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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 witholding 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.

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 ladgement 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

 By the lodgement of this report to the insurers, you hereby constitutions. 	
	ACCIDENT STATEMENT
Date Of Report	12/02/2018 10:02
FIRM CHACHIELL	09/02/2018 20:35
Exact Location Of Accident	JUNCTION OF UPPER CHANGI ROAD/BEDOK ROAD
Country/State of Loss	SINGAPORE
DI CONTROL DI CONTROL DI	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SCA1068H
Insured/Policyholder	
Name Of Registered Owner	WONG KIM CHOONG
NRIC No	S1498303A
Email Address	DECEMBERFATE@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96278263
Alternative Phone No	OTHERS-87999223
Vehicle Particulars	
Manufacturer	TOYOTA
Model	RX 350 MOONROOF-3.5 (A)
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3034401700
7 (2008) S. MONO WEST MAN (100 M	K.

Cover Note Number

Driver Name of Driver

NRIC No

Date Of Birth Occupation Date Of Driving Pass

Driving Experience Gender

Mobile Number Fax Number

Contact Number EMail Address

SHAWN WONG ZHI JIE

S9637213B 10/11/1996 INDOOR 05/09/2016

1 YEAR AND 5 MONTHS

MALE

(LOCAL) +65-96278263

OTHERS-87999223

DECEMBERFATE@HOTMAIL.COM

Address

BLK 895A TAMPINES STREET 81

#04-918

Postcode

521895

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

CHILDREN

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?

Number of vehicles involved in the accident

1

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

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)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TAMPINES NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-5871999 - FAX NO: 65871699

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180209/2211(COLLISION TYPE IS HEAD TO SIDE)

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

SJF4392S

Vehicle Make/Model/Colour

Details Of Properties

HONDA STREAM

Vehicle Category

Name of Driver

PRIVATE CAR EDWARD CHNG

NRIC/Passport Number

Contact Number

83336223

Address

Postcode

Insurance Company Name

Nature Of Damage

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 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 ladgment 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)
 - (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

am

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Shan

Date & Time:

titatilit isetekitanboon VI

Date & Time:





T/20180209/2211

1 of 3

Report No. T/20180209/2211

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

REPORT OF	A TRAFFIC	ACCIDENT	9F	
	Date/Time Report Made: 09/02/2018 23:15		Vide Report No.:	Station Diary No.: 147
Informan	t's Particu	lars		
	Informant: WONG ZH	I JIE ·	Address: APT BLK 895A TAMPINES S 521895	TREET 81 #04-918 SINGAPORE
ID Type /	ID No.: / S963721	13B	Contact No.: Home/Office:	Mobile: 87999223
Nationalit	ty: ORE CITIZ	EN -	Email:	
Sex:	Age:	Date of Birth: 10/10/1996	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: National Service Full Time		II Time	Driving Licence Information: Class: 3	Date of Expiry:

General Inform	ation of the Accident				
Type of Accident: Non-Injury Government Property		Drink Drive: No	Date/Time of Accident: 09/02/2018 20:35	Type of Location: X-Junction	
Location: Junction of Roa UPPER CHAN BEDOK ROAD		- T			
Weather: Clear		oad Surface: ry		Road Speed Limit:	
Traffic Flow: Dual Carriage	MARKET 194	raffic Control: raffic Light - Wo		Traffic Volume: Light	
Type of Collisio				Anyone conveyed by ambulance: No	

Details of V Vehicle No.	10 SHOP	Make	Model	Color	Condition	No of Passenger
SCA1068H	Car	TOYOTA	RX350	Black	*	0
SJF4392S	Car	HONDA	Stream	Silver	1	1 .

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





T/20180209/2211

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

2 of 3

Report No. T/20180209/2211

Driver				14 13	*1278***********************************
Name	SHAWN WONG ZHI JIE		ID No.	17	S9637213B
Related Vehicle	SCA1068H (Car)	CA1068H (Car) Contact No		ct No.	87999223
Hospital/Clinic	NIL ·		Class Driving Licent Expiry	9 e &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days gran			of Injury NIL		
Driver	THE RESERVE THE PROPERTY OF THE	The state of	etse William	100	Simhadea Shibar
Name	EDWARD CHNG		ID No.		NIL
Related Vehicle	SJF4392S (Car)		Conta	ct No.	83336223
Hospital/Clinic	NIL		Class Driving Licens Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days gran	Degree of	f Injury	NIL		

Brief Details.

