

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	14/05/2018 14:08
Date Of Accident	15/04/2018 20:35
Exact Location Of Accident	ALONG ECP TOWARDS CITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV2722R
Insured/Policyholder	
Name Of Registered Owner	WONG JOO HOE
NRIC No	S0248665B
Email Address	SWONGJH@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96352742
Alternative Phone No	OTHERS-96352742

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	5073410237-02
Cover Note Number	

Driver

Name of Driver	WONG JOO HOE
NRIC No	S0248665B
Date Of Birth	14/05/1941
Occupation	INDOOR
Date Of Driving Pass	02/03/1961
Driving Experience	57 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96352742
Fax Number	
Contact Number	OTHERS-96352742
Email Address	SWONGJH@SINGNET.COM.SG

Address	18 NEO PEE TECK LANE
Postcode	119049
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)	2
Passenger 1	NAME: : WI 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 NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 427 CLEMENTI AVENUE 3 , POSTCODE: 120427 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7759999 - FAX NO: 67764246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180511/2098

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	SLW8337M
Vehicle Make/Model/Colour	MERCEDES BENZ 180A
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MDM TAN
NRIC/Passport Number	
Contact Number	93885878
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: :

Accident Sketch Plan

SKETCH PLAN

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

I understand, acknowledge, agree and consent that:

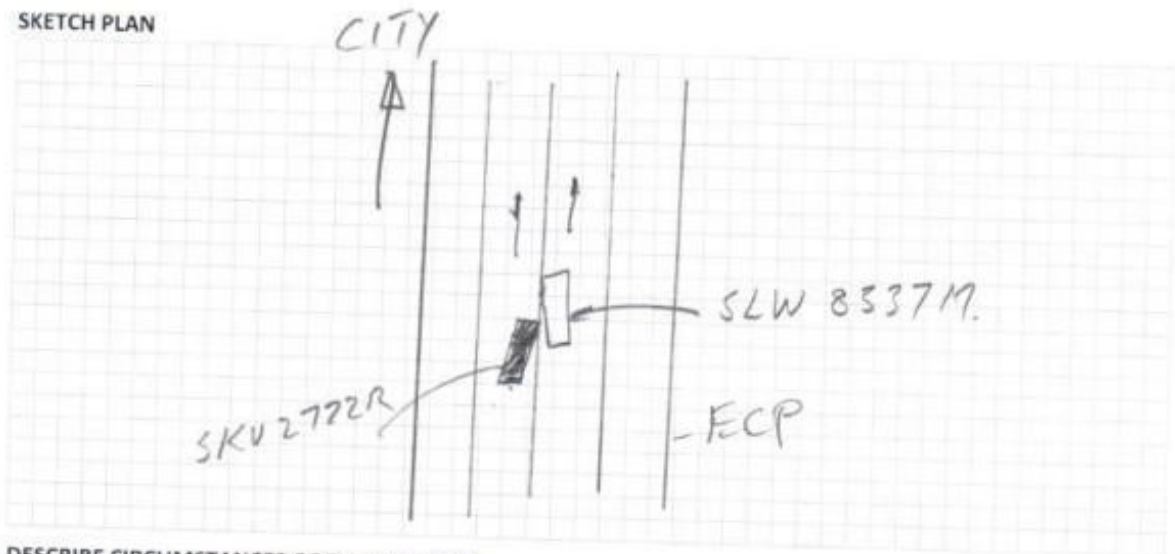
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

200 L 14/05/2018 SAME
Policyholder's Signature 11:38am Driver's Signature
Date & Time: (If driver is not the policyholder)
Date & Time:

14/05/2018
Reporting Centre Personnel's Signature
Name: [Signature]
NRIC/FIN No: [Signature]

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*PLS REFER TO POLICE REPORT
7/20180511/2098*

DECLARATION

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

[Signature]
Policyholder's Signature

Date & Time:

SAME

Driver's Signature

(if driver is not the policyholder)

Date & Time:

[Signature] 14/02/2018
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180511/2098

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180511/2098

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/05/2018 17:19	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars				
Name of Informant: WONG JOO HOE			Address: 18 NEO PEE TECK LANE SINGAPORE 119049	
ID Type / ID No.: NRIC NO / S0248665B			Contact No.: Home/Office: Mobile: 96252742	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 76	Date of Birth: 14/05/1941	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 15/04/2018 20:35	Type of Location: Straight Road
Location: Along Road 1 EAST COAST PARKWAY Along ECP towards CITY.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKV2722R	Car	HONDA	VEZEL 1.5X CVT	White	No Damage	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKV2722R	NTUC Income Insurance Co-Operative Limited	5073410237-02	08/09/2017	07/09/2018

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180511/2098

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180511/2098

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WONG JOO HOE	ID No.	S0248665B
Related Vehicle	SKV2722R (Car)	Contact No.	96252742
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/04/2018 at about 2035hrs, I was travelling along ECP towards City in my vehicle number SKV2722R. At that point of time, I was in the second or third lane and I was travelling about 70km/h. While I was travelling in my lane, suddenly I saw something dark on the road in front of me which caused me to swerved my vehicle to the right. While doing so, my car came into contact with a vehicle that was travelling on my right. After which, we drove and stopped by the side of the road.

I wish to state that both parties confirmed that no one was injured. No traffic police or ambulance came down to scene. There was only a tyre mark seen at the other party left rear door and there was no dent mark on both cars. Since both parties confirm there was no bodily injury to anyone and hardly any damage to both cars, I assumed there was no necessity to lodge an accident report.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180511/2098

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180511/2098

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 3 MUHAMMAD RAFIQ KHAN BIN DAUD

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
11/05/2018 17:19

Officer In Charge Of Case:
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No.: 65476430

Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

