

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
Email 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

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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.

Policyholder's Signature

Date & Time: 2/4/18
1726

Driver's Signature

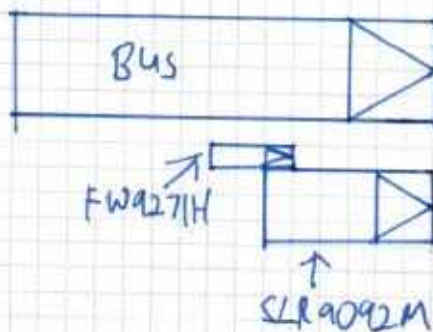
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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 ~~the~~ my rear reflector had cracked. at the ~~in~~ kerb side, He continued adjusting his blue trolley basket. It is believed ~~that~~ 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
1726

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

 02/04/2018
Reporting Centre Personnel's Signature
Name: Kael Wong
NRIC/FIN No.:

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
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INFORMATION RESOURCES

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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	S9321295I	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.

Claim Handling

Accident HT/0988725

Exit

Policy No.	S09388431	Vehicle No.	SLR9092M	GST Registration No.	
Policyholder Name	NG WEI TONG TRANSPORT			Policyholder NRIC	S3338562L
Product Code	PRIVATE CAR INSURANCE	Cover Type	Basic PREMIUM	Leading	C
Contact No.(Mobile)	90920990	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	Yes	TCA	Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	03/04/2018 12:19	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	03/04/2018	Time of Accident (hours)	10:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG ORCHARD ROAD				

Benefits

Excess

Own Damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,000.00		

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 442 #03-1205	Address 2	ARND MO KIO AVENUE 10	Address 3	SINGAPORE S60442
Address 4		Address Type	Singapore address	Post Code	S60442
Unit No.	03-1205	Related Policy Number	S093589431		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	16/06/1993
Unnamed driver Name	NG WEI TONG	Driver NRIC	S9321295	Driving Experience	8
Register Date of Driver License	31/01/2012	Driver Age	24	Contact No.(Home)	
Contact No.(Mobile)	90920990	Contact No.(Office)		Address 1	SINGAPORE S60442
Address 1	BLK 442 #03-1205	Address 2	ARND MO KIO AVENUE 10	Post Code	S60442
Address 4		Address Type	Foreign address		
Unit No.	03-1205				
Does he own a Singapore Registered Car?	Yes + No	Driver Vehicle No.	SLR9092M	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes + No
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	NG WEI TONG TRANSPORT	Injured NRIC	S3338562L
Contact No.(Mobile)	90920990	Contact No.(Phone)		Contact No.(Office)	N/A
Email Address		OT Vehicle Number	SLR9092M	TP Vehicle Number	FW9272H
Claim Description	SLR9092M / FW9272H ON 2 Apr 2018	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	03/04/2018 12:30
Date Registered	03/04/2018 12:30	Claim Close Date		Total Loss but Reported	
Report Taken By	BOSLI WAHAN	Workshop Repairer			

Print All letter

Save Submit

Attachment

Accident No.	HT/0988725	Claim No.	001
Last Doc. Received	Yes No	Upload Date	03/04/2018 13:39
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

Attachment List

Send Message Upload

Attachment	uploaded By/Date	Category	Urgency	Description	Msg Sent? Action (ICQ)
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 13:38	SAS	Normal	SAS 2018-4-3	Edit
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 13:38	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-3	Edit
	NAC_BUKIT_MERAH_B00676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 13:38	Photos	Normal	Photos 2018-4-3	Edit

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 12:30	Photos	Normal	Photos 2018-4-3	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 12:30	Photos	Normal	Photos 2018-4-3	Edit
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 12:30	Photos	Normal	Photos 2018-4-3	Edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 03 Apr 2018 12:30	Photos	Normal	Photos 2018-4-3	Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 02.04.2018 (DD/MM/YYYY), TIME: 16.18 (HH:MM)
LOCATION: Orchard Rd

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SLR 9092M
b) INSURANCE COMPANY: NFUI
c) POLICY NUMBER: 5092599431
d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: Toyota Alphard
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Private Use
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: Ng Wei Tong (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8212957 CONTACT: 90920910
c) ADDRESS: BK 442 Ang Mo Kio Ave 10 #03-1205 S 560442

* CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER

4/ No of passenger
(including driver)
(1)

DRIVER
a) NAME: AS ABOUK (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

d) DATE OF BIRTH: 16/06/1993 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR) 21/3/2012
f) DATE OF DRIVING PASS: 21/3/2012

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. c) REPORTED TO POLICE (YES/NO)
IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

4/ No of passenger
(including driver)
(1)

a) VEHICLE NUMBER: FW9271H MODEL: _____
b) DRIVER'S NAME: TRANG HOA KUAN CONTACT: _____
c) NRIC/FIN/PASSPORT: 811266297

9. THIRD PARTY VEHICLE

4/ No of passenger
(including driver)
()

a) VEHICLE NUMBER: _____ MODEL: _____
b) DRIVER'S NAME: _____ CONTACT: _____
c) NRIC/FIN/PASSPORT: _____

Email: ngweitong@gmail.com

Fax: _____

V: 020

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S93212951



Name

NG WEI TONG
(WU WEITONG)

吴伟栋

Race

CHINESE

Date of birth

16-06-1993

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of NG WEI TONG

Licence Number: S93212951

Name: NG WEI TONG (WU WEITONG)

Birth Date: 16 Jun 1993

Issue Date: 31 Jan 2012

Barcode: 0020387890



4886838



NRIC No. S93212951

Date of issue

03-09-2012

Address

APT BLK 442 ANG MO KIO AVENUE 10
#03-1205
SINGAPORE 560442

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3600kg with <= 47 passengers, exclusive of the driver, and other motor vehicles <= 2600kg 31 Jan 2012

NP 429A



Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.		Date of Accident	02/04/2018 12:08						
Vehicle No. (For Motor)	SLR9092M								
Search									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5092599431	NG WEI TONG TRANSPORT	53338562L	GPC	drive PREMIUM	SLR9092M	SLR9092M	20/07/2017	19/07/2018
Continue									