

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	25/07/2018 14:47
Date Of Accident	24/07/2018 19:55
Exact Location Of Accident	JUNCTION OF UPPER BUKIT TIMAH ROAD/HUME AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGN8286H
Insured/Policyholder	
Name Of Registered Owner	LEONG MUN CHAI
NRIC No	S0523970B
Email Address	LEONGSHA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94889627
Alternative Phone No	OTHERS-94889627

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5046503025-07
Cover Note Number	

Driver

Name of Driver	LEONG SHARON
NRIC No	S8008630Z
Date Of Birth	01/03/1980
Occupation	OUTDOOR
Date Of Driving Pass	02/11/2001
Driving Experience	16 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94889627
Fax Number	
Contact Number	OTHERS-94889627
Email Address	LEONGSHA@GMAIL.COM

Address	BLK 134 BUKIT BATOK WEST AVENUE 6 #07-459
Postcode	650134
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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?	YES
Foreign Vehicle Registration Number	JNF7767 (PRIVATE CAR)
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8999999 - FAX NO: 66655791
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180724/2200

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	JNF7767
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HIEW TECK WENG
NRIC/Passport Number	F7523094W
Contact Number	90939339
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 1

Accident Sketch Plan

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.

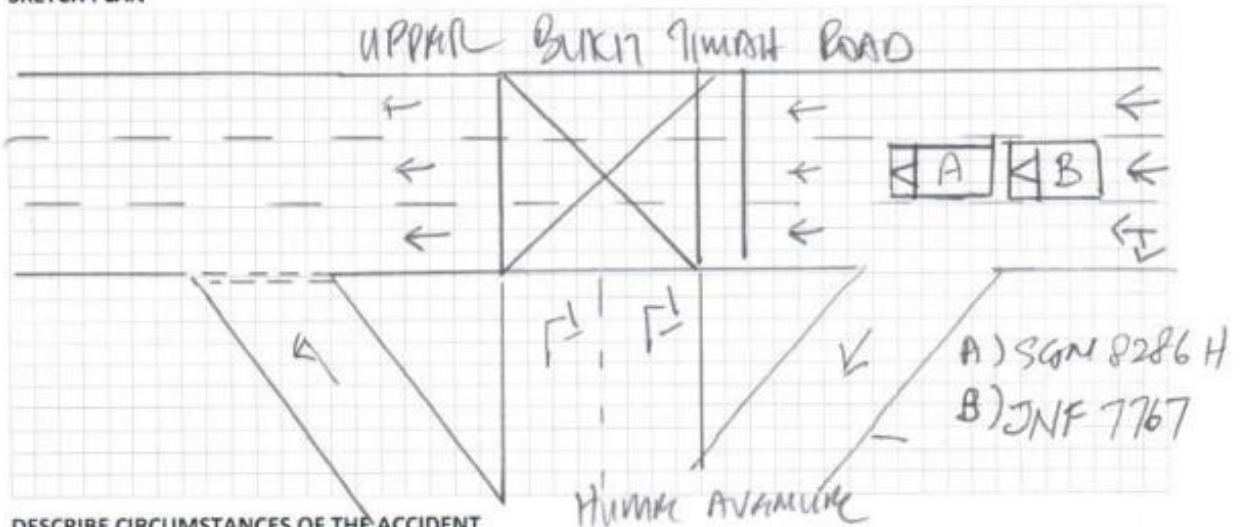
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 25/7/18
2.30pm

Reporting Centre Personnel's Signature
Name: *Reshika Watson*
NRIC/FIN No:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS REFER TO POLICE REPORT
7/20/80724/2200

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Date & Time: 25/7/18
2:35pm

Reporting Centre Personnel's Signature
Name: Faldi AHOB

NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180724/2200

1 of 3

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

Report No. T/20180724/2200

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/07/2018 23:10	Vide Report No.:	Station Diary No.: 79
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Informant's Particulars

Name of Informant: LEONG SHARON			Address: APT BLK 134 BUKIT BATOK WEST AVENUE 6 #07-459 SINGAPORE 650134	
ID Type / ID No.: NRIC NO / S8008630Z			Contact No.: Home/Office:	Mobile: 94889627
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 38	Date of Birth: 01/03/1980	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Real estate agent			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 24/07/2018 19:55	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 UPPER BUKIT TIMAH ROAD HUME AVENUE Near to Traffic Junction of Upper Bukit Timah Road and Hume Avenue				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	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
JNF7767	Car				Slightly Damaged	0
SGN8286H	Car	TOYOTA	Vios	Gold	Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180724/2200

