

MSAE1905299 / SME Motor Pte Ltd - Kaki Bukit
ENTRY DATE & TIME: 19/05/2018 14:21
SUBMITTED BY: Farida Wen

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 Record's 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 19/05/2018 14:21
Date Of Accident 18/05/2018 18:00
Exact Location Of Accident HOUGANG AVE 5.
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKT8260C
Insured/Policyholder
Name Of Registered Owner ONG TECK WEE
NRIC No S8109829H
Email Address NOEMAIL
Mobile Phone No (LOCAL) +65-94555521
Alternative Phone No OFFICE-94555521

Vehicle Particulars

Manufacturer AUDI
Model A3

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 CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 1700079711
Cover Note Number

Driver

Name of Driver ONG TECK WEE
NRIC No S8109829H
Date Of Birth 10/04/1981
Occupation INDOOR
Date Of Driving Pass 22/03/2000
Driving Experience 18 YEARS AND 1 MONTH
Gender MALE
Mobile Number (LOCAL) +65-94555521
Fax Number
Contact Number OFFICE-94555521
Email Address NOEMAIL

Address BLK 269B PUNGGOL FIELD #10-197
 Postcode 822269
 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 RAINING
 Road Surface WET

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? 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? YES
 If Yes, Please state which Police Station
 Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
 Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 65470000 - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT NO. T/20180519/7002.

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 SLE3283L
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category PRIVATE CAR
 Name of Driver LI SU HUO
 NRIC/Passport Number S6870935J
 Contact Number 91069500
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

ONG TECK WEE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKT8260C

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Accident Sketch Plan Pg. 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:

19.5.18

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

19.5.18

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

Kang car

Accident Sketch Plan Pg. 1

SKETCH PLAN

Hougang Ave 5



A: SICT 8260C

B: SLE 3283L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See attached Police Report No: T/20180519/7002.

DECLARATION

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

Policyholder's Signature

Date & Time: 19.5.18

Driver's Signature

(If driver is not the policyholder)

Date & Time: 19.5.18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20130519/7002

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No: T/20130519/7002

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/05/2018 11:29	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: ONG TECK WEE			Address: APT BLK 269B PUNGGOL FIELD #10-197 SINGAPORE 822269		
ID Type / ID No.: NRIC NO / S8109829H			Contact No.: Home/Office: Mobile: 94555521		
Nationality: SINGAPORE CITIZEN			Email: andreas_ong@yahoo.com.sg		
Sex: Male	Age: 37	Date of Birth: 10/04/1981	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: CIVIL SERVANT			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/05/2018 18:00	Type of Location: hougang Ave 5 road
Location: HOUGANG AVENUE 5 before the carpark @ blk 309-319 Hougang Ave 5.				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SKT8260C	Car	AUDI	A3	Grey		0
SLE3283L	Car	HONDA	vezel	White		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKT8260C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700079711	28/10/2017	27/10/2018

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180519/7002

Police Station Of Origin
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No: T/20180519/7002

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ONG TECK WEE	ID No	S8109829H
Related Vehicle	SKT8260C (Car)	Contact No	94555521
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	18/05/2018	Date Discharge	18/05/2018
No. of Days granted Medical Leave	03	Degree of Injury	Serious

Brief Details

I was driving along Hougang Ave 5 and it was raining and traffic was slow. The vehicle in front stopped and I also followed to stop. Suddenly the rear vehicle, SLE 3283L, driven by Mdm Li Su Huo (S6870935J) cannot stopped in time and hit the back of my car, SKT8260C causing damage. Due to the impact after the accident, I felt uncomfortable and went to Khoo Teck Puat Hospital for consultation and was given 3 days MC.

Accident Sketch Plan Pg. 1

**SINGAPORE
POLICE FORCE**

Police Station Of Origin
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408335
Tel No: 65470000



T/20180519/7002

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Report No: T/20180519/7002

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
TANG SIEW PING
Contact No.: 65476430

Authentication Stamp
NP138

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
19/05/2018 11:29

Classification Of Case: