

## 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	24/07/2018 12:50
Date Of Accident	23/07/2018 16:50
Exact Location Of Accident	TRAFFIC LIGHT PUNGGOL RD TURN RIGHT SLE.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE620S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHONG YONG KWANG
NRIC No	S1638883A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96914276
Alternative Phone No	OFFICE-96914276

### Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE 1.5G CVT
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-004583
Cover Note Number	

### Driver

Name of Driver	ANGIE ANG CHEP LENG
NRIC No	S1770716G
Date Of Birth	27/10/1966
Occupation	INDOOR
Date Of Driving Pass	05/08/1991
Driving Experience	26 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96914276
Fax Number	
Contact Number	
EEmail Address	ANGIEANG66@GMAIL.COM

Address	HDB WOODLANDS, 169 WOODLANDS STREET 11 730169 #10-83
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

My car SLE620S was stationary in the traffic junction of PUNGGOL RD waiting to turn right towards TPE/SLE when suddenly car EN2712H hit onto rear of my car SLE620S. No injuries involved.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PENDING VIDEO FROM INSURED
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EN2712H
Vehicle Make/Model/Colour	SUZUKI/ SX4 1.6HB AT / BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BENNY LAI FU HAO
NRIC/Passport Number	S9424771C
Contact Number	96333857
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

**SKETCH PLAN**

### 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 liability**.
4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
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 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.
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.

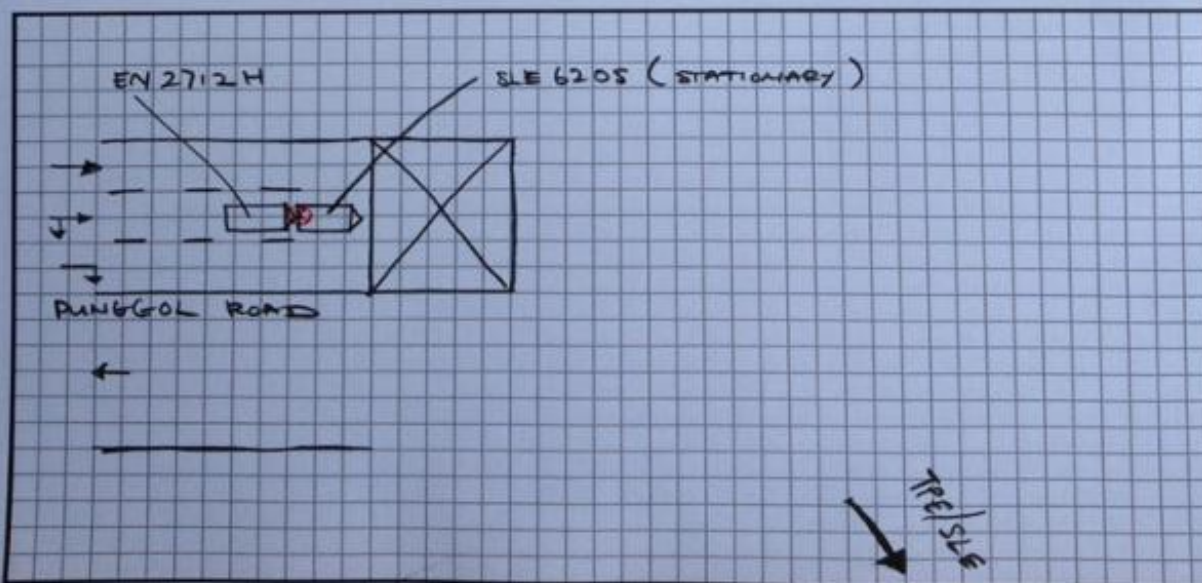
**VERIFIED BY AJAX MARS  
REPORTING OFFICER  
MOHD FADZLY BIN ISMAIL**

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel

### Sketch Plan



**ACCIDENT STATEMENT (2000 characters)**

My car SLE620S was stationary in the traffic junction of PUNGGOL RD waiting to turn right towards TPE/SLE when suddenly car EN2712H hit onto rear of my car SLE620S. No injuries involved.

Taxi Voucher No.:

**DECLARATION**

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MOHD FADZLY BIN ISMAIL

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

24 July 2018 10:29 am

Date/Time:

24 July 2018 10:29 am

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1770716G**

Name  
**ANGIE ANG CHEP LENG**

Birth Date: **27 Oct 1966**  
Issue Date: **23 Aug 2003**



 000767853A

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S1770716G**



Name  
**ANGIE ANG CHEP LENG**

**翁洁玲**

Race  
**CHINESE**

Date of Birth  
**27-10-1966**

Sex  
**F**

Country of Birth  
**SINGAPORE**







## Driving License

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

	PASS DATE
Class 2B Motorcycles $\leq$ 200 CC	01 Jan 2000
Class 2A Motorcycles between 201 CC and 400 CC	31 Jul 2001
Class 2 Motorcycles $>$ 400 CC	23 Jul 2013
Class 3 Motor cars $\leq$ 3000 kg with $\leq$ 7 passengers, exclusive of the driver, and motor tractors/vehicles $\leq$ 2500 kg	05 Aug 1991

S1770716G

S/No. 9000186372

Licence No. S1770716G

NP 428A

0 0 1 0 2 1 7

NRIC No. S1770716G

Blood Group A+ Date of issue 30-04-1993

APT BLK 169 WOODLANDS STREET 11 #10-03  
SINGAPORE 730169

NRIC No: S1770716G Date: 18-07-1998 No: 2649258