On 09/02/2018 at about 2036hrs, I was driving my father's vehicle SCA1068H along Upper Changi Read. The direction is from Tanah Merah MRT station toward the direction of Bedok Road. There are 4 lanes and I was driving on the second lane from the left. My intention was to proceed straight past Bedok Road. While I was at the junction of Upper Changi Road and Bedok Road, the traffic light was green to my favor. When I was driving past the junction, a vehicle SJF4392S suddenly appeared in front of me from the right. I was unable to stop the vehicle in time. The other vehicle mounted a pavement nearby and collided against a post for a zebra crossing.

I spoke to the driver and eventually police came to scene. Police have spoke to the both of us and to my knowledge, the driver was making a right turn from a non-right turn lane from Upper Changi Road towards Bedok Road from the opposite direction of me. To my understanding the road from the opposite direction has some construction going on, thus traffic was diverted in a way of which the lane which the other was driving on is a non-right turn lane.

No one was injured from the accident. We were advised by the traffic police to lodge a police report about the accident.





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682

3 of 3 Report No. T/20180209/2211

Tel No: 1800-5871999

CONTINUATION OF REPORT

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Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: G / Staff Sgt LOO JIA JIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 09/02/2018 23:15
Officer In Charge Of Case: TRANSITATION SIEU LUI Contact No.: 65476151	Classification Of Case:

10 Sin Ming Drive Singapore 575701 Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

20 Apr 2017

Our ref 2004170203N057002454

WONG KUM CHOONG APT BLK 895A TAMPINES STREET 81 #04-918 SINGAPORE 521895

Dear Sir/Madam

NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO. SLM1923U WITH VEHICLE REGISTRATION NO. SCA1068H

You may be pleased to know that your application of 20 Apr 2017 for replacement of registration number is approved.

2. The details of the vehicle after the transaction are as follows:

Vehicle Registration No. : SCA1068H (Previously SLM1923U)

Vehicle Make : TOYOTA

Vehicle Model : RX 350 MOONROOF

Chassis No. : JTJBK11A602407290

Engine No./ Motor No. : 2GRJ072062 / -

- 3. Please change the number plates on your existing vehicle (ie. Chassis No. JTJBK11A602407290, Engine No./ Motor No.: 2GRJ072062 / -) to display the new/ replacement registration number, SCA1068H by 23 Apr 2017. It is an offence to keep or use a vehicle without displaying the correct vehicle registration number assigned. The penalty for first offence is a fine not more than \$1,000 or imprisonment of not more than 3 months. For second or subsequent offence, the fine is not more than \$2,000 or imprisonment of not more than 6 months.
- 4. Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any questions. You can either quote the Business Transaction Reference No. 20170420120239583436 or the vehicle registration number when making your enquiry.

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: Q9-62. 2018 TIME: 20: 45hr & (hh:mm) 24 hrs Format
LOCATION X-DANG OF UPP CHANGE RO & BEROF RO	
A COMMENT OF THE COME	
VEHICLE NUMBER SCA LOG 8.H	
INSURED NAME YOU'S KIM CHOOKS	
NRIC/FIN 8 1498 2034 CONTACT: Q62+ 9	1263
MAKE TOUGH RX 350 MODEL MODEL MODEL	
Are you claiming under your own insurance policy for repair to your vehicle?	
() Yes, If No, Pls Select: (V) Third Party () Reporting Only	-
INSURANCE COMPANY CAINO	
TYPE OF POLICY (V) COMPREHENSIVE () THIRD PARTY () TPFT	
POLICY NUMBER: DM PCSN 30544DITOO	
100 114 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
NAME DRIVER: Shawn Work & DI Te () SAME A	AS INSURED
3	0.00
NRIC/FIN 59631215B CONTACT: 8799	9275
DATE OF BIRTH: 10-10. 1996	
DRIVING PASS DATE: 05.09.2016	
OCCUPATION: (V) INDOOR () OUTDOOR	
GENDER: (✓) MALE () FEMALE	
EMAIL ADDRESS: december fate Chotmail.com) NO EMAIL
ADDRESS OF DRIVER: 845A Tampines St 81 x 04-918 5(52)890	i)
Number Of Passenger Include Driver: Wirth ON	
Was driver an employee of the Insured's Company? () YES (V) NO	
If No, Relationship Of The Driver With The Insured	
() Owner () Spouse () Friend () Relative () Children () Sibling	() Others
Does The Driver Own Any Other Vehicle? : () YES () NO	
If Yes, Vchicle Registration Number Of Driver's Own Vehicle:	
Insurance Company Of Driver's Own Vehicle	
Weather Conditions: (V) Clear () Raining () Drizzling () Other	ers
Road Surface : (\ /) Dry () Wet () Others	***
Was Any Foreign Vehicle Involved In This Accident? () YES () NO	
Was Anybody Injured In The Accident? (V) YES () NO	
If YES, Injured details: (Nock Back Vain)	
Tres, injured details:	
Convey By Ambulance: () YES () NO	
Was There Any Video Capture By Car Camera? () YES (√) NO	ı Police Report
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attack	ı Police Report
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any)	Police Report
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any) Details Of 3rd Party Name / NRIC Co	
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any) Details Of 3rd Party Name / NRIC Co Veh B SJP 44 928 (AG)	
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B SJP 44 928 (A 6) Veh C	
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any) Details Of 3rd Party Name / NRIC Co Veh B SJP 42 928 (AS) Veh C Veh D	
Was There Any Video Capture By Car Camera? () YES (V) NO Was There Accident Reported To The Police? (V) YES () NO If Yes Attacl Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B SJP 44 928 (AG) Veh C	

