



## 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	26/12/2017 16:04
Date Of Accident	22/12/2017 14:00
Exact Location Of Accident	PASIR RIS DRIVE 3 TOWARDS PASIR RIS RISE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC6834G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PRIMA SEAL WATERPROOFING PTE LTD
Co Reg No	201531909C
Email Address	HANCARREPAIRS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96796910
Alternative Phone No	OFFICE-96796910

### Vehicle Particulars

Manufacturer	NISSAN
Model	VAN
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCHQ17-006450
Cover Note Number	

### Driver

Name of Driver	ANG TONG YONG
NRIC No	S2553765C
Date Of Birth	16/06/1958
Occupation	OUTDOOR
Date Of Driving Pass	06/11/1978
Driving Experience	39 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96796910
Fax Number	
Contact Number	OTHERS-96796910
Email Address	HANCARREPAIRS@GMAIL.COM



Address	BLK 14B LORONG 7 TOA PAYOH #10-245
Postcode	312014
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20171222/2112

#### Attachment(s)

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

## SKETCH PLAN

VEHICLE NO: GBC6834GDOA: 22/12/2017

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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.

PLEASE NOTE YOUR INSURER MAY HAVE A **14 DAY-TIMEFRAME** FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY.

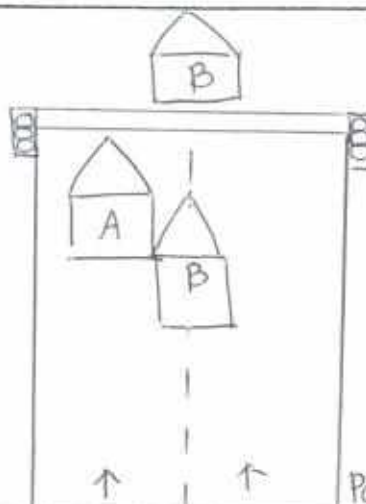


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



Vehicle A: GBC6834G  
Vehicle B: Unknown

Pasir Ris Drive 3

**Describe Circumstances of the Accident**

On 22 Dec 2017 at 2 pm, I stop my van at the traffic junction as the traffic light is red. While waiting for the traffic to turn green; car (B) came and hit onto my car (A) & move off without stopping. On the scene there is a Police Officer and I was told to make a police report and the police officer given me a No. J/20171222/0044.

Vehicle A: GPC 6834G.

Vehicle B: (Unknown)

POLICE REPORT T/20171222/212

**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





# SINGAPORE POLICE FORCE



T/20171222/2112

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

1 of 3

Report No. T/20171222/2112

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/12/2017 17:12		Vide Report No.:		Station Diary No.: 64
<b>Informant's Particulars</b>				
Name of Informant: ANG TONG YONG		Address: APT BLK 14B LORONG 7 TOA PAYOH #10-245 SINGAPORE 312014		
ID Type / ID No.: NRIC NO / S2553765C		Contact No.: Home/Office: Mobile: 96796910		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 59	Date of Birth: 16/06/1958	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Electrician		Driving Licence Information: Class: 3C Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/12/2017 00:00	Type of Location: Straight Road
Location: Along Road 1 PASIR RIS DRIVE 3				
Towards Pasir Ris rise nearby downtown east. Lamp Post Number: 122				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC6834G	Van				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20171222/2112

Police Station Of Origin:

Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

2 of 3

Report No. T/20171222/2112

**CONTINUATION OF REPORT**

**Brief Details.**

On the 22/12/2017 at about 1400hrs, while I was travelling along Pasir Ris Drive 3 towards Pasir Ris Rise in my vehicle (GBC6834G), and I had stopped at the traffic light as it was green. I had stopped on the left lane and the road was a two lane two way. *Test Red*

While I was waiting at the traffic light as it was red, suddenly, a white colored vehicle and hit my car from the right lane and had beaten the red traffic light and did not stop. I was not injured and Police had attended to me, but however, I did not managed to get a correct report number. I then was advised to lodge this report and also for my vehicle's insurance claim.



**SINGAPORE  
POLICE FORCE**



T/20171222/2112

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

3 of 3

Report No. T/20171222/2112

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

D /

Sgt 2 MOHAMAD FARHAN BIN MOHAMED

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt LIM WOON TIONG

Contact No.: 65476418

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

22/12/2017 17:12

Classification Of Case:



Personal Particulars

Date of Accident: 22 / 12 / 2017 (dd/mm/yy)

Time of Accident: 14 : 00 (24 Hrs)

Vehicle No.: GBC 6834G Vehicle Make / Model: Nissan

Exact location of Accident: Basir Ris Drive 3 toward Basir Ris Rise nearby downtown east

Owner's Name / IC No.: Prima Seal waterproofing Pte Ltd / 201531909C

Driver's Name / IC No.: Ang Tong Yong I/c No: S2553765/C

Driver's Contact No.: 96796910 Insurance Company & Policy No.: \_\_\_\_\_

Driver's E-mail address: hancarrepairs@gmail.com

Relationship between Owner & Driver Spouse / Children / Friend / Parents / Others specify: \_\_\_\_\_

What do you wish to claim? (Please circle one only)

(1) Own Insurance / (2) Other Vehicle (The one you want to claim against) / (3) Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private use / Work purpose

Weather condition & Road conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 days or more, police report is required)

Yes / No If Yes, which police station? Queenstown N.P.C.

The Other Party (Vehicle B) Details:

Driver's Name / IC No.: \_\_\_\_\_ Vehicle No.: Unknown

Insurance Company: \_\_\_\_\_ Driver's Contact No: \_\_\_\_\_

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other (Vehicle C) Involved: \_\_\_\_\_

Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred workshop Name (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

\*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2553765C



Name

ANG TONG YONG

洪忠榮

Race

CHINESE

Date of birth

15-05-1958

Sex

M

Country of birth

MALAYSIA

S2553765C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Name

ANG TONG YONG

Birth Date 15 Jun 1958

Issue Date 02 Oct 2003



000884658C

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

PASS DATE

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

06 Nov 1978



Licence No: S2553765C

NP 138A



4851568



NRIC No: S2553765C

Date of issue

24-09-2010

Address

APT BLK 14B LORONG 7 TOA PAYOH  
#10-245  
SINGAPORE 312014



**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**COMMERCIAL VEHICLE PRIVATE (SCH I )  
Comprehensive**

Certificate No.: DMCPHQ17-006450

Form: LCVPI

Excess:

**1. Index Mark and Registration Number of Vehicles**

GC6834G

Section 1 SGD500.00

YEID-AC Additional SGD3,000.00

**2. Name of Policyholder**

PRIMA SEAL WATERPROOFING PTE LTD

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

08/11/2017

**4. Date of Expiry of Insurance**

07/11/2018

**5. Person or Classes of Persons entitled to drive\***

Goods carrying - (MZ300) Authorised Driver. Any of the following :-

1. The Policyholder
2. Any person on the order or with the permission of the Policyholder

\*Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

**6. Limitations as to use\***

1) Use in connection with the Insured's business. 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. 3) Use for social domestic and pleasure purposes.

THE POLICY DOES NOT COVER

1) Use for hire or reward or for racing pace-making reliability trial or speed testing. 2) Use whilst drawing a greater number of trailers in all than is permitted by Law. 3) Use for the carriage of passengers for hire or reward. 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

\*Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I\WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.



Authorised Signatory  
EQ Insurance Company Limited