

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	30/07/2018 09:25
Date Of Accident	27/07/2018 17:30
Exact Location Of Accident	PIE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKL2222U
Insured/Policyholder	
Name Of Registered Owner	LEONG SIEW KHUEN
NRIC No	S1234166J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98199922
Alternative Phone No	Office-97516516

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S400
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?	YES
If No, Please state action to be taken	
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	2100434114-02
Cover Note Number	

Driver

Name of Driver	LEONG JINQUAN @ LIANG JINQUAN
NRIC No	S9320011Z
Date Of Birth	11/06/1993
Occupation	INDOOR
Date Of Driving Pass	05/02/2013
Driving Experience	5 YEARS AND 5 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98299292
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	99 DUCHESS RD
Postcode	269023
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	2
Passenger 1	Name: : UNKNOWN Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180728/2022

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE YIK
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB5332D
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJL4282U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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

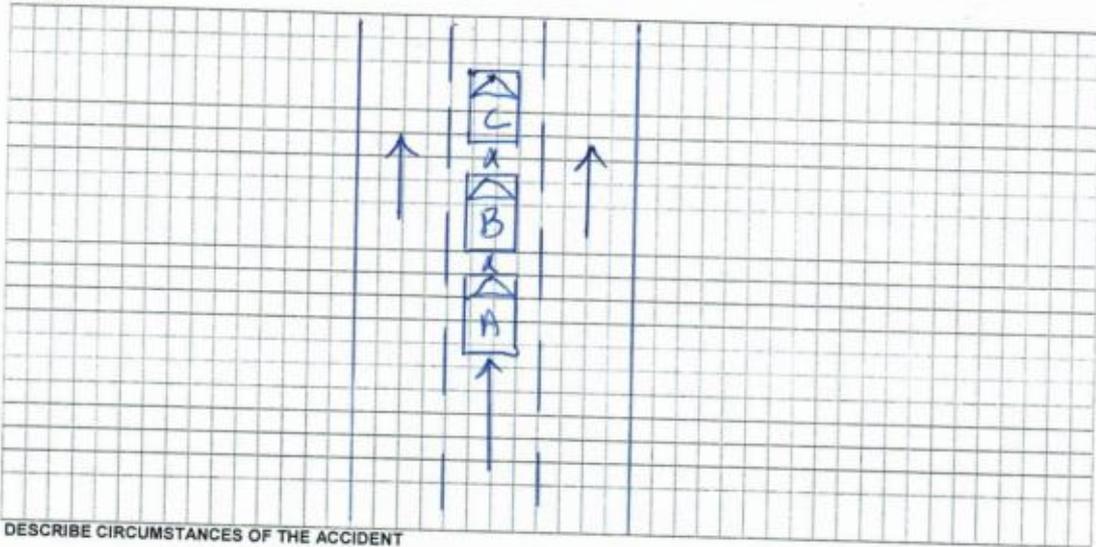


Driver's Signature
(If driver is not the policyholder)
Date & Time

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report no.
↑/20180728/2022

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)



