SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Fax Number
Contact Number

EMail Address

- 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	06/06/2018 15:08
Date Of Accident	04/06/2018 11:10
Exact Location Of Accident	JOO CHIAT RD NEAR TO CEYLON LANE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJY418D
Insured/Policyholder	
Name Of Registered Owner	NG CHONG GHEE JEFFREY(HUANG CONGYI,JEFFREY)
NRIC No	S7204533E
Email Address	JNG210@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97665151
Alternative Phone No	OTHERS-97665151
Vehicle Particulars	
Manufacturer	KIA
Model	SORENTO
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28983936 QMY
Cover Note Number	
Driver	
Name of Driver	NG CHONG GHEE JEFFREY(HUANG CONGYI,JEFFREY)
NRIC No	S7204533E
Date Of Birth	10/02/1972
Occupation	INDOOR
Date Of Driving Pass	01/02/1993
Driving Experience	25 YEARS AND 4 MONTHS

MALE

(LOCAL) +65-97665151

OTHERS-97665151

JNG210@GMAIL.COM

Address BLK 12 JOO SENG ROAD

#14-53

Postcode 360012

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 - CHANGE/CROSS LANE

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 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name MACPHERSON NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-7449999 - **FAX NO**: 65476366

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20180605/2072 NOTE: THE PLACE OF THE ACCIDENT HAPPEN ON A SINGLE LANE ROAD. THERE IS NO ROAD DIVIDERS ALONG THIS SEGMENT OF JOO CHIAT ROAD, INDICATING IT IS A ONE WAY TRAFFIC. AT THE INSTANCE OF COLLISION, MY VEHICLE IS SLANTED AT AN ANGLE TO OVERTAKE THE BUS IN FRONT, WHILE THE OTHER VEHICLE CAME IN AT MORE THAN 40KM/H. THE POINT OF COLLISION TAKE PLACE BETWEEN MY CAR (AT THE FRONT BUMPER, RIGHT CORNER) AND HIS CAR (SIDE OF DOOR OF LEFT FRONT PASSENGER).

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 SJT750U

Vehicle Make/Model/Colour MAZDA 3

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver TAY SION TECK

NRIC/Passport Number S0148942I Contact Number 81834776 Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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 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.

Policyhold er's Signatur

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Repersing Centre Personnel's Signature

you 06/06/18

NRIC/FIN No.:

Accident Sketch Plan

	13	JOO CHIAT
	Bus	A - S244180
		B-5177504
SCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT	
0/2 /	1 11 15	
MIS repr	to the police	report: 7/20180605/20
	,	,
LARATION		
	ticulars are true in every respect.	
	ticulars are true in every respect.	A. 06/04/
CLARATION e declare the foregoing part	ticulars are true in every respect.	Sym 06/06/c Reporting tentre Personnel's Signature

Individual Statement





Police Station Of Origin; MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

2 of 3 Report No. T/20180605/2072

Tel No: 1800-7449999

CONTINUATION OF REPORT

	hicle Insurance	PARTIE DE LA CASTA	SALES OF THE PARTY	
D. C. C. C. C.	Insurance Company	Insurance No	Effective	-
	FWD Singapore Pte. Ltd	PNPV2017		Expiry Dat
14100	FVVD Singapore Pte. Ltd	PNPV2017- 00009484	27/12/2017	26/

	Involved: No ans Injured: NIL				
Driver	Marco. NIL	Use of I	Pedestr	ian Cro	ssing: NA
Name	Tay Sion Teck		PARTIE N		
Polote d Maria			IDI	No.	S0148942I
Related Vehicle	SJT750U (Car)		Control N		
Hospital/Clinic			Contact No		81834776
- Spiral/Cillic	NIL		Clas	ss of	Class: NIL
	·		Driving Licence &		Date of Expiry: NIL
Date Treatment	NII		Expi	ry Date	
No. of Days gran	ted Medical Leave NIL	Date Dis	charge	NIL	
Driver	INIL	Degree o	of Injury	NIL	
Name	NG CHONG GHEE, JEFFREY				
Delete day as	The state of the s		ID N	0.	S7204533E
Related Vehicle	SJY418D (Car)		Contact No.		
	Am				97665151
dospital/Clinic	NIL		Class	of	Class: 2
Hospital/Clinic			Drivin	g ce &	Class: 3 Date of Expiry: NIL
Hospital/Clinic			Licein		
Date Treatment	NIL	Data B	Expiry	Date	
Date Treatment	NIL ed Medical Leave NIL	Date Disci Degree of	Expiry harge	NIL	

On 4/6/2018 at about 1110hrs, I was driving along Joo Chiat Rd near Ceylon rd (one way road) when I stopped behind the bus waiting for the bus to move before driving off. I waited too long so I check my right mirror it was clear and release my brakes as I want to overtake the bus. However, as I was overtaking there one incoming vehicle(SJT750U) coming from the back but I did not notice it was coming then which cause collision between my vehicle right front bumper and his left passenger door.

We then both came out of our vehicle to exchange particulars and he informed that he is travelling at 40 -50km/h and will be proceeding to claim his insurance for the damages. I wish to state that there was no injuries suffered during the accident. I am making this report for recording purpose.