REPUBLIC OF SINEVALIDATE ORIVING LIDENGE



License Number: S 9 6 3 7 2 1 3 B

SHAWN WONG ZHI JIE

Brow Date 10 Oct 1995 takes Date 05 Nov 2016





SINGAPORE ARMED FORCES

IDENTITY CARD

Training

SHAWN WONG ZHI JIE



1,000 No S9837213B

this card in the property of the Singapore Armed Sorrey. Any proprint stodig this send in respected to finished.

If without which is Cachel Stangerier base or any Pulse Station.

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

EFFECTIVE DATE

Class 3 Motor cats with unladen weight =< 3000kg with =< 7 05 Sep 2016 persongers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

SEMESTO REPUISE PRINCIPE

00000050279054

139C No./ Colour 59637213B7 PINK

CHINESE DAY OF BOD

Ellinoid Group A (+) Country Of Einth 54

10/10/1996 Stroke Scalue SINGAPORE Milary Ram Status ENLISTEE

NSF Address

Bix 895A TAMPINES STREET 01 #04-816 SINGAPORE 521895

Licence No:596372138

NP 478A

REPUBLIC OF SINGAPORE IDENTIFY CARD NO. \$1498303A



WONG KUM CHOONG

CHIBE SE BIRCVADUE 55-04-1001 4

VI ELECTION TANDESSEE THE SET OF THE PARTY SERVICES OF THE PARTY S

Date: No. 26351427



中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MX18 10 S10 AN0621A COMPREHENSIVE AUTOSAPE

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Melaysia)

CERTIFICATE No.

1. Index Mark and Registration Number of Vehicle

DMPCSN3034401700

Engine No : 2GRJ072062

Chassis No: JTJBK11A602407290

2. Name of Policy Holder

MR WONG KUM CHOONG

 Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

19 APRIL 2017 (11:59 HOURS) 18 APRIL 2018

SLM1923U

IN ADDITION TO NAMED DRIVERS EX:

4. Date of Explry of Insurance

5. Persons or Classes of Persons entitled to drive *

. AGE AS AT DATE OF ACCIDENT

(A) THE POLICYHOLDER.

(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

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 SO 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.

6. Limitations as to use: "

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACK-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT)

ONE TIME WAIVER OF EXCESS FOR THE FIRST \$\$1,000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH FOLICY YEAR.

HIRE PURCHASE CO. : HONG LEONG FINANCE LTD AS HP OWNER

* 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, 1997 (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). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Authorised Officer

Authorised Signatory

PARF/COE Rebate Enquiry

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

8303A

Vehicle Details

Vehicle No.:

SCA1068H

Vehicle to be Exported:

No

Intended De-registration

28 Feb 2018

Date:

Vehicle Make:

TOYOTA

Vehicle Model:

RX 350 MOONROOF

Primary Colour:

Black

Manufacturing Year:

2009

Engine No.:

2GRJ072062

Chassis No.:

JTJBK11A602407290

Maximum Power Output:

204.0 kW (273 bhp)

Open Market Value:

\$54,807.00

Original Registration Date:

27 Apr 2009

First Registration Date:

27 Apr 2009

Transfer Count:

1

Actual ARF Paid:

\$54,807,00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry

26 Apr 2019

Date

PARF Rebate Amount:

\$30,143.00

Intended COE Rebate Details

COE Expiry Date:

26 Apr 2019

COE Category:

B - Car (1601cc & above)

COE Period(Years):

10

QP Paid:

\$5,101.00

COE Rebate Amount:

\$589.00

Total Rebate Amount:

\$30,732.00

The information contained herein is correct as at 10 Feb 2018