



## 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	10/03/2018 10:35
Date Of Accident	09/03/2018 19:20
Exact Location Of Accident	UPPER BUKIT TIMAH RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK454H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	J-STEVE ENTERPRISE
Co Reg No	53366533K
Email Address	STEPHENCHUCS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82286617
Alternative Phone No	OFFICE-82286617

### Vehicle Particulars

Manufacturer	KIA
Model	CERATO
Exact Purpose for which vehicle was being used at time of accident	GRAB
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	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5092649070
Cover Note Number	

### Driver

Name of Driver	CHU CHERH SING
NRIC No	S1231878B
Date Of Birth	23/01/1957
Occupation	OUTDOOR
Date Of Driving Pass	24/12/1980
Driving Experience	37 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82286617
Fax Number	
Contact Number	
E-Mail Address	STEPHENCHUCS@GMAIL.COM

Address BLK 334 UBI AVE 1  
#02-81

Postcode 400334

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 - U-TURN

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) 3

Passenger 1 NAME: : UNKNOWN  
GENDER: : FEMALE

Passenger 2 NAME: : UNKNOWN  
GENDER: : FEMALE

### 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 MAKING A U-TURN AT UPP BUKIT TIMAH ROAD, WHILE MAKING A TURN INSIDE THE YELLOW BOX AND THE TRAFFIC LIGHT AHEAD CHANGE TO GREEN AND INFRT VEH START TO MOVE OFF, SUDDENLY VEH B(SMRT BUS) CAME AND HIT ONTO MY FRONT LEFT SIDE PORTION OF MY VEH.

### 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 SMB1515K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## 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.

J-STEVE ENTERPRISE

\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

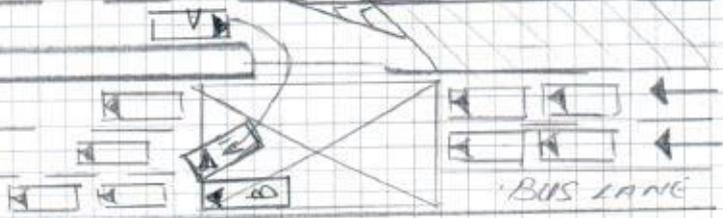
  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 10/03/18  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN

UAPP BUKIT TIMAH RD

BUS LANE



BUS STOP

A - SGK 454H  
B - SMB 1515K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

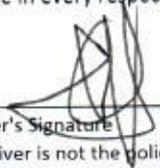
*Pls refer to the statement.*

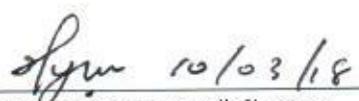
DECLARATION

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

J-STEVE ENTERPRISE

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.:

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



License Number: **S1231878B**

Name: **CHU CHERH SING**

Birth Date: **23 Jan 1957**

Issue Date: **24 Nov 2003**

001016085H



**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1231878B**



Name: **CHU CHERH SING**

**朱志新**

Race: **CHINESE**

Date of Birth: **23-01-1957** Sex: **M**

Country of Birth: **SINGAPORE**

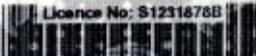



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

	PASS DATE
<b>Class 3</b> Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	24 Dec 1980
<b>Class 4</b> Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	31 Aug 1981
<b>Class 5</b> Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	13 Mar 1982

NP 422A

Licence No: **S1231878B**



2646731



NRIC No: **S1231878B**



Blood Group: **O\*** Date of Issue: **13-06-1996**

Address: **APT BLK 334 UBI AVENUE 1 #02-801 SINGAPORE 400334**

NRIC No: **S1231878B** Date: **01/12/2007** No: **583169**

# ACCIDENT STATEMENT

ACCIDENT DATE: 9, 3, 2018 (DD/MM/YYYY), TIME: 19:20 (HH:MM)