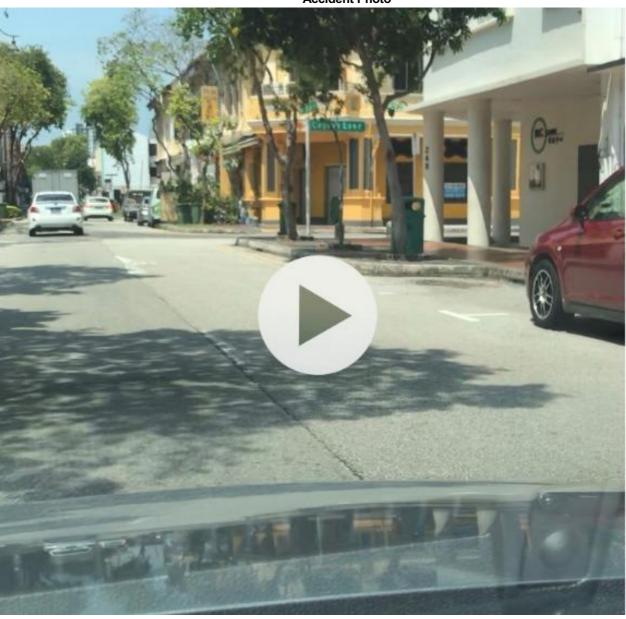








Accident Photo | 100 | 120 | 140 | 160 | 180 | 200 | 220 | 220 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 | 240 |







Police Report





1 of 3

Report No. T/20180605/2072

POLICE FORCE

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/06/2018 14:20		/lade:	Vide Report No.:	Station Diary No. 28	
Informa	nt's Partic	utars			
Name of Informant: NG CHONG GHEE, JEFFREY			Address: BLK 40 LORONG ONG LYE #03-03 SINGAPORE 536408		
	Type / ID No.: IC NO / S7204533E		Contact No.: Home/Office: Mobile: 97665151		
National SINGAP	ity: ORE CITIZ	EN .	Email:		
Sex: Male	Age 46	Date of Birth: 10/02/1972	Type of Informant:		
Race Chinese			Language:	Institution / School Name:	
Occupat ELECTR	ion; UCITY SAL	ES	Driving Licence Information: Class: 3	Date of Expiry	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 04/06/2018 11:10	Type of Location Straight Road
Location: Along Road 1 JOO CHIAT I Near to Ceylo	ROAD			
Weather Clear		Road Surface: Dry	F	toad Speed Limit:
		T (1)		
Traffic Flow: One Way Type of Collis	the second secon	Traffic Control: Not Controlled		raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJT750U	Car	MAZDA	MAZDA3 1.6L SDN	Silver	Slightly Damaged	0
SJY418D	Car	KIA	SORENTO 2.4 AT ABS D/AB 2WD 5DR HID SR	Silver	Slightly Damaged	0

Details of V	ehicle Insurance	THE RESERVE TO SHARE	Section 1	What six year
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

Police Report





Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

2.013 Report No. T/20180605/2072

Tel No: 1800-7449999

CONTINUATION OF REPORT

ehicle Insurance		STREET, SQUARE, SQUARE	
FWO Singapore Pte, Ltd	Insurance No	Effective	To Marion
THO GRIGapure Pie. Ltd	PNPV2017- 00009484	27/12/2017	26/12/2019

Any Pedestrian	ans Injured: NIL			THE RESIDENCE OF THE PARTY OF T
Oriver	aris Injured: NIL	Use of F	Pedestrian Cro	
Name			cocenian City	SSING NA
Note the second	Tay Sion Teck		ID No	S0148942I
Related Vehicle	SJT750U (Car)		0	10.000000000000000000000000000000000000
Hospital/Clinic	NIL		Contact No	81834776
			Class of Driving Licence &	Class: NiL Date of Expiry: NIL
Date Treatment	NIL	Date DV	Expiry Date	
vo. or Days gran	ted Medical Leave NII	Date Dis	charge NII	
ALIMOT		Degree o	finjury NIL	
kame				
MODELLE .	NG CHONG CHEE JECTORY			
	NG CHONG GHEE, JEFFREY		ID No.	\$7204533E
			ID No.	S7204533E
elated Vehicle	NG CHONG GHEE, JEFFREY SJY418D (Car)			- AND
lelated Vehicle	SJY418D (Car)		ID No.	\$7204533E 97695151
elated Vehicle			Contact No.	- AND

Brief Details.

On 4/8/2018 at about 1110hrs, I was driving along Joo Chiat Rd near Ceyton rd (one way road) when I stopped behind the bus waiting for the bus to move before driving off. I waited too long so I check my right mirror it was clear and release my brakes as I want to overtake the bus. However, as I was overtaking there one incoming vehicle(SJT750U) coming from the back but I did not notice it was coming then which cause collision between my vehicle right front bumper, and his laft passenger door.

We then both came out of our vehicle to exchange particulars and he informed that he is travelling at 40 -50km/h and will be proceeding to claim his insurance for the damages. I wish to state that there was no injuries suffered during the accident. I am making this report for recording purpose.

Police Report





Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

3 of 3 Report No. 7/20180605/2072

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.

19 The Report:	Signature Of Informant
	Date/Time: 05/06/2018 14:20
I'm\ smansone	Classification Of Case:
POLICE POLICE	10
	ig The Report: