

## 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             | 20/11/2018 14:29                       |
| Date Of Accident           | 19/11/2018 14:00                       |
| Exact Location Of Accident | WOODLANDS RD TWDS WOODLANDS CHECKPOINT |
| Country/State of Loss      | SINGAPORE                              |

### DETAILS OF OWN VEHICLE

|                             |                           |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SKP657R                   |
| <b>Insured/Policyholder</b> |                           |
| Name Of Registered Owner    | MR CHUA KHIN KUANG, LOUIS |
| NRIC No                     | S8308393Z                 |
| Email Address               | NOEMAIL                   |
| Mobile Phone No             | (LOCAL) +65-98797269      |
| Alternative Phone No        | OTHERS-98797269           |

### Vehicle Particulars

|                                                                              |                            |
|------------------------------------------------------------------------------|----------------------------|
| Manufacturer                                                                 | VOLKSWAGEN                 |
| Model                                                                        | JETTA 1.4 TSI AT 1K23Q5 MX |
| 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 | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                                 |
| Fleet Policy              | NO                                            |
| Policy Number             | DMPCSN3095501700                              |
| Cover Note Number         |                                               |

### Driver

|                      |                           |
|----------------------|---------------------------|
| Name of Driver       | MR CHUA KHIN KUANG, LOUIS |
| NRIC No              | S8308393Z                 |
| Date Of Birth        | 11/03/1983                |
| Occupation           | INDOOR                    |
| Date Of Driving Pass | 13/11/2003                |
| Driving Experience   | 15 YEARS AND 0 MONTHS     |
| Gender               | MALE                      |
| Mobile Number        | (LOCAL) +65-98797269      |
| Fax Number           |                           |
| Contact Number       | OTHERS-98797269           |
| Email Address        | NOEMAIL                   |

|                                                     |                                    |
|-----------------------------------------------------|------------------------------------|
| Address                                             | BLK 663 YISHUN AVENUE 4<br>#02-211 |
| Postcode                                            | 760663                             |
| 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 | -<br>-<br>-                        |
| Insurance Company of Driver's Own Vehicle           | -<br>-<br>-                        |

#### General Information of the Accident

|                    |            |
|--------------------|------------|
| Type Of Accident   | SIDE SWIPE |
| 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)                                                     | 1   |

#### Details of Police Action

|                                           |                                                                                    |
|-------------------------------------------|------------------------------------------------------------------------------------|
| Was the accident reported to the police?  | YES                                                                                |
| If Yes, Please state which Police Station |                                                                                    |
| Police Station Name                       | YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE                                           |
| Police Station Address                    | <b>ROAD:</b> 32 YISHUN ST 81 , <b>POSTCODE:</b> 768456 , <b>COUNTRY:</b> SINGAPORE |
| Police Station Contact                    | <b>TEL NO:</b> 1800-8522999 - <b>FAX NO:</b> 68522239                              |
| Was notice of intended Prosecution given? | NO                                                                                 |
| If Yes, against whom?                     |                                                                                    |

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20181119/2116

#### 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 | PJR9405            |
| Vehicle Make/Model/Colour   |                    |
| Details Of Properties       |                    |
| Vehicle Category            | COMMERCIAL VEHICLE |
| 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

#### 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.

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

woodlands leader  
towards woodlands  
checkpoint.

A: SP657R  
B: PJR9405

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLEASE REFER TO POLICE REPORT NO. T/2018/119/2116.

## DECLARATION

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

Date &amp; Time:

Date & Time:

If driver is not the

Date &amp; Time:

Date & Time:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

NRE/FIN No.:

### Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20181119/2116

2 of 3

Report No. T/20181119/2116

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

#### CONTINUATION OF REPORT

| Vehicle Owner                     |                        |                                        |                                     |
|-----------------------------------|------------------------|----------------------------------------|-------------------------------------|
| Name                              | CHUA KHIN KUANG, LOUIS | ID No.                                 | S8308393Z                           |
| Related Vehicle                   | SKP657R (Car)          | Contact No.                            | 98797269                            |
| Hospital/Clinic                   | NIL                    | Class of Driving Licence & Expiry Date | Class: 3,4,5<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                    | Date Discharge                         | NIL                                 |
| No. of Days granted Medical Leave | NIL                    | Degree of Injury                       | NIL                                 |