2 of 3

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

Report No. T/20180724/2200

CONTINUATION OF REPORT

Driver			
Name	HIEW TECK WENG		ID No. F7523094W
Related Vehicle	JNF7767 (Car)		Contact No. 90939339
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
Driver			
Name	LEONG SHARON		ID No. S8008630Z
Related Vehicle	SGN8286H (Car)		Contact No. 94889627
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 24/07/2018 at about 1956hrs, I was father's car bearing registration plate number of SGN8286H along Upper Bukit Timah Road on the second lane of a 3 lanes road. I saw the traffic light ahead was amber from far. I slowed down my speed when approaching the T-Junction of Upper Bukit Timah Road and Hume Avenue. Then I came to a stop as the traffic light was red. Suddenly, I felt an impact from the rear of my car. Then I alighted from my car and the saw a car bearing registration plate number of JNF7767 was behind my car. I spoke to the driver and he told me that he was unable to stop on time and hit onto my car. I exchanged particulars with him and left.

I did not sustain any injuries and I do not have any camera installed in my car. The rear bumper of my car was dented and damaged and for his car was some dents at the bonnet.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180724/2200

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

3 of 3

Report No. T/20180724/2200

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 2 MERVYN PEA JIA WEI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Signature Of Informant:

Date/Time:

24/07/2018 23:10

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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"Please call KAA Toll Free 1-800-88-3833 for breakdown or accident assistance"

STAMP DUTY PAGE
JPM1000000000
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The Insured / Pemegang Polisi			Policy No. / No. Polisi		Amount No. / No. Amount	
HEW TECK WEN			JPM1000000000		01-01	
3, JLN SUTERA PULAI 2/4 TAMAN SUTERA UTAMA 81300 JOHOR BAHRU			Amount No. / No. Amount		040400-00	
Occupation / Pekerjaan			Type of Cover / Jenis Pertindungan		Period of Insurance / Tempoh Insurans	
SUPERVISOR			COMPREHENSIVE		From / Dari 08:00:01 AM 11-11-2017 To / Hingga 11-11-2017	
I.C. No. / No. Kad Pengiraan			Insured / Insurans		RM 587.58	
780324255908			Nilai Insurans / Jumlah Pertindungan		0.00	
Hire Purchase Owner / Pemilik Sewa Beli			Maximum Cumulative Lossing / Tambahan Bilangan Maksimum 0.00%		0.00	
MALAYAN BANKING BERHAD			WCT / Costum Tapis Tapisan		02.00%	
Make & Type of Body / Buat dan Jenis Badan			WCT / Costum Tapis Tapisan		17-11-2017	
PERODUA MYVI EZI PREMIUM E2I 1.40 HATCHBACK			Optional Cover		044.41	
Registration No. / No. Pendaftaran			Legal Liability of Insurer / Liabiliti Insurans		7.50	
JMF7767			Legal Liability of Insurer / Liabiliti Insurans		30.15	
Excess / Laburan			Legal Liability of Insurer / Liabiliti Insurans		99.00	
8.00			Legal Liability of Insurer / Liabiliti Insurans		581.08	
Regn. Card No. / No. Kad Pendaftaran			Legal Liability of Insurer / Liabiliti Insurans		34.86	
B2134429			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Carrying or Seating Capacity Incl. Driver / Muatan Tampan Dikelah / Jumlah Pemandu			Legal Liability of Insurer / Liabiliti Insurans		141.86	
5			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Year of Manufacture / Tahun Dibuat			Legal Liability of Insurer / Liabiliti Insurans		10.00	
2011			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Engine/Motor No. / No. Enjin/Motor			Legal Liability of Insurer / Liabiliti Insurans		10.00	
T50A43D			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Chassis No. / No. Chasis			Legal Liability of Insurer / Liabiliti Insurans		10.00	
PM2M6025002032337			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Trailer / Trailer			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Only The Extensions, Endorsement Add. / Or Warantew Indicated Below Apply To This Policy. / Hanya Tambah, Endorsement dan / atau Warantew seperti ini yang dinyatakan di bawah ini boleh digunakan dalam polisi ini.			Legal Liability of Insurer / Liabiliti Insurans		10.00	
2, 104, 15, 71, 86, 87 (AGREED VALUE)			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Endorsement 87 (Agreed Value) will not apply in the event any changes to the sum insured is made after policy inception			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Subject to IMPORTANT NOTICE: Your duty as the Owner of the vehicle as attached.			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Name of Driver / Pemandu Yang Ditamatkan			Legal Liability of Insurer / Liabiliti Insurans		10.00	
THE POLICYHOLDER, HEW TECK WENG			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Geographical Area : Malaysia , Republic of Singapore and Negara Brunei Darussalam. / Kawasan Geografik : Malaysia, Republik Singapura dan Negara Brunei Darussalam.			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Limitations as to Use / Authorized Driver : As described in the Certificate of Insurance. / Had Penggunaan / Pemandu Yang Diben Kuasa : Seperti yang tercatat dalam Sijil Insurans.			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Repeating Cover Note No. / -			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Gedung No. / No. Gedung			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Pertindungan			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Renewal of Policy No. / V7082382			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Pembaharuan No. Polisi			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Date of Proposal or 01-11-2017			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Declaration /			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Tarikh Cadangan atau Pengisytiharan			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Date of Issue / Time 01-11-2017 09:41:05 AM			Legal Liability of Insurer / Liabiliti Insurans		10.00	
Tarikh Dikeluarkan / Waktu			Legal Liability of Insurer / Liabiliti Insurans		10.00	
210210011117A076			Legal Liability of Insurer / Liabiliti Insurans		10.00	

