

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	12/12/2018 11:34
Date Of Accident	11/12/2018 22:05
Exact Location Of Accident	ALONG WOODLANDS CAUSEWAY TOWARDS WOODLANDS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF9943J
Insured/Policyholder	
Name Of Registered Owner	ANG ZHI RUI (HONG ZHIRUI)
NRIC No	S8005990F
Email Address	ZHIRUIANG@YAHOO.CO.UK
Mobile Phone No	(LOCAL) +65-97765847
Alternative Phone No	OTHERS-97765847

Vehicle Particulars

Manufacturer	TOYOTA
Model	SIENTA HYBRID-1.5 X CVT (A)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5105797676
Cover Note Number	

Driver

Name of Driver	ANG ZHI RUI (HONG ZHIRUI)
NRIC No	S8005990F
Date Of Birth	04/03/1980
Occupation	INDOOR
Date Of Driving Pass	10/02/2003
Driving Experience	15 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97765847
Fax Number	
Contact Number	OTHERS-97765847
E Mail Address	ZHIRUIANG@YAHOO.CO.UK

Address	BLK 264 BISHAN STREET 24 #09-110
Postcode	570264
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	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JRG74 (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)	3
Passenger 1	NAME: : MOTHER GENDER: : FEMALE
Passenger 2	NAME: : FATHER GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5529999 - FAX NO: 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20181211/2165

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

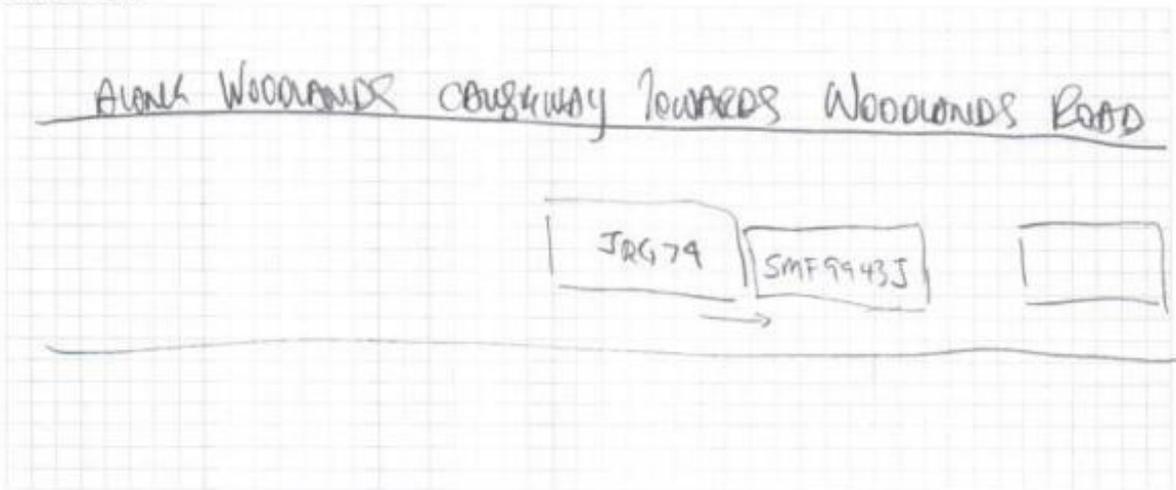
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JRG74
Vehicle Make/Model/Colour	HONDA CRV
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	HAZMAN BIN HASSAN
NRIC/Passport Number	A35084076
Contact Number	+60167332234
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11th Dec 2018 at 10:00pm, I was driving along Woodlands Crossing on the way back from Malaysia to Singapore. As there was heavy traffic across the causeway, my car was static and waiting in the traffic. Suddenly, I felt a loud bump to the boot of my car. I came out of the car and found out that the car behind me (JRG79) had bumped into my boot.

Police Report T/20181211/2165

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:

12/12/2018
Reporting Centre Personnel's Signature
Name: Rachel Luthers
NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181211/2165

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20181211/2165

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMF9943J	NTUC Income Insurance Co-Operative Limited	5105797676	30/11/2018	29/11/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	HAZMAN BIN HASSAN		ID No.	A35094076
Related Vehicle	JRG74 (Car)		Contact No.	+60 167332234
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	ANG ZHI RUI		ID No.	S8005990F
Related Vehicle	SMF9943J (Car)		Contact No.	97765847
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	Slight

Brief Details.

