

## 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 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	05/02/2018 10:25
Date Of Accident	03/02/2018 20:35
Exact Location Of Accident	PIE(CHANGI) NEAR EXIT 11
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC9663G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WONG KOK WEI
NRIC No	S1482035C
Email Address	JOEWJX1998@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93825857
Alternative Phone No	OTHERS-88004005

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200-1.8 (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096149455
Cover Note Number	07/12/2017 - 06/12/2018

### Driver

Name of Driver	WONG JUN XIANG JOSEPH
NRIC No	S9819893H
Date Of Birth	10/05/1998
Occupation	INDOOR
Date Of Driving Pass	27/10/2017
Driving Experience	0 YEAR AND 3 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-88004005
Fax Number	
Contact Number	
EMail Address	JOEWJX1998@GMAIL.COM

Address	1037 SERANGOON ROAD #10-05
Postcode	328170
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	COLLISION - HEAD TO REAR
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)	2

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 50 SERANGOON AVE 2 #01-02 , <b>POSTCODE:</b> 556129 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4880999 - <b>FAX NO:</b> 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

MY VEHICLE WAS TRAVELLING ON THE RIGHT LANE OF PIE(CHANGI) NEAR EXIT 11. TRAFFIC WAS HEAVY. VEHICLES IN FRONT OF ME STOPPED. I STOPPED IN TIME AND SUDDENLY I FELT AN IMPACT ON MY VEHICLE REAR PORTION. VEHICLE B HAD HIT ONTO MY VEHICLE REAR BUMPER. NO ONE WAS INJURED. TO ATTACH POLICE REPORT (T/20180205/2057)

#### 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	SLG2998D
Vehicle Make/Model/Colour	HONDA
Details Of Properties	FRONT BUMPER
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Vehicle No:

Report Date: 2/5/2018 Start Time: 10:36 AM

Report No: MT/

D.O.A:

Make : Model:

Reporting Type:

End Time:

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation 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 reasonable required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, law or court orders.

2/5/2018 10:36

2/5/2018 10:36

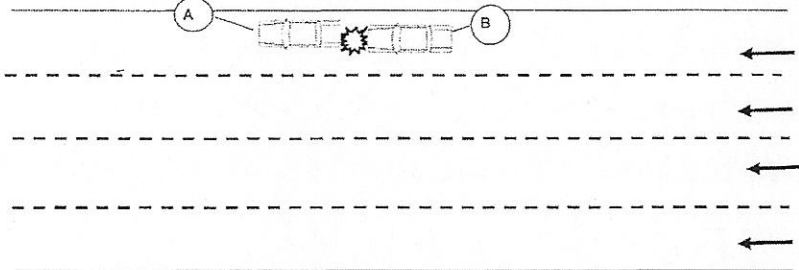
Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: Chen JunLiang  
NRIC/ Fin No: S990765

# Sketch Plan Pg. 2

## SKETCH PLAN



**PIE(CHANGI) NEAR EXIT 11**

Vehicle A: SKC9663G	Vehicle B: SLG2998D	
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## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MY VEHICLE WAS TRAVELLING ON THE RIGHT LANE OF PIE(CHANGI) NEAR EXIT 11. TRAFFIC WAS HEAVY. VEHICLES IN FRONT OF ME STOPPED. I STOPPED IN TIME AND SUDDENLY I FELT AN IMPACT ON MY VEHICLE REAR PORTION. VEHICLE B HAD HIT ONTO MY VEHICLE REAR BUMPER. NO ONE WAS INJURED.