Note: / Nota: No refund of premium for any cancellation of policy if premium is charged on minimum. / Tidak bayaran balik premium bagi sebarang pembatalan polisi sekiranya premium yang dikenakan adalah premium minima.

001V78PM/01115-1

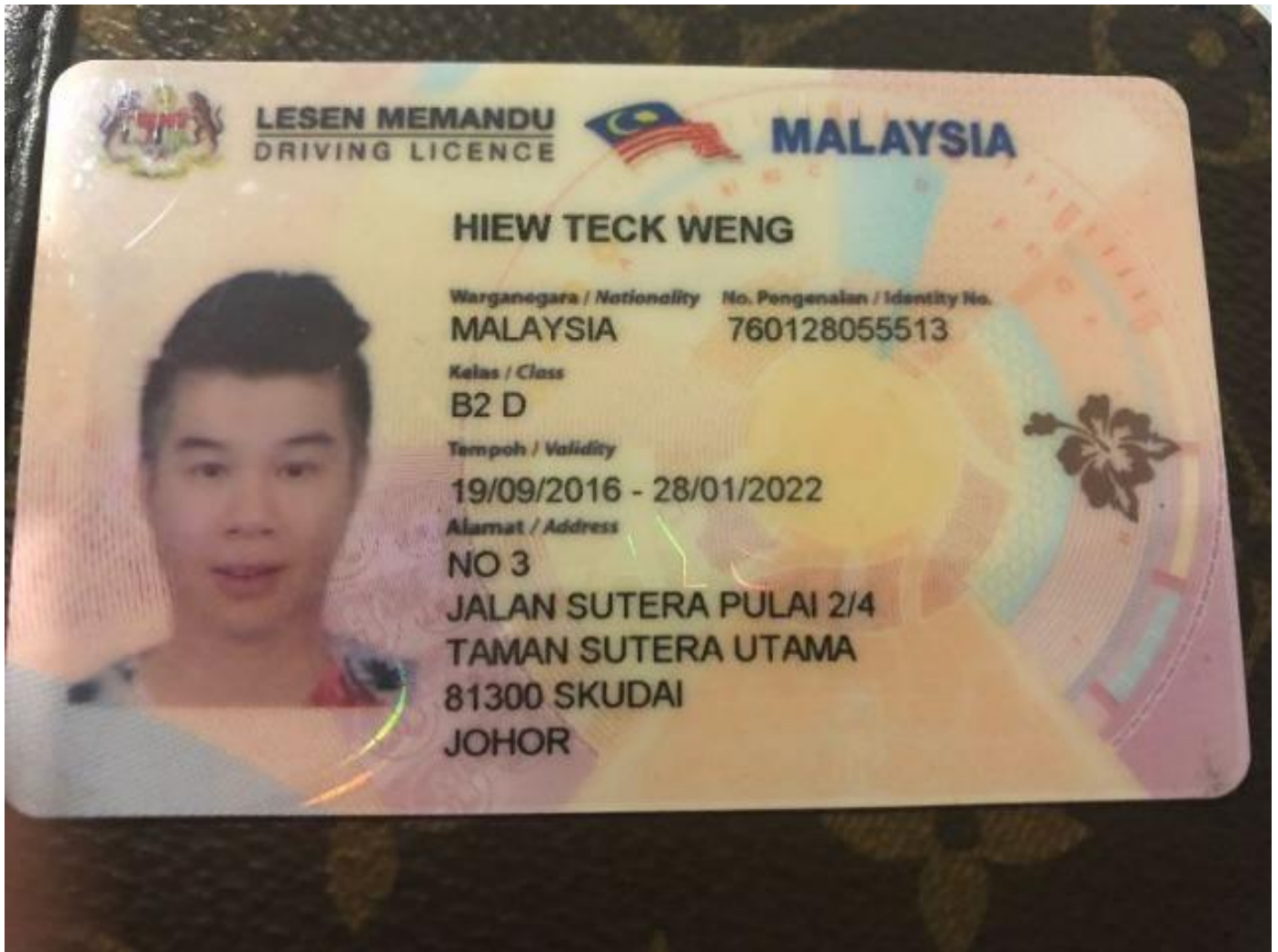
AmGeneral Insurance Berhad (491147)

A member of the AmBank Group

Head Office: No. 111, Jalan Tun Sunkar-Pusat, 50470 Kuala Lumpur, Malaysia. / PO Box 11228, 50142 Kuala Lumpur, 50142 Kuala Lumpur, Malaysia.