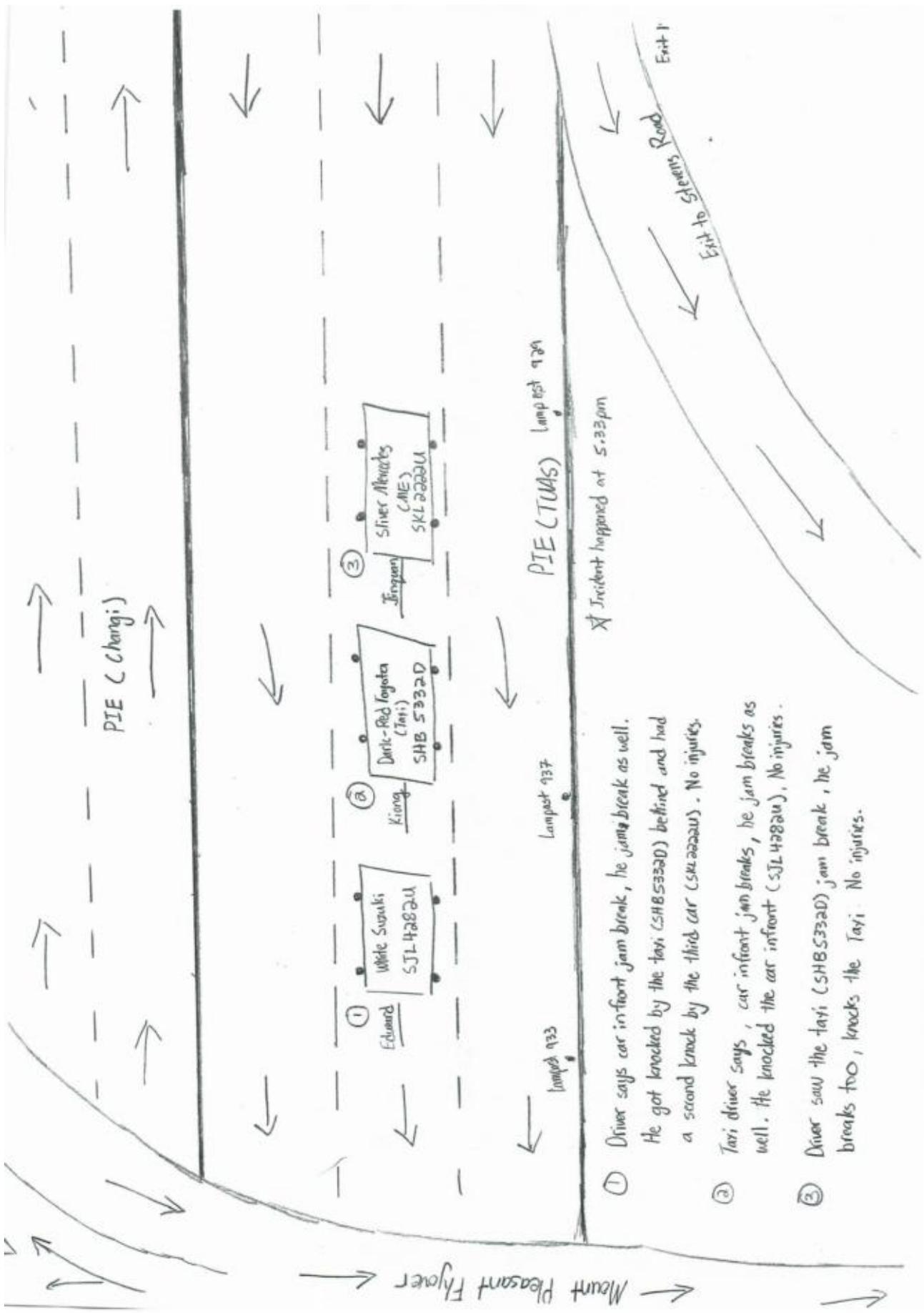
Policyholder's Signature
Date & Time



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

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe.yik@cyclecarriage.com.sg

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



- ① Driver says car in-front jam break, he jam break as well. He got knocked by the taxi (SHB5332D) behind and had a second knock by the third car (SKL2222U). No injuries.
- ② Taxi driver says, car in-front jam breaks, he jam breaks as well. He knocked the car in-front (SJT4282U). No injuries.
- ③ Driver saw the taxi (SHB5332D) jam break, he jam breaks too, knocks the Taxi. No injuries.