#### **Brief Details.**

On 19/11/18 at about 1400hrs, I was driving my car (Silver, Volkswagon, vehicle registration plate number, SKP657R) along Woodlands Road towards Woodlands checkpoint. There is no other passenger inside my vehicle and my vehicle does not have any in car camera. As the traffic volume was quite heavy and jammed at that point of time, I decided to make a U turn back towards Kranji MRT station. I then showed signal that I want to change lane to the right lane so I can proceed to the U turn lane. When my vehicle is half way into the right lane, one white prime mover (White, Volvo, vehicle registration plate number, PJR9405) also move forward and eventually the left bumper of the prime mover hit onto my right passenger door however the other driver did not stop the vehicle and continue to move forward and eventually the left bumper of the prime mover also hit onto the right driver door of my vehicle. As the prime mover is unable to move forward, it stopped. I then came down from my vehicle from the other side and had exchanged particulars with the other driver namely, Ahmad Barizi Bin Azmudin, Malaysia IC: 881128-26-5351, residing at No 235 Lorong Markisa 18 Taman Markisa 86900 Endau, Johor. I also called for Police and Traffic Police subsequently came to scene as well, report reference, J/20181119/0131. I was advised to make a Traffic Police to lodge a report with regards to the said incident.



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8308393Z**



Name

**CHUA KHIN KUANG, LOUIS**

**蔡 錦 燿**

Race  
**CHINESE**

Date of birth  
**11-03-1983**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**



**S8308393Z**

**5282743**



NRIC No. **S8308393Z**



Date of issue  
**20-03-2014**

Address

**APT BLK 663 YISHUN AVENUE 4  
#02-211  
SINGAPORE 760663**

Sketch Plan #5

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S8308393Z**

Name: **CHUA KHIN KUANG, LOUIS**

Birth Date: **11 Mar 1983**

Issue Date: **13 Nov 2003**

000995585E



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

|         |                                                                                                                         | DATE        |
|---------|-------------------------------------------------------------------------------------------------------------------------|-------------|
| Class 3 | Motor cars $\leq$ 3000 kg with $\leq$ 7 passengers, exclusive of the driver; and motor tractors/vehicle: $\leq$ 2500 kg | 13 Nov 2003 |
| Class 4 | Heavy motor cars and motor tractors $>$ 2500 kg                                                                         | 27 Apr 2009 |
| Class 5 | Motor vehicles $>$ 7250 kg not constructed to carry any load                                                            | 19 Sep 2005 |

