

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	02/04/2018 20:26
Date Of Accident	02/04/2018 16:20
Exact Location Of Accident	ALONG ORCHARD ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR9092M
Insured/Policyholder	
Name Of Registered Owner	NG WEI TONG TRANSPORT
Co Reg No	53338562L
Email Address	NGWEITONG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90920990
Alternative Phone No	OFFICE-90920990

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD
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	5092599431
Cover Note Number	

Driver

Name of Driver	NG WEI TONG (WU WEITONG)
NRIC No	S9321295I
Date Of Birth	16/06/1993
Occupation	OUTDOOR
Date Of Driving Pass	31/01/2012
Driving Experience	6 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90920990
Fax Number	
Contact Number	OFFICE-90920990
EEmail Address	NGWEITONG@GMAIL.COM

Address	BLK 442 ANG MO KIO AVENUE 10 #03-1205
Postcode	560442
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FW9271H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	TENG POH KUAN
NRIC/Passport Number	S1126629J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

SKETCH PLAN

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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.

Policyholder's Signature

Date & Time: 2/4/18
1726

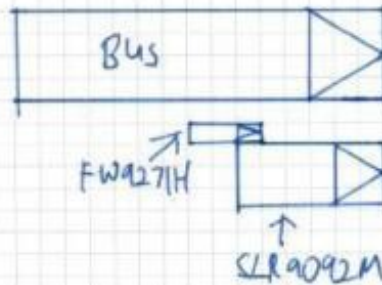
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: Raddi umbar
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Along Orchard Road



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 02/04/2018, 1618 hours. I was at the traffic Junction of Orchard Rd. My vehicle was stationary at the red light. Suddenly I heard some loud sounds coming from the rear left of my car. I alighted to check, and saw a Motorbike adjusting his blue trolley basket. I checked the front left portion of my car, and was fine.

As there is a bus beside, and the Motor is blocking the way, I walked by another side to check my rear. At this point of time, the Motor drive away.

I discovered that there are scratches on my bumper.

I shouted at the Motorcyclist and he stopped at the side. Further checks shows that my rear reflector had cracked. at the kerb side, He continued adjusting his blue trolley basket. It is believed that the blue trolley basket dislodged from his motor and caused the scratch.

DECLARATION

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

Policyholder's Signature
Date & Time: 2/4/18

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

Reporting Centre Personnel's Signature
Name: Kardi W...
NRIC/FIN No.:

1726

Sketch Plan #3

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY
(ACRA)



INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of NG WEI TONG TRANSPORT (53338562L)

Date: 02/06/2016

The Following Are The Brief Particulars of :

Name of Business	NG WEI TONG TRANSPORT
Former Name(s) if any	
Date of Change of Name	
Registration No.	53338562L
Registration Date	02/06/2016
Commencement Date	01/06/2016
Status of Business	Live
Status Date	02/06/2016
Renewal Date	
Expiry Date	02/06/2017
Renewal via GIRO	NO
Constitution of Business	Sole-Proprietor
Principal Place of Business	442 ANG MO KIO AVENUE 10 #03-1205 SINGAPORE (560442)
Date of Change of Address	

Principal Activities

Activities (I)	PASSENGER LAND TRANSPORT NEC (EG PRIVATE CARS FOR HIRE WITH OPERATOR) (49219)
Description	
Activities (II)	
Description	

Particulars of Authorised Representative(s)

Name	ID	Nationality	Address	Address Source	Date of Appointment
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Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry
					Position

Sketch Plan #4

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY
(ACRA)



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Business Profile (Business) of NG WEI TONG TRANSPORT (53338562L)

Date: 02/06/2016

Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position
NG WEI TONG	S93212951	SINGAPORE CITIZEN	442 ANG MO KIO AVENUE 10 #03-1205 SINGAPORE (560442)	ACRA	01/06/2016 Owner

Withdrawn Partner(s)

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Position	Date of Withdrawal
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Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA160602004757

DATE : 02/06/2016

This is computer generated. Hence no signature required.

Accident Photo



Accident Photo







Accident Photo



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