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180728/2022

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

1 of 4

Report No. T/20180728/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/07/2018 09:22		Vide Report No.:	Station Diary No.: 24
Informant's Particulars			
Name of Informant: LEONG JINQUAN		Address: 99 DUCHESS ROAD SINGAPORE 269023	
ID Type / ID No.: NRIC NO / S9320011Z		Contact No.: Home/Office: Mobile: 98299292	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 25	Date of Birth: 11/06/1993	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 27/07/2018 17:30	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY PIE towards Tuas after Stevens Rd Exit (Exit 19) in the middle lane				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 80 Km/h		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Heavy		
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
SHB5332D	Car	TOYOTA		Maroon	Seriously Damaged	2
SJL4282U	Car	SUZUKI		White	Slightly Damaged	0
SKL2222U	Car	MERCEDES BENZ		Silver	Seriously Damaged	1

Details of Person Involved

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

Accident Sketch Plan



Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

CONTINUATION OF REPORT

Driver			
Name	CHHI AIK KIONG		ID No. S1487581F
Related Vehicle	SHB5332D (Car)		Contact No. 96670397
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL
Driver			
Name	EDWARD KWA PENG RONG		ID No. S9423494H
Related Vehicle	SJL4282U (Car)		Contact No. 97549130
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL
Driver			
Name	LEONG JINQUAN		ID No. S9320011Z
Related Vehicle	SKL2222U (Car)		Contact No. 98299292
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 the 27/07/2018 at about 1733hrs, I was driving along PIE towards Tuas in the middle lane, after Stevens Road exit near lamppost 929.

I observed the taxi (SHB5332D) in front of me jam breaking and hitting on to another car (SJL4282U) in front of him, which causes me to jam break as well. My vehicle (SKL2222U) was not able to break in time, causing me to knocked in to the taxi.

The driver of SJL4282U informed that there was another car in front of him that jam breaks at first, thus causing him to jam break too. He was able to break in time to avoid collision but the cars behind were not able to, thus causing a chain collision.



**SINGAPORE
POLICE FORCE**



T/20180728/2022

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1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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Report No. T/20180728/2022

CONTINUATION OF REPORT

There was no injuries to any parties.

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180728/2022

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

4 of 4

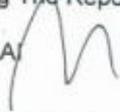
Report No. T/20180728/2022

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

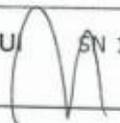
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
E /
Staff Sgt ISAAC YEO QING KAI 

Signature Of Informant:


Signature Of Interpreter:
Not applicable

Date/Time:
28/07/2018 09:22

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUJ  SN 170
Contact No.: 65476151

Classification Of Case:

 AUTHENTICATION STAMP
NP168
SIGNATURE

Accident Sketch Plan

Second Car

HP: 9667 0397

SHB 5332D - Taxi

No injuries

Car in front jam break, I jam break,
hit the car in front of me. (SJL 42824)

KIONG
CHAI AIK KIONG



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder	: Leong Siew Khuen	Vehicle No.	: SKL2222U
Period of Insurance	: 02 Nov 2017 To 01 Nov 2018	Policy No.	: 2100434114-02
Engine No.	: 27682430232172	Endorsement No.	:
Chassis No.	: WDD2221652A194904	Issued Date	: 02 Oct 2017

ABOUT THE COVER

Make/Model	: MERCEDES BENZ S400L BE SEDAN	Sum Insured	: Market Value	First Year of Registration	: 2015
Engine Capacity/Tonnage	: 2,996.00 CC	Off Peak Car	: No	Insuring with COE/PARF	: Yes
Driver Restriction	: NA				

Person or Classes of Persons Entitled to Drive*

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.
 * You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDRE") if You are or Your Authorised Driver (named or unnamed) is under the age of 25 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$2000 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Leong Siew Khuen - \$2000 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Eurasia Service Centre (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408600 67412308
2. Pandan Loop Service Center - Body Care & Repair (For accident repair & accident reporting) Add: 168 Pandan Loop Singapore 128576 67779366

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MERCEDES-BENZ FINANCIAL SERVICES (S) LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504380231

CYCLE & CARRIAGE - JQUEK
239 ALEXANDRA ROAD
SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

83000K

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S9320011Z**

Name:
LEONG JINQUAN
@ LIANG JINQUAN

Birth Date: **11 Jun 1993**

Issue Date: **05 Feb 2013**



FOR C&C USE ONLY

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

	EFFECTIVE DATE
Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	05 Feb 2013

FOR C&C USE ONLY

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

