SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

EMail Address

Fax Number
Contact Number

- 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 <u>truthful and accurate</u> 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.
- 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	12/03/2018 18:28
Date Of Accident	24/02/2018 11:30
Exact Location Of Accident	ROUND ABOUT AT MT ELIZABETH HOSPITAL @ NOVENA
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJN665P
Insured/Policyholder	
Name Of Registered Owner	ONG EE PING
NRIC No	S6944441E
Email Address	EPONG.SG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90170829
Alternative Phone No	OTHERS-98267318
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	ALLION-1.5 (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	REPORTING ONLY
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	5034559615-09
Cover Note Number	
Driver	
Name of Driver	SIA SUE TENG
NRIC No	S7174380B
Date Of Birth	17/11/1971
Occupation	INDOOR
Date Of Driving Pass	17/03/2000
Driving Experience	17 YEARS AND 11 MONTHS
Gender	FEMALE
Male II a Niconale a se	(1.0041.) (05.00470000

(LOCAL) +65-90170829

EPONG.SG@GMAIL.COM

OTHERS-98267318

Address 150 THOMSON ROAD

#17-03

Postcode 307605

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle Vegistration Number of Briver's Own

.

Insurance Company of Driver's Own Vehicle

_

General Information of the Accident

Type Of Accident NO COLLISION

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?

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

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

NO

Vehicle Registration Number

SHB3199K

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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.
- 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.
- 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.
- 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.
- 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:
 - 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;
 - 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 Signature

12/3/2018 4 44 01

Driver's Signature

(If driver is not the policyholder)

Date & Time:

12/3/2018 4.45 pm

Reporting Centre Personnel gignature

NRIC/FIN No.:

Accident Sketch Plan

ETCH PLAN		
	Ruful A	To phons maelt
SCRIBE CIRCUMSTANCES OF	THE ACCIDENT	
		what
		Maller
		CVK L
)
	1/0	
	Chil	
	A Krai	
	4	
1	> /	
/ (2)		
CLARATION We declare the foregoing particul	irs are true in every respect.	
alges-	00.08	al 12/03/2018
icyholder's Signature te & Time: 12/3/2018 4-45pm	Oriver's Signature (If driver is not the policyholder) Date & Time: 12/3/2018 4-45pm	Name: NRIC/FIN No.: DELL WHITES

9 March 2018 150 Thomson Road, #17-03, Singapore 307605

Your Ref: MT/CA/TP/059/0984208-001/OSK/VU

Claim Number: MT/0984208-001

Accident involving SJN665P / SHB3199K on 24 Feb 2018.

I refer to your letter dated 1 March 2018 but which I only received on 9 March 2018.

I would like to inform you that as there was no accident on 9 March 2018 (since there was no physical impact and no damage to both our vehicles SJN665P and SHB3199K), as such I had not made any accident report since there was really no "accident" to report given that there is no accident involved (contrary to what was claimed). I was surprised that there is now a claim against my motor policy and hence I would appreciate very much if NTUC Income can rigorously investigate and deal with such frivolous opportunistic claim!

Details of the said incident (not accident) with the taxi SHB3199K is as follows (as provided by my spouse):

On 24 Feb 2018 about 11.30am, my spouse was driving alone on the middle lane of the round-about at Mt Elizabeth Hospital @Novena and trying to switch to the right-most lane (due to obstruction by vehicles further in front) when a taxi (said vehicle SHB3199K) on the right-most lane suddenly performed an emergency brake. So, my wife was forced to perform an emergency brake as well. As my wife had kept her safety distance, so she was able to brake in time, and there was no impact of our vehicle on the vehicle (SHB3199K) in front as she managed to stop within an inch away from vehicle SHB3199K.

The afore-mentioned right-most lane of the round-about was where the van GBC1038X was driving on in the photo (see Photo 1) while Photo 2 shows the exact location of the said incident at earlier section of the round-about. (Note that these photos were taken later after both our vehicles had been shifted away on the instruction of the security guard to prevent obstruction of traffic as there were many vehicles taking the right-most lane of the round-about to exit Mt Elizabeth Hospital @Novena).

2003/2018 Rosli worters



Photo 1



Photo 2

Despite of this, the taxi driver (of vehicle SHB3199K) immediately alight his vehicle and confronted my spouse claiming that she had banged into his vehicle and demanded \$500 for private settlement which he claimed was the amount needed to repair and make good his vehicle.