Tel: 1-800-88-3833 Email: customer@amgen.com Web: www.kurnia.com

2017 Registration No. 00170011115-1




Accident Photo




Accident Photo



 **WORK PERMIT**
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
CHAN BROTHERS TRAVEL (PTE) LTD

Sector: **SERVICE**

 Name:
HIEW TECK WENG



Occupation:
EXECUTIVE OFFICER


Work Permit No.
5 32531357

Date of Application
25-03-2010

Date of Issue
23-08-2017

Date of Expiry
23-08-2019

 **L8246501**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



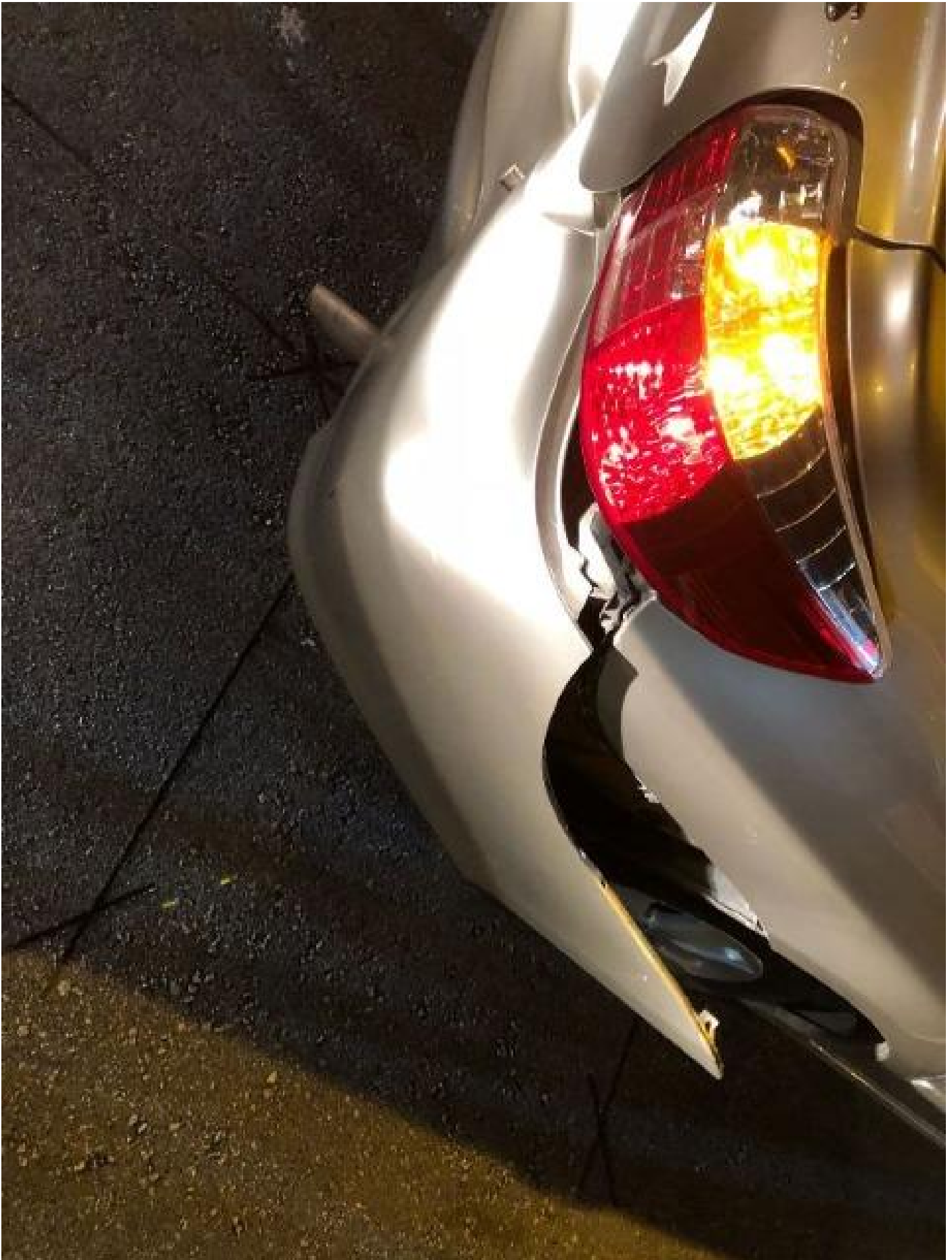
Accident Photo



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Accident Photo

