

## 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	19/04/2018 15:40
Date Of Accident	19/04/2018 07:55
Exact Location Of Accident	DUNEARN RD (TOWARD CITY) AFTER SWISS COTTAGE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ9887S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WYSA CARS
Co Reg No	53368693L
Email Address	ALVINCOVE@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96334564

### Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093851396
Cover Note Number	

### Driver

Name of Driver	WONG TING SOEN, ALVIN
NRIC No	S8925478G
Date Of Birth	26/07/1989
Occupation	OUTDOOR
Date Of Driving Pass	09/04/2009
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98183836
Fax Number	
Contact Number	
Email Address	MYSISTHE1@GMAIL.COM

Address	BLK 760 JURONG WEST ST 74 #11-08
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN 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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	2
Passenger 1	NAME: : JEAN WONG
	GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address	<b>ROAD:</b> 20 CLEMENTI AVE 5 , <b>POSTCODE:</b> 129858 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT AND SKETCH PLANS

#### 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	SKE2530S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHB8895B

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)

#### DETAILS OF INJURED PERSON 1

Name ALVIN WONG

Approximate Age

Injuries Sustain NECK AND BACK

Injured person in which vehicle? SLQ9887S

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

#### DETAILS OF INJURED PERSON 2

Name JEAN WONG

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLQ9887S

Were seat belts worn? YES

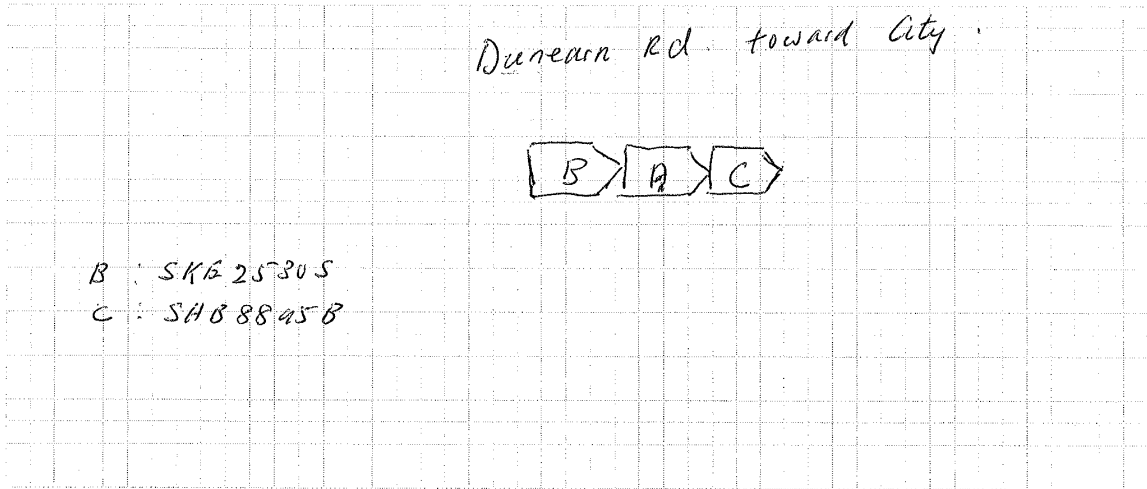
Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

# Sketch Plan Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.
Accident happened along Dunearn Rd after before
Swiss Cottage toward city. I was travelling on the
right lane. The vehicle No Taxi SHB8845B in front
stopped (when vehicles in front stopped). I also
stopped. Suddenly vehicle No SKG 25305 hit on to
the rear of my vehicle. The impact caused my
vehicle to surge forward and hit the rear of
SHB 8845 B. I was conveyed to Tan Tock <sup>Seng</sup> Hospital
by an ambulance. my passenger would be making (seeking)
medical consultation.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: B. K. Ng.  
NRIC/FIN No.:



REPORTING CENTRE (Page 1 of 1)