So, my spouse made an inspection of both vehicles and took some photos on the sport to record as evidence, which you can see in Photo 3-6 below. From the physical evidence, there was no physical damage nor dent to both our vehicles at that point in time, and while there was minor scratches on vehicle SHB3199K, these scratches look old and does not seem to be caused by my vehicle. In fact, the taxi SHB3199K looks old and has many scratches and blemishes all around the vehicle. My own vehicle is also full of scratches and blemishes all

around the car as well, given that it is already more than 9 years old (and it does not make sense for me to spend money to paint up these minor scratches and blemishes all around the car; and I believe it is the same reason for the other vehicle SHB3199K as well).

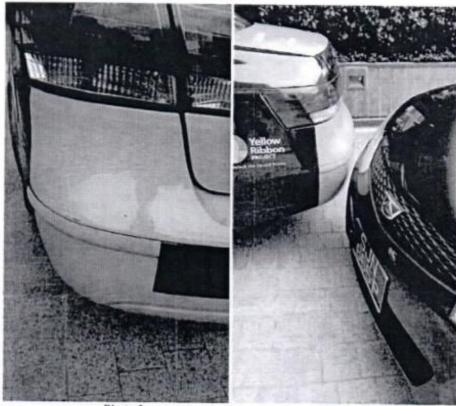
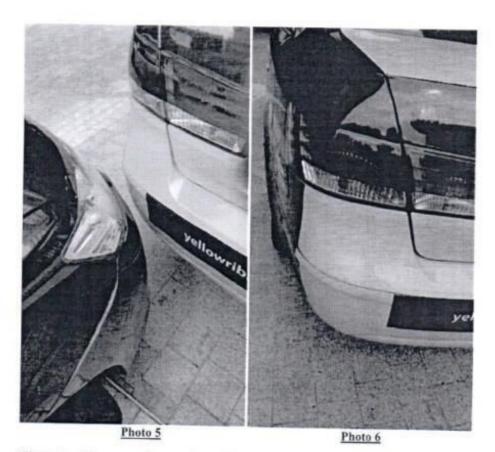


Photo 3

Photo 4

AN 18/03/2018
ROSZI WATJAB



Given the evidence as above, and considering that there was no impact and no physical damage and no physical dent to both vehicles, my wife declined to pay any compensation to the taxi driver. The taxi driver threatened that he would proceed to claim against my spouse for the "accident" he claimed.

After returning home, my spouse informed me about the incident. I thus made a physical inspection of my vehicle and indeed, my conclusion was the same as that of my spouse and I had disregarded this incident as a frivolous opportunistic attempt to extort money from my spouse and I don't believe the driver of vehicle SHB3199K could make a claim since there is no physical damage and hence no ground for him to claim against my vehicle! Alas to my surprise, there is now a claim against my motor policy and hence I would appreciate very much if NTUC Income can rigorously investigate and deal with such frivolous opportunistic claim!

un istospold Roch wattos

Other details which may be of usefulness to you are as follows:

Weather Conditions: Clear ^ Road Surface:

- ^ Type of Accident: No accident, no physical impact, no physical damage nor dent.
- ^ Was the accident reported to the police? No. ^ Number of Passengers (Including Driver): 1 ^ Any other vehicle or property damaged? No.
- ^ Anybody injured in this accident?
- No. ^ Do you have any video recording as evidence? No.

DETAILS OF DRIVER

- ^ Name of Driver: Sia Sue Teng ^ NRIC No:
- ^ Date Of Birth:
- S7174380B
- 17-11-1971
- ^ Sex:
- Female
- ^ Occupation:

- Indoor
- ^ Pass Date of Driving License:
- 17-03-2000
- ^ Relationship with Vehicle Owner: Spouse
- ^ Tel (Mobile):
- 98267318
- Email:
- claudiasia@yahoo.com
- Address Type: Postal Code:
- Singapore 307605
- Address:
- 150 Thomson Road, #17-03, Singapore 307605.

Vehicle Owner: Ong Ee Ping (Tel: 9017-0829)

Signature:

Driver by: Sia Sue Teng

Signature:

av 12/03/2018
Roll workers



Our Ref: MT/CA/TP/059/0984208-001/QSK/VU

01 Mar 2018

ONG EE PING 150 THOMSON ROAD #17-03 THOMSON EURO-ASIA SINGAPORE 307605

Dear Policyholder

CLAIM NUMBER: MT/0984208-001 ACCIDENT INVOLVING SIN665P / SHB3199K on 24 Feb 2018

We would like to inform you that a claim for \$\$1,986.32 has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. Information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

if you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely

Goh Peng Hong Manager

Motor Insurance