S8308393Z

S / No. 9000109035

NP 428A

Licence No: S8308393Z





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

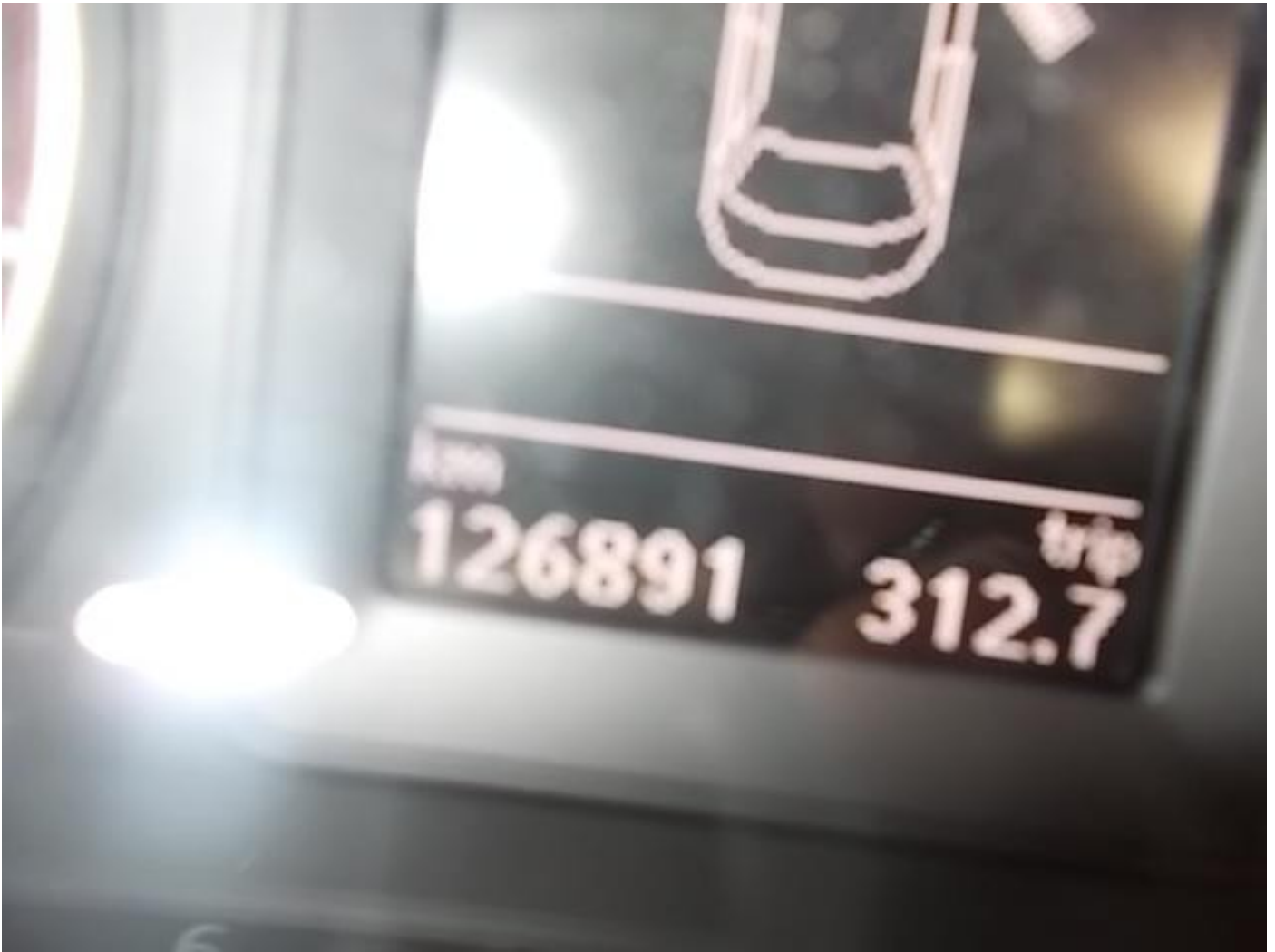


Accident Photo





Accident Photo





Accident Photo



Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20181119/2116

1 of 3

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

Report No. T/20181119/2116

## REPORT OF A TRAFFIC ACCIDENT

|                                              |            |                                     |                                                                  |                          |                            |
|----------------------------------------------|------------|-------------------------------------|------------------------------------------------------------------|--------------------------|----------------------------|
| Date/Time Report Made:<br>19/11/2018 16:35   |            | Vide Report No.:<br>J/20181119/0131 |                                                                  | Station Diary No.:<br>80 |                            |
| <b>Informant's Particulars</b>               |            |                                     |                                                                  |                          |                            |
| Name of Informant:<br>CHUA KHIN KUANG, LOUIS |            |                                     | Address:<br>APT BLK 663 YISHUN AVENUE 4 #02-211 SINGAPORE 760663 |                          |                            |
| ID Type / ID No.:<br>NRIC NO / S8308393Z     |            |                                     | Contact No.:<br>Home/Office: Mobile: 98797269                    |                          |                            |
| Nationality:<br>SINGAPORE CITIZEN            |            |                                     | Email:                                                           |                          |                            |
| Sex:<br>Male                                 | Age:<br>35 | Date of Birth:<br>11/03/1983        | Type of Informant:<br>Vehicle Owner                              |                          |                            |
| Race:<br>Chinese                             |            |                                     | Language:<br>English                                             |                          | Institution / School Name: |
| Occupation:<br>Unemployed                    |            |                                     | Driving Licence Information:<br>Class: 3,4,5                     |                          | Date of Expiry:            |