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

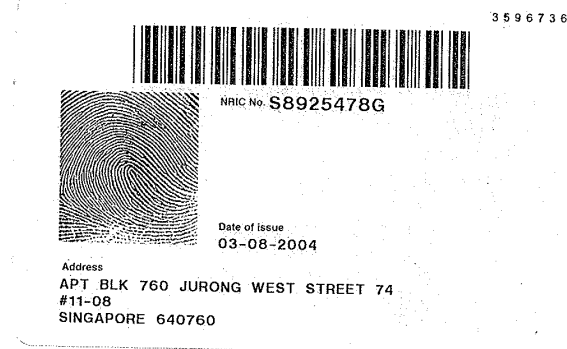
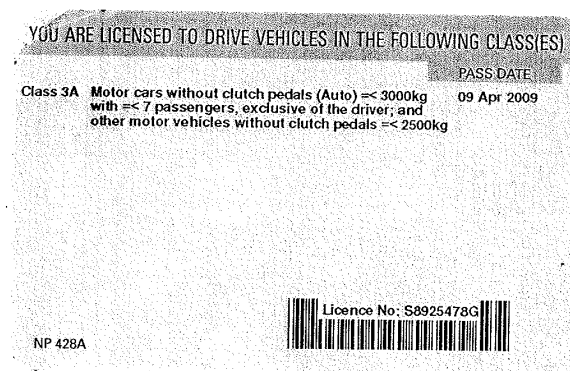
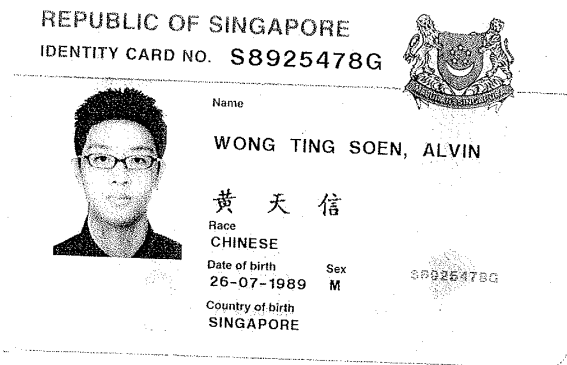
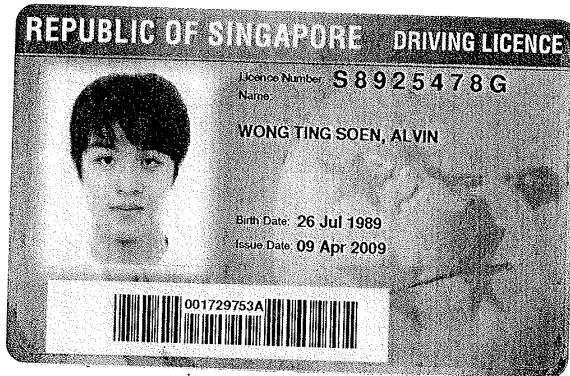
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

Reporting Centre Personnel's Signature  
Name: *S. K. Nf*  
NRIC/FIN No.:





## INFORMATION RESOURCES

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

Business Profile (Business) of WYSA CARS (53368693L)

Date: 17/08/2017

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

Name	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry
					Position
DONG YUN SUNG ALEX	S8035634Z	SINGAPORE CITIZEN	431 JURONG WEST AVENUE 1 #09-308 SINGAPORE (640431)	ACRA	17/08/2017 Owner

## Withdrawn Partner(s)

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

## Revision

WYSA CARS - 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

REGISTRAR OF COMPANIES AND BUSINESS NAMES  
SINGAPORE

Receipt NO. : ACRA170817042041 (Free Business Profile by ACRA)

Date : 17/08/2017

This is computer generated. Hence no signature required.

## INFORMATION RESOURCES

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## Business Profile (Business) of WYSA CARS (53368693L)

Date: 17/08/2017

## Following Are The Brief Particulars of :

Business Name	WYSA CARS
Former Name(s) if any	
Date of Change of Name	
Registration No.	53368693L
Registration Date	17/08/2017
Commencement Date	17/08/2017
Status of Business	Live
Status Date	17/08/2017
Renewal Date	
Expiry Date	17/08/2018
Renewal via GIRO	NO
Institution of Business	Sole-Proprietor
Principal Place of Business	431 JURONG WEST AVENUE 1 #09-308 SINGAPORE (640431)
Date of Change of Address	

## Principal Activities

Activities (I)	PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)
Description	
Activities (II)	RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (77101)
Description	





**SINGAPORE  
POLICE FORCE**



T/20180419/2061

1 of 3

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

Report No. T/20180419/2061

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/04/2018 14:16			Vide Report No.:		Station Diary No.: 73
<b>Informant's Particulars</b>					
Name of Informant: WONG TING SOEN, ALVIN			Address: APT BLK 760 JURONG WEST STREET 74 #11-08 SINGAPORE 640760		
ID Type / ID No.: NRIC NO / S8925478G			Contact No.: Home/Office: Mobile: 96334564		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 26/07/1989	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3A Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 19/04/2018 08:00	Type of Location: Straight Road
Location: Along Road 1 DUNEARN ROAD  Along Dunearn road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SHB8895B	Car				Totally Damaged	4
SKE2530S	Car				Totally Damaged	0
SLQ9887S	Car				Seriously Damaged	1





**SINGAPORE  
POLICE FORCE**



T/20180419/2061

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

2 of 3

Report No. T/20180419/2061

**CONTINUATION OF REPORT**

**Brief Details.**

On 19/04/2018 at 0800hrs, I was travelling along dunearn road at lane 1 with my silver coloured Honda Jazz. There is one car travelling in front of me SHB 8895B, I notice the car ahead of me has already stopped due to the heavy jam and traffic light. While I was slowing down, one vehicle bearing registration SKE 2530S collided on to the rear of my vehicle. The collision causes me to collide into the vehicle that is ahead of me.

The collision causes serious damage to my vehicle, the front and rear of my vehicle is dented. After the collision, all driver got out and manage to exchange particulars. Subsequently, the Orange task force officer one namely, Suman from NTUC income called for ambulance. After ambulance arrived, i got conveyed to Tan Tock Seng hospital and was given 2 days MC, my neck and shoulder suffered strain due to the impact of the collision. I wish to state that I was conscious after the accident, I have one female passenger with me at that time, she is conscious as well and she informed she will seek medical attention on her own and left.