On 11/12/2018 at 2202hrs, I was driving my vehicle (SMF9943J) along Woodlands Causeway heading towards Woodlands Road. There was a heavy traffic, as such I was stationary behind another vehicle. When suddenly I felt an impact from the rear of my vehicle. I then alighted from the vehicle and noticed a vehicle (JRG74) had collided onto the rear portion of my vehicle. We both then took a few photos of the accident, exchanged particulars and went separate ways. There was no one injured at that point of time.

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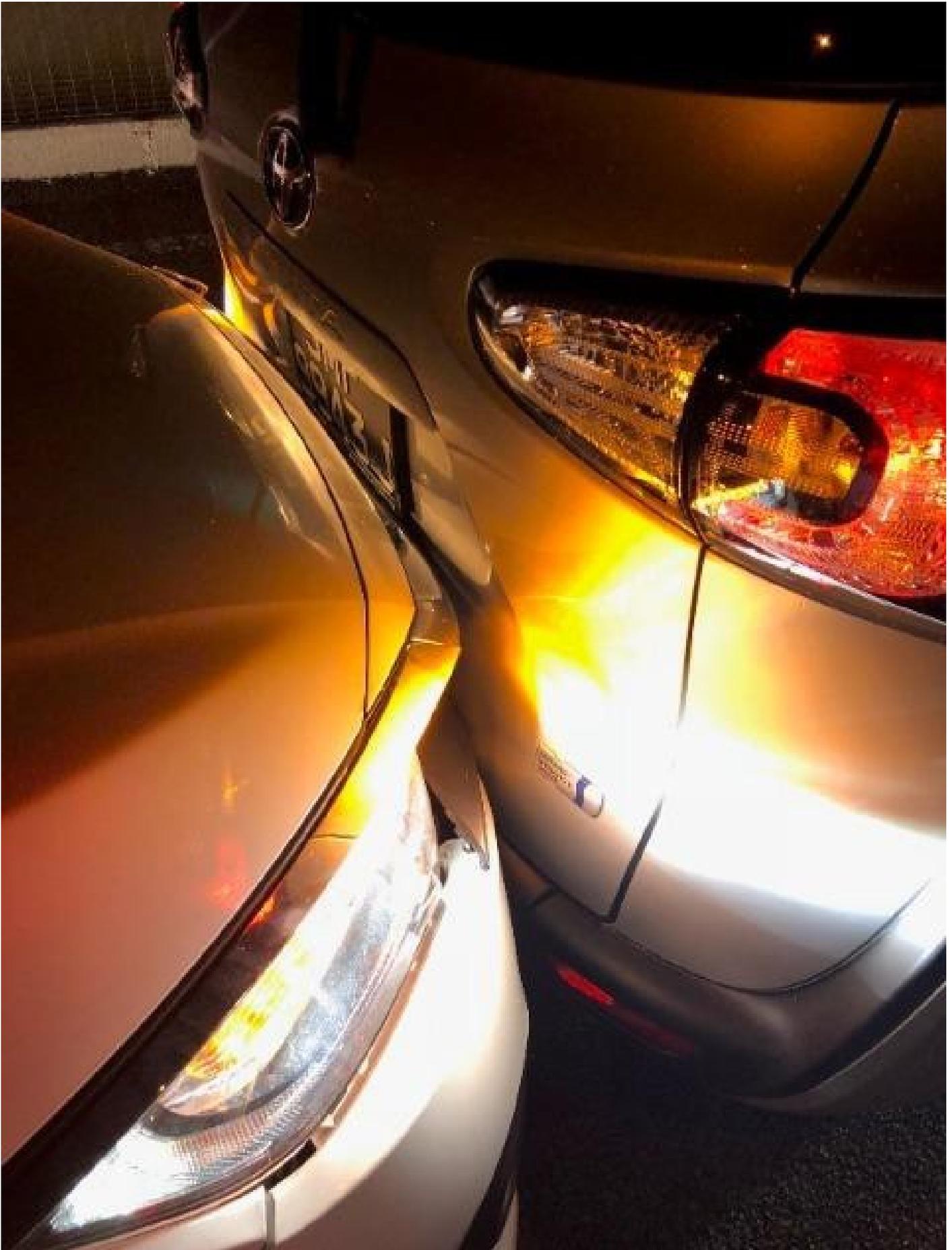
Sketch Plan

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 / Sgt 2 MOHAMAD FAIZAL BIN HASHIM TOH	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/12/2018 23:32
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No.: 65476404	Classification Of Case:
Authentication Stamp NP158 	

Accident Photo



Accident Photo



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