/Office:                      Mobile:<br>91746188  |           |                             |                 |
| Nationality<br>SINGAPORE CITIZEN          |  | Email Address<br>kooppf@singnet.com.sg                                |           |                             |                 |
| Occupation<br>Retiree                     |  | Sex<br>Male   | Age<br>69 | Date of Birth<br>06/06/1948 | Race<br>Chinese |
| Institution/School Name                   |  | Language<br>English   |           |                             |                 |
| Date/Time Of Incident<br>11/10/2017 17:45 |  | Location Of Incident<br>GAMBAS AVENUE NIL SINGAPORE 123456            |           |                             |                 |

**Brief details.**

Your ref.: F/20171011/0180

I am making this report following instructions from IO Rizwan (Traffic Police). According to IO Rizwan, he received a police report naming my vehicle SKC4916K as an involved party in a traffic incident that happened on 11 Oct 2017 @ 5.45pm, along Gambas Ave towards Woodlands Ave 9.

I would like to put on record that I am not aware of having been involved in any traffic incident on 11 Oct

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>21/11/2017 19:12   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |

Authentication Stamp

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



F/20171121/7047

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20171121/7047

2017 around 5.45pm.

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>21/11/2017 19:12   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |
| Authentication Stamp   |  |

LETTER FROM TRAFFIC POLICE



**SINGAPORE  
POLICE FORCE**

Traffic Police  
Singapore Police Force  
10, Ubi Avenue 3  
Singapore 408865  
Tel : 6547 0000  
Fax : 6547 6259

Date : 24 Nov 2017

Your Ref :  
Our Ref : TP/IP/55065/2017

281-000515

KOO AH SIM  
APT BLK 688F WOODLANDS DRIVE 75  
#02-80  
SINGAPORE 736688



Dear Sir / Madam,

**CASE OF TRAFFIC ACCIDENT ALONG GAMBAS AVENUE ON 11 OCT 2017 @ 5.45 PM**

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

2 IF you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (<http://www.police.gov.sg/epc>).

3 Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.

4 You may contact the Investigation Officer MD RIZWAN BIN KAMALUDIN at his / her office number: 65476185 or the supervisor NEO CHIN LOONG at 65476197 if you have any further queries.

5 Thank you.

Yours faithfully,

TAN CHEE SING (ASP)  
CHIEF INVESTIGATION OFFICER  
INVESTIGATION BRANCH  
TRAFFIC POLICE

This is computer generated and does not require a signature.

A FORCE FOR THE NATION



# LETTER FROM TRAFFIC POLICE

## ROAD TRAFFIC ACT (CHAPTER 276) (SECTIONS 132, 134)


|  |                    |                 |                       |
|--|--------------------|-----------------|-----------------------|
| Date of Offence:   | 11 Oct 2017 5:45pm | Vehicle Number: | SKC4910K              |
| Place of Offence:  | GAMBAS AVENUE      | Vehicle Type:   | MOTOR CAR             |
| <b>Offence(s):</b>   |                    | <b>Amount</b>   | <b>Demerit Points</b> |
| YOU KOO AH SIM ARE CHARGED THAT YOU ON 11 OCTOBER 2017 AT ABOUT 5.45 PM ALONG GAMBAS AVENUE SINGAPORE, DID DRIVE/RIDE MOTOR VEHICLE SKC4910K WITHOUT REASONABLE CONSIDERATION FOR OTHER PERSONS USING THE ROAD TO WIT, <FONT>BY FAILING TO KEEP A PROPER LOOKOUT WHILE CHANGING LANES AND RESULTING IN A MOTOR CYCLE FS8074M TO SKID <FONT> AND YOU HAVE THEREBY COMMITTED AN OFFENCE PUNISHABLE UNDER SECTION 65(1) OF THE ROAD TRAFFIC ACT, CHAPTER 276. |                    | 200             | 9                     |

Woodlands Ave 9.

Woodlands ave. 12

Gambas av.

Yushun ave 2.

|   |  |                    |                      |
|---|--|--------------------|----------------------|
| <b>PAYMENT Details</b>  |  | <b>Due Date:</b>   | <b>Total Amount:</b> |
| Payment Reference No. :<br>0021 7101 5473 6113                                      |  | <u>30 Dec 2017</u> | <u>\$200</u>         |
|  |  |                    |                      |

NP 403A

[www.police.gov.sg/pr](http://www.police.gov.sg/pr)

# 目击证人 (当时~~在~~跟在我车后)

- ① accident 现场, 他有停下  
和当时~~在~~赶到的 police  
作下现场目击的 statement,
- ② 他必须记他和单车受伤  
人无任何权益和亲友亲  
属关系。和我也没有因  
生意上的改组和私人恩  
怨的怨恨。
- ③ 如果他没在现场和 police  
作下 statement, 而是事后去  
police station 报案, 那他必  
须有超强的记忆力, 能一条路记。

④ 或是他有任何行车记录仪，  
证明他是确实的目击证人。

---

车主人在 Report 是

~~能(描述)~~  
① 在发生车祸那一刻有没有看到  
我的车牌，还是没有看到。

那么是数字证据。

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**



Licence Number **S1093379Z**

Name  
**KOO AH SIM**

Birth Date **06 Jun 1948**

Issue Date **30 Jul 2011**



001957661K

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1093379Z**



Name  
**KOO AH SIM**

邱亞森

Race  
**CHINESE**

Date of Birth **06-06-1948** Sex **M**

Country of Birth  
**SINGAPORE**

# Driving License

