

## 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	18/05/2018 16:15
Date Of Accident	18/05/2018 07:45
Exact Location Of Accident	ALONG AYE (TUAS) BEFORE CLEMENTI AVE 2 EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT7348D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHENG SOO SOON
NRIC No	S1154979I
Email Address	ADMIN@NHTMOTOR.COM
Mobile Phone No	(LOCAL) +65-96222612
Alternative Phone No	OTHERS-96222612

### Vehicle Particulars

Manufacturer	HONDA
Model	ODYSSEY 2.4
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10790186
Cover Note Number	N.A

### Driver

Name of Driver	CHENG SOO SOON
NRIC No	S1154979I
Date Of Birth	16/11/1956
Occupation	INDOOR
Date Of Driving Pass	23/03/1977
Driving Experience	41 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96222612
Fax Number	
Contact Number	OTHERS-96222612
EEmail Address	ADMIN@NHTMOTOR.COM

Address	THE MAYFAIR, 7 JURONG EAST STREET 32 #18-07
Postcode	609480
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	COLLISION - HEAD TO REAR
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?	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)	4
Passenger 1	NAME: : TAN SEEW KEEM GENDER: : FEMALE
Passenger 2	NAME: : TAM KIM YOKE GENDER: : FEMALE
Passenger 3	NAME: : ANI GENDER: : FEMALE

#### 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

I was driving straight along AYE towards Tuas before Clementi Ave 2 exit at extreme right lane of 3 lanes. Heavy traffic, all vehicle in front of me slowed down. I followed suite. Suddenly, I felt an impact. Vehicle B collided onto rear portion of my vehicle and caused damaged. I will lodge report claim against vehicle B.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WILL UPLOAD TO FILEZILA AFTER INSURED SEND
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5789P
Vehicle Make/Model/Colour	RENAULT LATITUDE 2.0L
Details Of Properties	NIL
Vehicle Category	TAXI
Name of Driver	NG CHOON CHWEE

NRIC/Passport Number	S1108237H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: : PASSENGER 1
	GENDER: : MALE

## Sketch Plan

### SKETCH PLAN

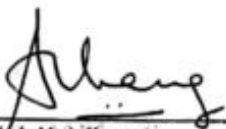
#### IMPORTANT NOTICE

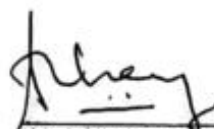
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#### **8. Consent under the Personal Data Protection Act (PDPA)**

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:

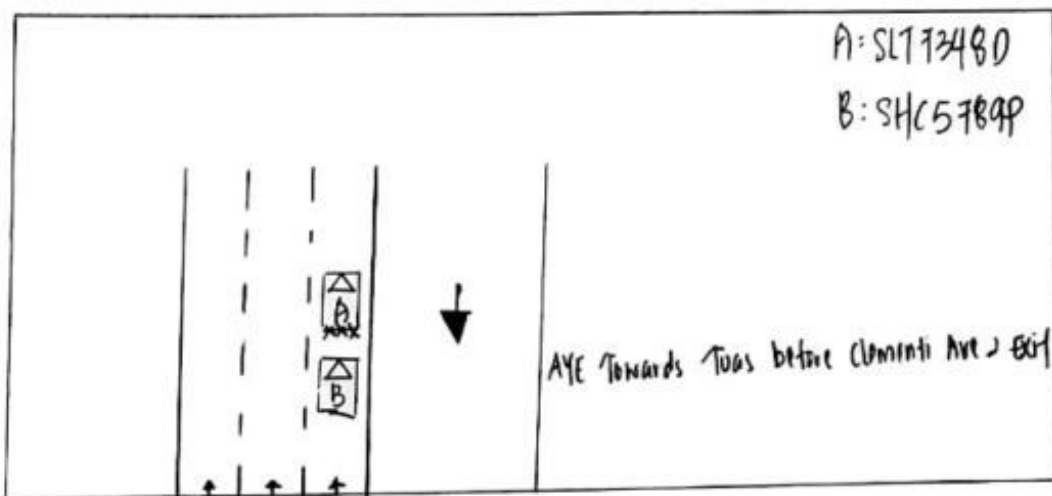
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

**EUGENE KOH**  
MARS OFFICER

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

# Common Statement

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight along AYE Towards Tuas before Clementi Ave 2 exit at  
 between RH lane of 3 lanes.  
 Heavy traffic, all veh in front of me slowed down. I followed suite.  
 Suddenly, I felt an impact. veh "B" collided onto rear portion of my veh  
 and caused damaged.  
 I wish lodge report claim against veh "B".

*[Signature]*  
 CHENG SOO SOON  
 I/C : 31154979 I

## DECLARATION

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

*[Signature]*  
 Policyholder's Signature  
 Date & Time:

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

**EUGENE KOH**  
 MARB OFFICER

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

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



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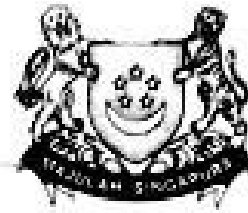


Accident Photo



Driving License

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1154979I**



Name

**CHENG SOO SOON**



**鍾 順 舜**

Race

**CHINESE**

Date of birth

**16-11-1956**

Sex

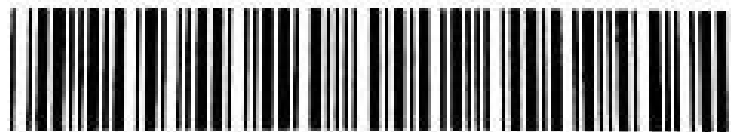
**M**

Country/Place of birth

**SINGAPORE**



**5514609**



NRIC No. **S1154979I**



Date of issue

**20-08-2015**

Address

**7 JURONG EAST STREET 32  
#18-07  
SINGAPORE 609480**



Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Portrait of a man

Licence Number: **S11549791**  
Name: **CHENG SOO SOON**  
Birth Date: **16 Nov 1956**  
Issue Date: **30 Nov 2010**

Barcode: 001914385B

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

**EFFECTIVE DATE**

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg **23 Mar 1977**

NP 428A

Licence No: S11549791

Barcode