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 <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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	23/04/2018 08:36
Date Of Accident	21/04/2018 13:20
Exact Location Of Accident	ANG MO KIO AVE 3 INTO CTE/CITY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB8256X
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880
Vehicle Particulars	
Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095103893
Cover Note Number	

Driver

Name of Driver

NG YONG KANG

NRIC No

S6815436G

Date Of Birth

Occupation

Outdoor

Date Of Driving Pass

NG YONG KANG

NG YONG KANG

OUTDOOR

17/04/1968

0UTDOOR

18/04/1989

Driving Experience 29 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91061055

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 504B #07-98 YISHUN ST 51

Postcode 762504

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

enicie

Insurance Company of Driver's Own Vehicle

-

NO

2

NO

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 3
Was any body injured in the Accident? YES
Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: PAX IN THE REAR SEAT - FOREIGNER(MR ALBERT

. JONATAN

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

ALL VEHICLES - 1 PAX ONBOARD.

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 Witness 1

Name ALBERT JONATAN - PAX IN VEH. A

Phone Number Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SGN4579P

Vehicle Make/Model/Colour HONDA FIT/BLUE

Details Of Properties VEH. B

Vehicle Category PRIVATE CAR

Name of Driver TAN HUA MONG PETER

NRIC/Passport Number S1236696E

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage DAMAGED ON THE FRONT & REAR

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJS2353A

Vehicle Make/Model/Colour TOYOTA ALTIS

Details Of Properties VEH. C

Vehicle Category PRIVATE CAR
Name of Driver MALE CHINESE

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage DAMAGED ON THE FRONT PORTION

No. Of Passenger (Including Driver) 2

DETAILS OF INJURED PERSON 1

Name NG YONG KANG - DRIVER OF VEH. A

Approximate Age

Injuries Sustain FELT UNWELL & WILL SEEK FOR MEDICAL TREATMENT

Injured person in which vehicle? SHB8256X

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

ambulance?

NO

Address Postcode

Sketch Plan Pg. 1

SKETCH PLAN

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- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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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

SHB 8256X > S68154360

2 3 APR 2018

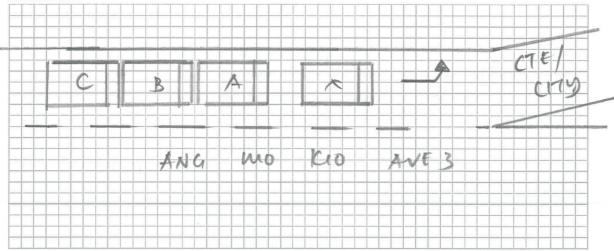
Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Date & Time:

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHB8256X
7. 3/100-17.
B: SGN 45798
C: STS 2353A

DECLARATION

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

SHB 8256X

268154364

23 APR 2018

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.:

GIARMC SketchPlanForm_V3

Describe Circumstance of the Accident.

* CHAIN COLLISION *

1320 HRS.

ON $21/04/2018_{\chi}$ I WAS DRIVING MY TAXI (SHB 8256~X) TRAVELLING ALONG ANG MO KIO AVE 3 TOWARDS THE SLIP ROAD OF CTE/CITY WITH A PASSENGER ONBOARD, IN THE EXTREME LEFT LANE.

I STOPPED MY TAXI AS VEHICLES AHEAD OF ME STOPPED.

WHILE STATIONARY, SUDDENLY I FELT AN IMPACT FROM THE REAR.

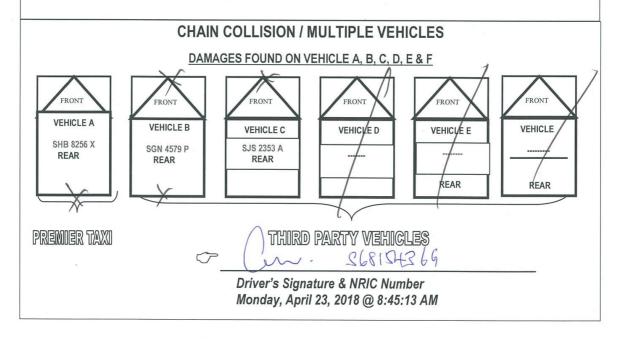
WHEN INSPECTED, I DISCOVERED THAT VEHICLE B (SGN 4579 P – HONDA FIT/BLUE) WHICH WAS BEHIND ME, HAD COLLIDED ONTOTHE REAR OF MY TAXI AND VEHICLE C (SJS 2353 A – TOYOTA ALTIS) WHICH WAS BEHIND VEHICLE B, WAS INVOVLED IN THE COLLISION AS WELL.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE REAR PORTION.
VEHICLE B HAD DAMAGES ON THE FRONT & REAR PORTION.
VEHICLE C HAD DAMAGES ON THE FRONT PORTION.

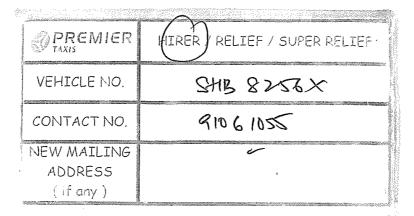
AS A RESULT, I FELT UNWELL AND WILL SEEK FOR MEDICAL TREATMENT. NO AMBULANCE AT SCENE.

ALL VEHICLES HAD A PASSENGER ONBOARD.

*VIDEO FOOTAGE CAPTURED.



Sketch Plan Pg. 4



REPUBLIC OF SINGAPORE



IDENTITY CARD NO. S6815436G Name

NG YONG KANG

;I 黄 永

CHINESE

Date of birth 17-04-1968

Country of birth SINGAPORE

568154360

REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number: S 6 8 1 5 4 3 6 G Name NG YONG KANG Birth Date: 17 Apr 1968 Issue Date: 24 Jan 2004



NRIC No. S6815436G

15995



11-02-2009

APT BLK 504B YISHUN STREET 51 #07-98 SINGAPORE 762504

NRIC No: \$6815436G

Date: 25/06/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

PASS DATE 18 Apr 1989

Motor Cars and Motor Tractors the weight of Class 3 which unladen does not exceed 2500 kilograms Class 4

Heavy Motor Cars and Motor Tractors the

weight of which unladen exceeds 2500 kilograms Motor Vehicles which are not constructed

22 Feb 1993 23 Apr 1993

themselves to carry any load and the weight of which unladen exceeds 7250 kilograms

NP 428A

Class 5





VOCATIONAL LICENCE

Licence No : S6815436G

Name : NG YONG KANG

Issue Date: 15/1/2007

Please visit www.lta.gov.sg to check the status of this vocational licence

