

## 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	03/01/2018 15:27
Date Of Accident	02/01/2018 23:20
Exact Location Of Accident	JUNC LOYANG AVE & OLD TAMPINES RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GV2087M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HUNGYIJAIME
Co Reg No	53257363C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

### Vehicle Particulars

Manufacturer	LAND ROVER
Model	DEFENDER 90
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5065207502-03
Cover Note Number	

### Driver

Name of Driver	HO HUNG YI
NRIC No	S8503220H
Date Of Birth	19/01/1985
Occupation	INDOOR
Date Of Driving Pass	31/03/2006
Driving Experience	11 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91708293
Fax Number	
Contact Number	OFFICE-91708293
EEmail Address	NOEMAIL

Address	12 FLORA DRIVE #08-13
Postcode	506943
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	COLLISION - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JQS6031 (MOTORCYCLE)
Number of vehicles involved in the accident	2
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 1 PASIR RIS DRIVE 4 , <b>POSTCODE:</b> 519457 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5852999 - <b>FAX NO:</b> 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180103/2079.

#### 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	JQS6031
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

## Accident Sketch Plan

### SKETCH PLAN

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

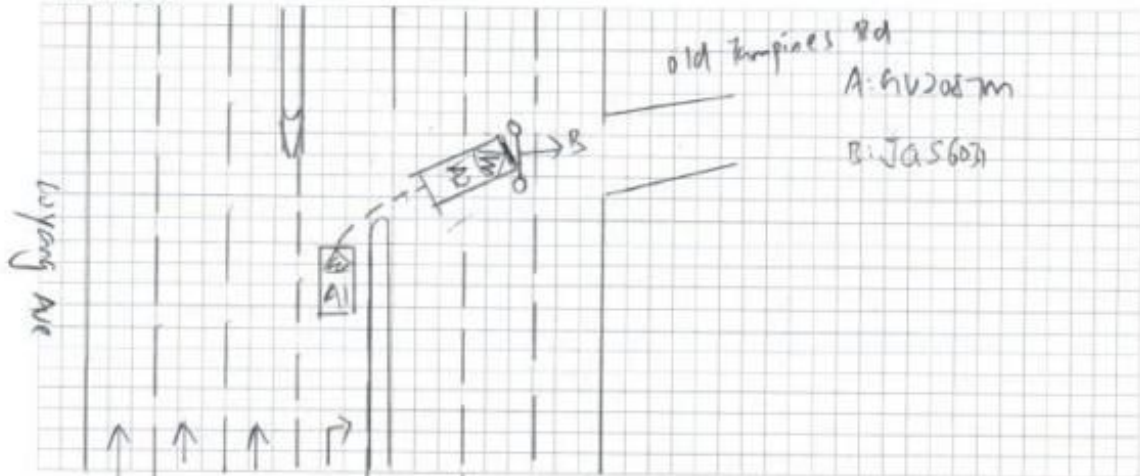
Policyholder's Signature  
Date & Time:

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

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/201802103/2079.

### DECLARATION

I/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:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180103/2079

1 of 3

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5952999

Report No: T/20180103/2079

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/01/2018 14:10		Vide Report No.: G/20180102/0284		Station Diary No.: 86	
<b>Informant's Particulars</b>					
Name of Informant: HO HUNG YI			Address: 12 FLORA DRIVE #08-13 SINGAPORE 506943		
ID Type / ID No.: NRIC NO / S8503220H			Contact No.: Home/Office: Mobile: 91708293		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 32	Date of Birth: 19/01/1985	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: 2B, 2A, 2, 3		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 02/01/2018 23:20	Type of Location: X-Junction
Location: Along Road 1 LOYANG AVENUE  OLD TAMPINES ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GV2087M	Car	LAND ROVER	DEFENDER 90	Grey	Slightly Damaged	1
JQS6031	Motorcycle					0

## Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20180103/2079

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

2 of 3

Report No. T/20180103/2079

### CONTINUATION OF REPORT

Driver			
Name	HO HUNG YI	ID No.	S8503220H
Related Vehicle	GV2087M (Car)	Contact No.	91708293
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 02/01/2018 at about 2320hours, I was driving in my vehicle bearing the registration number, GV2087M (V1) with my wife, who was seated at the front passenger seat. I was driving along Loyang Ave and I wanted to turn right onto Old Tampines Road away Tampines Expressway. I was on the right most lane. I was the first car to stop at the traffic light junction as the traffic light was red in colour.

When the traffic light arrow turned Green, I even waited for a while before moving off. The vehicles from the Tampines towards Loyang Ave also did not move. Suddenly, while I was making the right turn, a motorcycle was suddenly collided head on onto my vehicle. The rider who was alone was thrown towards the Old Tampines Road.

I then stepped out of my vehicle and went to make a check on the rider. I saw that the rider, a Male Chinese, Malaysian was unresponsive and that his legs had broken thus I told my wife to call police for assistance. The rider had ridden a motorcycle bearing the registration number JQS8031 (V2).

The rider was then conveyed to hospital by ambulance. A driver, who was driving a vehicle bearing the registration number SLJ8504R behind me informed that he had in-vehicle camera installed if I require the footage as I do not have any cameras installed and my wife was not paying attention on the road as she was on her phone. The driver is Khairul, contact number: 81000443. The Traffic Police came and they gave me an incident number G/20170102/0284.

The damage to my vehicle is that the whole front bumper was damaged and had dislodged, the radiator, fan and front grille was damaged. Neither me nor my wife is injured.

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20180103/2079

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
619457  
Tel No. 1800-5852899

3 of 3

Report No. T/20180103/2079

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 65474865 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 2 MUHAMMAD ALIF BIN AZALI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/01/2018 14:10

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt YUS MASTARI I KHAZALI

Contact No.: 65476214

Classification Of Case:

Authentication Stamp

NP188



**SINGAPORE  
POLICE FORCE**

SIGNATURE



## INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

## Business Profile (Business) of HUNGYIJAIME (53257363C)

Date: 13/05/2016

## The Following Are The Brief Particulars of:

Name of Business	HUNGYIJAIME
Former Name(s) if any	
Date of Change of Name	
Registration No.	53257363C
Registration Date	24/03/2014
Commencement Date	25/03/2014
Status of Business	Live
Status Date	11/04/2016
Renewal Date	11/04/2016
Expiry Date	24/03/2019
Renewal via GIRO	NO
Constitution of Business	Sole-Proprietor
Principal Place of Business	12 FLORA DRIVE #05-13 FERRARIA PARK CONDOMINIUM SINGAPORE (508943)
Date of Change of Address	23/12/2014

## Principal Activities

Activities (I)	INDUSTRIAL DESIGN ACTIVITIES NEC (74119)
Description	INDUSTRIAL DESIGN
Activities (II)	ART AND GRAPHIC DESIGN SERVICES (74192)
Description	WEB & GRAPHIC DESIGN

## Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment
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## Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position
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Business Profile (Business) of HUNGYIJAIME (53257363C)

Date: 13/05/2016

## Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position
HO HUNG YI	S6503220H	SINGAPORE CITIZEN	12 FLORA Drive #08-13 FERRARIA PARK CONDOMINIUM SINGAPORE (508943)	OSCARS	25/03/2014 Owner

## Withdrawn Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal
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## Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES  
SINGAPORE

RECEIPT NO : ACRA160513101868

DATE : 13/05/2016

This is computer generated. Hence no signature required.

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





**Accident Photo**



Accident Photo



Accident Photo

