

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	01/03/2018 13:48
Date Of Accident	28/02/2018 18:20
Exact Location Of Accident	JCT OF BUKIT PURMEI AND TELOK BLANGAH WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB2514T
Insured/Policyholder	
Name Of Registered Owner	THNG HENG GUAN
NRIC No	S1287572Z
Email Address	ROGERTHNG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96853063
Alternative Phone No	OFFICE-96853063

Vehicle Particulars

Manufacturer	NISSAN
Model	NOTE 1.2
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10727584
Cover Note Number	

Driver

Name of Driver	THNG HENG GUAN
NRIC No	S1287572Z
Date Of Birth	24/02/1958
Occupation	INDOOR
Date Of Driving Pass	28/11/1979
Driving Experience	38 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96853063
Fax Number	
Contact Number	OFFICE-96853063
Email Address	ROGERTHNG@GMAIL.COM

Address	31 ALEXANDRA ROAD #03-02 SINGAPORE 159967
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS DRIVING ALONG LOWER DELTA RD TOWARDS TELOK BLANGAH AREA AND I WAS DRIVING AT THE SECOND LANE. WHEN IM ABOUT TO REACH THE CROSS JUNCTION BETWEEN BUKIT PURMEI AND TELOK BLANGAH, TRAFFIC LIGHT SHOWS RED SO I SLOW DOWN AND STOP MY VEHICLE STATIONARY. AFTER FEW SECOND, SUDDENLY I FELT A BIG IMPACT FROM REAR SO I DECIDED TO CAME DOWN AND CHECK. VEHICLE B COLLIDED ONTO MY REAR PORTION AND THE DRIVER TOLD ME HE WAS TEXTING WITH HIS PHONE AND FORGET TO APPLIED HAND BRAKED. WE TOOK PHOTO ON THE SPOT AND EXCHANGED PARTICULRAS. NO INJURIES INVOLVED. PLEASE REFER TO THE VIDEO FOOTAGE.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PENDING VIDEO FROM INSURED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC8182A
Vehicle Make/Model/Colour	ISUZU/LT134P/WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIU ZHONG AO
NRIC/Passport Number	G5032289R
Contact Number	96273665
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 1

ACCIDENT STATEMENT (2000 characters)

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Taxi Voucher No.:

Are you claiming your own insurance policy for the repair of your vehicle?

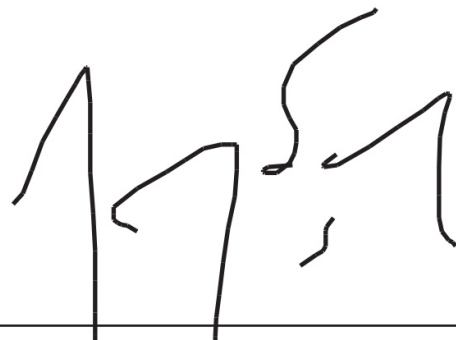
No, Claim 3rd party

DECLARATION

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

VERIFIED BY AJAX MARS REPORTING OFFICER -
NG CHIN CHUN

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

1 March 2018 at 11:33 AM

Date/Time:

1 March 2018 at 11:33 AM

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1287572Z



Name
THNG HENG GUAN
湯 興 源

Race
CHINESE

Date of birth
24-02-1958

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number **S1287572Z**

Name
THNG HENG GUAN

Birth Date: **24 Feb 1958**
Issue Date: **02 Sep 2003**



050 755 755

Identification Card