## DECLARATION

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

2/5/2018 10:36

Policyholder's Signature  
Date & Time:

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

2/5/2018 10:36

Reporting Centre/Personnel's Signature  
Name: Chen JunLiang  
NRIC/Fin No: S990765



# SINGAPORE POLICE FORCE



T/20180205/2057

1 of 3

Report No. T/20180205/2057

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/02/2018 12:16	Vide Report No.:	Station Diary No.: 36
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**Informant's Particulars**

Name of Informant: WONG JUN XIANG JOSEPH			Address: 1037 SERANGOON ROAD #10-05 SINGAPORE 328170		
ID Type / ID No.: NRIC NO / S9819893H			Contact No.: Home/Office: Mobile: 88004005		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 19	Date of Birth: 10/05/1998	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: STUDENT OF Ngee ANN POLY			Driving Licence Information: Class: 3A Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/02/2018 20:35	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY  PIE (CHANGI) NEAR EXIT 11				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		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
SKC9663G	Car				Slightly Damaged	1
SLG2998D	Car				Slightly Damaged	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20180205/2057

2 of 3

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

Report No: T/20180205/2057



**CONTINUATION OF REPORT**

<b>Driver 1</b>				
Name	WONG JUN XIANG JOSEPH		ID No.	S9819893H
Related Vehicle	SKC9663G (Car)		Contact No.	88004005
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
<b>Driver 2</b>				
Name	Unknown		ID No.	NIL
Related Vehicle	SLG2998D (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

**Brief Details.**

On 03/02/2018 at about 2035hrs, I was driving my car (SKC9663G) along PIE(CHANGI near exit 11) on the first lane. The traffic on the road was heavy and the vehicles in front of me stopped and I also came to a stop. Out of a sudden, there was an impact from my rear and a car hit onto my car rear bumper. I did not come out of the car to make a check as the traffic was heavy and I do not wish to cause a traffic jam further.

Subsequently, I drove out to the next exit of the expressway and I was expecting the other party who hit onto my car to follow however he did not but I did take note of his vehicle registration number (SLG2998D). I had then make a check on my car and my rear bumper sustained crack and damages. No one was injured during the accident. I had already lodge a report with my insurance and I was advised by them to lodge a traffic police report.

	SN 154
Signature: 	
Singapore Police Force	





SINGAPORE  
POLICE FORCE



T/20180205/2057

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

3 of 3

Report No. T/20180205/2057

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:

F /  
Sgt 3 GALVIN TAN GUAN YU

Signature Of Interpreter:

Not applicable

Signature Of Informant:

Date/Time:

05/02/2018 12:16

Officer In Charge Of Case:

TP / HRT /  
SI KALESWARI PALANI  
Contact No : 65476902

SN 154

Authentication Stamp

NP168  
Singapore Police Force

Classification Of Case:

GEN. AN7 6547-0000

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MN1718017266 Vehicle Registration No : SKC9663G  
Name (as shown in NRIC) : Wong Jun Xiang Joseph NRIC/FIN/Passport No : S9819893H  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : 1037 Serangoon Rd #10-05 Singapore 328170  
Contact (Tel) : — Mobile No. : 88004005  
Email Address : —  
Date of Accident : 3/2/18 Time of Accident : 20:35h  
Place of Accident : PIC Changi 1) Near Exit 11  
Insurance Company : Nine Town

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

(A) To attach Police Report (T/20180205/2057)

Policyholder / Driver's Signature  
Date: 3/2/18

Reporting Centre Personnel's Signature  
Name: Chen Jun Liang (S990765)  
NRIC/FIN No.:  
Date: 3/2/18  
Customer Care Executive  
Motor Service Centre

**Certificate of Insurance**

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5096149455

**Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SKC9663G**  
Chassis Number : WDB2110412B028377
2. Name of Policyholder : **WONG KOK WEI**
3. Effective Date of Insurance : **07 Dec 2017**
4. Expiry Date of Insurance : **06 Dec 2018**
5. Persons or Classes of Persons entitled to drive#
  - (a) The Policyholder.
  - (b) Any other person who is driving on the Policyholder's order or with his/her 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#
  - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: YES
PRIMARY DRIVER	: WONG KOK WEI GERALD
NAMED DRIVER (1)	: JOSEPH WONG JUN XIANG
NAMED DRIVER (2)	: BENJAMIN WONG JUN HAO
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

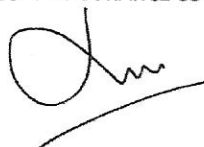
Agency : LIAN HONG PTE LTD (00000611606)

Date of Issue : 28 Nov 2017 09:18 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED







Countersigned By:

Authorised Officer

Chief Executive