## General Information of the Accident

|                                                                             |                                  |                      |                                            |                                     |
|-----------------------------------------------------------------------------|----------------------------------|----------------------|--------------------------------------------|-------------------------------------|
| Type of Accident:                                                           | Non-Injury<br>Attended by Police | Drink Drive:<br>No   | Date/Time of Accident:<br>19/11/2018 14:00 | Type of Location:                   |
| Location:<br>Along Road 1<br>WOODLANDS ROAD                                 |                                  |                      |                                            |                                     |
| Woodlands Road towards Woodlands Checkpoint                                 |                                  |                      |                                            |                                     |
| Weather:<br>Clear                                                           |                                  | Road Surface:<br>Dry |                                            | Road Speed Limit:                   |
| Traffic Flow:                                                               |                                  | Traffic Control:     |                                            | Traffic Volume:<br>Heavy            |
| Type of Collision:<br>Between Moving Vehicles - Side Swipe - Same Direction |                                  |                      |                                            | Anyone conveyed by ambulance:<br>No |

## Details of Vehicle Involved

| Vehicle No. | Type        | Make           | Model | Color  | Condition       | No of Passenger |
|-------------|-------------|----------------|-------|--------|-----------------|-----------------|
| PJR9405     | Prime Mover | VOLVO          |       | White  | Totally Damaged | 2               |
| SKP657R     | Car         | VOLKSWAGO<br>N |       | Silver | Totally 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/20181119/2116

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

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Report No. T/20181119/2116

### CONTINUATION OF REPORT

| Vehicle Owner                     |                        |                                        |                                     |
|-----------------------------------|------------------------|----------------------------------------|-------------------------------------|
| Name                              | CHUA KHIN KUANG, LOUIS | ID No.                                 | S8308393Z                           |
| Related Vehicle                   | SKP657R (Car)          | Contact No.                            | 98797269                            |
| Hospital/Clinic                   | NIL                    | Class of Driving Licence & Expiry Date | Class: 3,4,5<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                    | Date Discharge                         | NIL                                 |
| No. of Days granted Medical Leave | NIL                    | Degree of Injury                       | NIL                                 |

### Brief Details.

On 19/11/18 at about 1400hrs, I was driving my car (Silver, Volkswagon, vehicle registration plate number, SKP657R) along Woodlands Road towards Woodlands checkpoint. There is no other passenger inside my vehicle and my vehicle does not have any in car camera. As the traffic volume was quite heavy and jammed at that point of time, I decided to make a U turn back towards Kranji MRT station. I then showed signal that I want to change lane to the right lane so I can proceed to the U turn lane. When my vehicle is half way into the right lane, one white prime mover (White, Volvo, vehicle registration plate number, PJR9405) also move forward and eventually the left bumper of the prime mover hit onto my right passenger door however the other driver did not stop the vehicle and continue to move forward and eventually the left bumper of the prime mover also hit onto the right driver door of my vehicle. As the prime mover is unable to move forward, it stopped. I then came down from my vehicle from the other side and had exchanged particulars with the other driver namely, Ahmad Barizi Bin Azmudin, Malaysia IC: 881128-26-5351, residing at No 235 Lorong Markisa 18 Taman Markisa 86900 Endau, Johor. I also called for Police and Traffic Police subsequently came to scene as well, report reference, J/20181119/0131. I was advised to make a Traffic Police to lodge a report with regards to the said incident.



Police Report



**SINGAPORE  
POLICE FORCE**



T/20181119/2116

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

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Report No. T/20181119/2116

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:<br>F /<br>Sgt 2 OOI JIA JUN                                            | Signature Of Informant:<br>       |
| Signature Of Interpreter:<br>Not applicable                                                                       | Date/Time:<br>19/11/2018 16:35    |
| Officer In Charge Of Case:<br>TP / GIT /<br>Staff Sgt MOHAMED HUSNUL TAUFIQ BIN MD YUSOF<br>Contact No.: 65476358 | Classification Of Case:<br>SN 085 |
| Authentication Stamp<br>NP168<br><br>Signature:<br>Singapore Police Force                                         |                                   |