At 1320hrs, I was being contacted by the TP IO officer one namely, Azan, Contact number 9159 4602/6547 6256 reference to case number E/20180419/0051 to lodge a traffic accident report. I wish to state that I have in car camera and it did capture the accident, I manage to take some picture of the damages caused as well. I have the particulars of the other drivers. The taxi driver of vehicle SHB 8895B that is ahead of my vehicle is one namely, See Gee Huat, NRIC: S1201031A. The driver of vehicle SKE 2530S that is at my rear is one namely, John Lim Weng Fai, NRIC: S1404564C, HP no: 9682 6687.





**SINGAPORE  
POLICE FORCE**



T/20180419/2061

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

3 of 3

Report No. T/20180419/2061

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

D /

Sgt 2 LIH JUN JUN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/04/2018 14:16

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MA JUNXIANG

Contact No: 65476251

Classification Of Case:

 SINGAPORE POLICE FORCE Authentication Stamp NP168  SN 37 SN 37 SIGNATURE SIGNATURE
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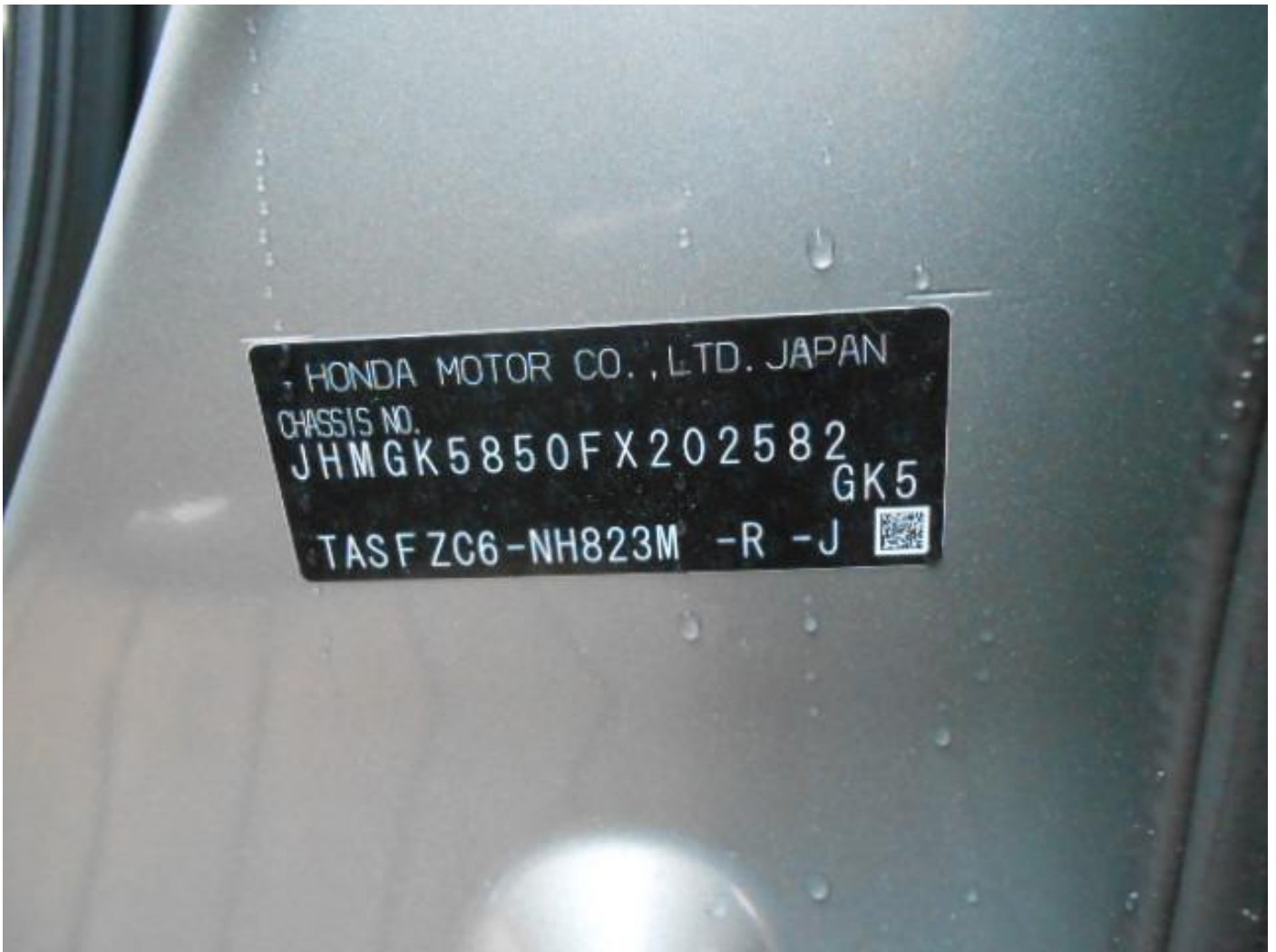
Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



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Accident Photo