LOCATION: Upper Bukit Timah

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: S6K 454H
- b) INSURANCE COMPANY: NTUC
- c) POLICY NUMBER: 5092649070
- d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY) THIRD PARTY FIRE & THEFT
- e) MAKE & MODEL: Kia Cerato 2006
- f) TYPE: (SALOON) COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
- g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL) / MOTORCYCLE
- h) PURPOSE OF USING AT ACCIDENT TIME: Grab
- i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: J-Steve Entaymist (MALE / FEMALE)
- b) NRIC/FIN/PASSPORT: S1231878B CONTACT: \_\_\_\_\_
- c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Chu cherk Sing (MALE) FEMALE)
- b) NRIC/FIN/PASSPORT: S1231878B CONTACT: \_\_\_\_\_
- c) ADDRESS: #02-801 Ubi Ave 1  
Serve 400334
- \*d) DATE OF BIRTH: (23/01/1957) (DD/MM/YYYY)
- e) OCCUPATION: (INDOOR / OUTDOOR)
- f) YEARS OF DRIVING EXPERIENCE: 30

- 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner
- 5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
- b) ROAD SURFACE: (DRY / WET / OTHERS)
- 6. WAS ANYBODY INJURED (YES / NO)
- 7. a) REPORTED TO POLICE (YES / NO)  
IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMB1515K MODEL: \_\_\_\_\_
- b) DRIVER'S NAME: \_\_\_\_\_
- c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_
- e) DRIVER'S NAME: \_\_\_\_\_
- f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\*No of passenger  
(including driver)  
(3)

2 - FEMALE

\*No of passenger  
(including driver)  
( )

\*No of passenger  
(including driver)  
( )

email =

fax =

Hello, NAC\_PAYA\_UBI\_800601

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[My Desktop](#)  
[Notice of Loss](#)

**Policy Query**

Policy No.  Date of Accident   
Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5092649070	J-STEVE ENTERPRISE	53366533K	GPC	Third Party	SGK454H	SGK454H	14/07/2017	26/07/2018

**Claim Handling**

**Accident MT/0985497**

Policy No.	5092649070	Vehicle No.	SGK454H	GST Registration No.	
Policyholder Name	J-STEVE ENTERPRISE	Cover Type	Third Party	Policyholder NRIC	53366533K
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	82286617	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes

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Report Date	10/03/2018 11:10	Accident Report Within 24 hrs	Yes	Accident Type	Collision - U-Turn
Date of Accident	09/03/2018	Time of Accident hh:mm	19:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	UPPER BUKIT TIMAH RD				

**Benefits**

**Excess**

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

**GST Registered Information**

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

**Policyholder Mailing Address**

Address 1	37A HONGKONG STREET	Address 2	SINGAPORE 059676	Address 3	
Address 4		Address Type	Singapore address	Post Code	059676
Unit No.		Related Policy Number	5092649070		

**O1 Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	23/01/1957
Unnamed driver Name	CHU CHERH SING	Driver NRIC	S1231878B	Driving Experience	37
Register Date of Driver License	24/12/1980	Driver Age	61	Contact No.(Home)	0
Contact No.(Mobile)	82286617	Contact No.(Office)	0	Address 3	SINGAPORE 400334
Address 1	BLK 334	Address 2	UBI AVENUE 1	Post Code	400334
Address 4		Address Type	Singapore address		
Unit No.	#02-81			Driver Insurer Company	
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.			

**Declaration**

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

**Claim 001 OD-MX** New

Claim Type *	OD-MX	Insured Name	J-STEVE ENTERPRISE	Insured NRIC	53366533K
Contact No.(Mobile)	82286617	Contact No.(Home)	67421340	Contact No.(Office)	NIL
Email Address		O1 Vehicle Number	SGK454H	TP Vehicle Number	SMB1515K
Claim Description	SGK454H / SMB1515K ON 9 Mar 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	10/03/2018 11:21	Claim Close Date		Date Received	10/03/2018 00:00
Report Taken By	ROSINDA	Workshop Repairer		Total Loss but Repaired	

Print AK letter

**Attachment**

Accident No.	MT/0985497	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	10/03/2018 00:00

Path \*

Choose File	No file chosen	Category *	Confidential	Urgency *	Descr
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:17	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:17	SAS	Normal	SAS 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:17	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:17	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:16	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Mar 2018 11:15	Photos	Normal	Photos 2018-3-10

Video List

Uploaded By/Date	Folder Date	File Name	Source
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>			