

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 liability.
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	22/10/2018 16:26
Date Of Accident	21/10/2018 11:20
Exact Location Of Accident	TEMASEK BOULEVARD (ROUNDABOUT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX6048D
Insured/Policyholder	
Name Of Registered Owner	LING WEI MING
NRIC No	S8520325H
Email Address	MSGILING@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96249079
Alternative Phone No	OTHERS-90281868

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.0 AUTO ABS AIRBAG
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29066013 QMX
Cover Note Number	

Driver

Name of Driver	HUNG WING CHEE
NRIC No	S8270883I
Date Of Birth	24/09/1982
Occupation	INDOOR
Date Of Driving Pass	10/12/2012
Driving Experience	5 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90281868
Fax Number	
Contact Number	OTHERS-90281868
Email Address	MSGILING@HOTMAIL.COM

Address	BLK 526A PASIR RIS STREET 51 #11-509
Postcode	511526
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 - 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
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : NIL GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20181021/2076

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	SHC8553H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TOH KENG PENG
NRIC/Passport Number	S1438365D
Contact Number	92212554
Address	

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

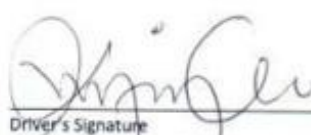
1. Please report correctly the details of the accident to speed up the claims process.
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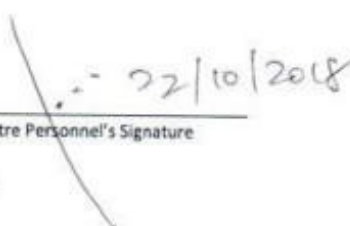
8. Consent under the Personal Data Protection Act (PDPA)

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.

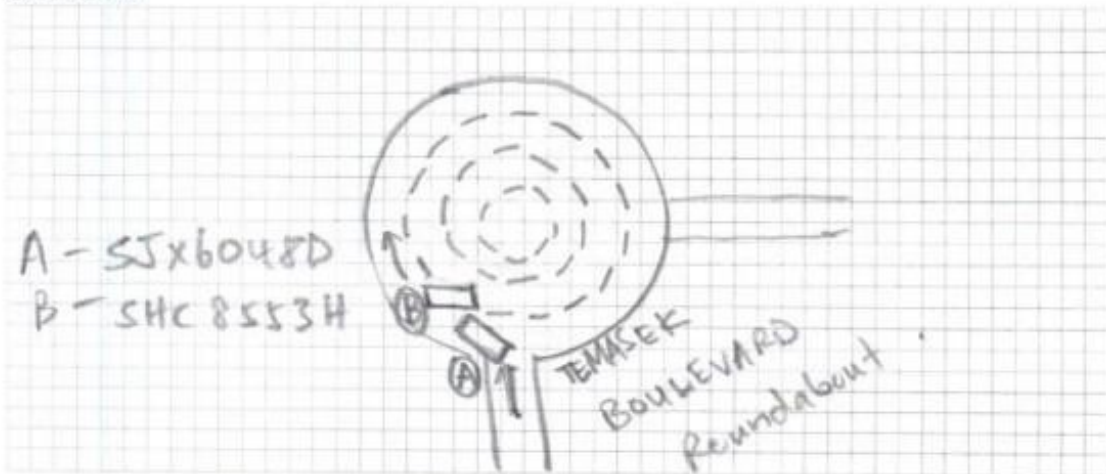
Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*Pls Refer to the Police Report
T/20181021/2076*

1. We were filtering into roundabout when other vehicle cut into the lane sharply and abruptly from another line
2. At the point of impact, our vehicle has pass the line, which means that our vehicle should have right of way.
3. Please refer to pictures for more information.

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:

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

12/11/2018, 10:00 AM, 10/11/2018, 10:00 AM

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20181021/2076

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20181021/2076

CONTINUATION OF REPORT

Driver			
Name	TOH KENG PENG		ID No. S1438365D
Related Vehicle	SHC8553H (TAXI)		Contact No. 92212554
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	HUNG WING CHEE		ID No. S8270883I
Related Vehicle	SJX6048D (Car)		Contact No. 90281868
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 21/10/2018 at about 1120hrs I was driving along Temasek Boulevard roundabout in my vehicle bearing the plate number SJX6048D. I check the roundabout before proceeding in and the road was clear. As I merged into the roundabout a Comfort Delgro taxi bearing the plate number SHC8553H came from the right and cut my lane causing my right bumper to hit his left side, my vehicle suffered dent on the bumper and broken headlight while his vehicle suffered minor dent and scratches as well. I went out to check if he was fine and no one was injured after the collision. I am lodging this report for my insurance's report purposes.

Sketch Plan #4

DRIVER

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8270883I



Name
HUNG WING CHEE
孔 穎 姿
Race
CHINESE
Date of Birth
24-09-1982 Sex
F
Country of birth
HONG KONG



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number **S8270883I**
Name
HUNG WING CHEE
Birth Date **24 Sep 1982**
Issue Date **10 Dec 2012**



9191594



NRIC No **S8270883I**



Nationality
CHINESE
Date of issue
23-02-2013

RESIDENCE
**APT BLK 52GA PASIR RIS STREET 51 #11-509
SINGAPORE 511526**

NRIC No: **S8270883I** Date: **16/03/2015**

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

10 Dec 2012



License No: S8270883I

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



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20181021/2076

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20181021/2076

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/10/2018 20:40	Vide Report No.:	Station Diary No.: 104
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Informant's Particulars

Name of Informant: HUNG WING CHEE			Address: APT BLK 526A PASIR RIS STREET 51 #11-509 SINGAPORE 511526		
ID Type / ID No.: NRIC NO / S8270883I			Contact No.: Home/Office: Mobile: 90281868		
Nationality: CHINESE			Email:		
Sex: Female	Age: 36	Date of Birth: 24/09/1982	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: IT ENGINEER			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 21/10/2018 11:20	Type of Location: Roundabout
Location: Along Road 1 TEMASEK BOULEVARD				
Roundabout				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC8553H	TAXI	HYUNDAI		Blue	Slightly Damaged	1
SJX6048D	Car	TOYOTA	Camry	Black	Slightly Damaged	1

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20181021/2076

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3
Report No. T/20181021/2076

CONTINUATION OF REPORT

Driver			
Name	TOH KENG PENG		ID No. S1438365D
Related Vehicle	SHC8553H (TAXI)		Contact No. 92212554
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	HUNG WING CHEE		ID No. S8270883I
Related Vehicle	SJX6048D (Car)		Contact No. 90281868
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
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Police Report



SINGAPORE
POLICE FORCE



T/20181021/2076

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No. T/20181021/2076

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:

G /

Sgt 2 MUHAMMAD SYAZWAN BIN SHAIBANI

Signature Of Informant:

[Handwritten Signature]

Signature Of Interpreter:

Not applicable

Date/Time:

21/10/2018 20:40

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168

