

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	12/01/2019 12:10
Date Of Accident	10/01/2019 19:40
Exact Location Of Accident	AYE TWDS TUAS AT THE EXIT 9 SIGNAGE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC7704Z
Insured/Policyholder	
Name Of Registered Owner	CHAN SOW LENG
NRIC No	S0914890F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96170231
Alternative Phone No	OTHERS-96170231

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099983762
Cover Note Number	

Driver

Name of Driver	DEAN NG GUO SHENG
NRIC No	S9128999G
Date Of Birth	09/08/1991
Occupation	OUTDOOR
Date Of Driving Pass	22/08/2013
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92358841
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	16 CACTUS DRIVE #06-01
Postcode	809690
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - GRAND 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?	YES
Foreign Vehicle Registration Number	JSV8557 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	YES
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	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/2190110/2164

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	JSV8557
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN KWAN YU
NRIC/Passport Number	
Contact Number	85713449
Address	
Postcode	

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMD6410K
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHUA YUAN KIT
NRIC/Passport Number
Contact Number 92969402
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLF4639H
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHOONG XING DING ANGELINE
NRIC/Passport Number
Contact Number 96537777
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name DEAN NG GUO SHENG
Approximate Age
Injuries Sustain SLIGHT
Injured person in which vehicle? SLC7704Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident 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.

Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

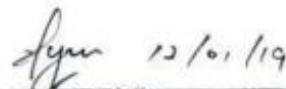
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 (a) 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:

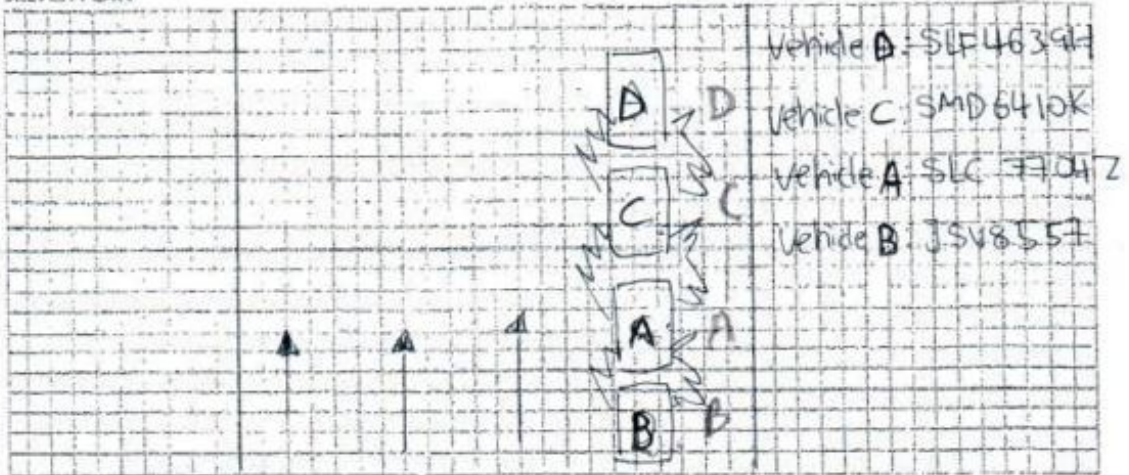
 12/01/19

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

Accident Sketch Plan

Along Road 1, AYER RAJAH EXPRESSWAY
AYE Towards Tuas at the Exit 9 signage

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Follow Police Report

DECLARATION


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

chan Sow Leng

Policyholder's Signature
Date & Time:



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

 12/01/19

Reporting Person's Signature
Name:
NRIC/PIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190110/2164

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 3

Report No. T/20190110/2164

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	DEAN NG GUO SHENG	ID No.	S9128999G
Related Vehicle	NIL	Contact No.	92358841
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/01/2019 at about 1940hrs, I was driving my car with registration number SLC7704Z along AYE towards Tuas on the right most lane. I was travelling at about 85km/h. The vehicle in front of mine is a White Volkswagen Golf with registration plate number SMD6410K. I noticed that the driver will brake occasionally while driving. I did not tailgate the car in front of mine. At the Exit 9 signage, all of a sudden the White Volkswagen jam brake and in order not to collide into the White Volkswagen, I jammed my brake as well. My car stopped just before the White Volkswagen. my car did not hit the White Volkswagen. A second later, I felt an impact from my rear and my car surged forward and hit the White Volkswagen in front of me.

I got down from my car and realized that a Black Toyota with registration plate JSV8557 had hit my car from the rear. My car hit the rear of the White Volkswagen and the White Volkswagen had hit the rear of the car in front of it, a Black Nissan with registration plate SLF4639H. I exchanged particulars with the drivers of the other 3 cars, took photos of the damage and someone else called for Police. Police officers and Ambulance arrived, made a check on all who were involved in the chain collision no one is conveyed to hospital.

The car plate and particulars of the drivers as follows:

- 1st Car: SLF4639H Driver: Choong Xing Ding Angeline (hp:96537777)
- 2nd Car: SMD6410K Driver: Chua Yuan Kit (hp: 92969402)
- 3rd Car: SLC 7704Z Driver: Dean Ng (hp: 92358841)
- 4th Car: JSV8557 Driver: Chan Kwan Yu (hp: 85713449)

I am lodging this report for insurance claim purposes.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

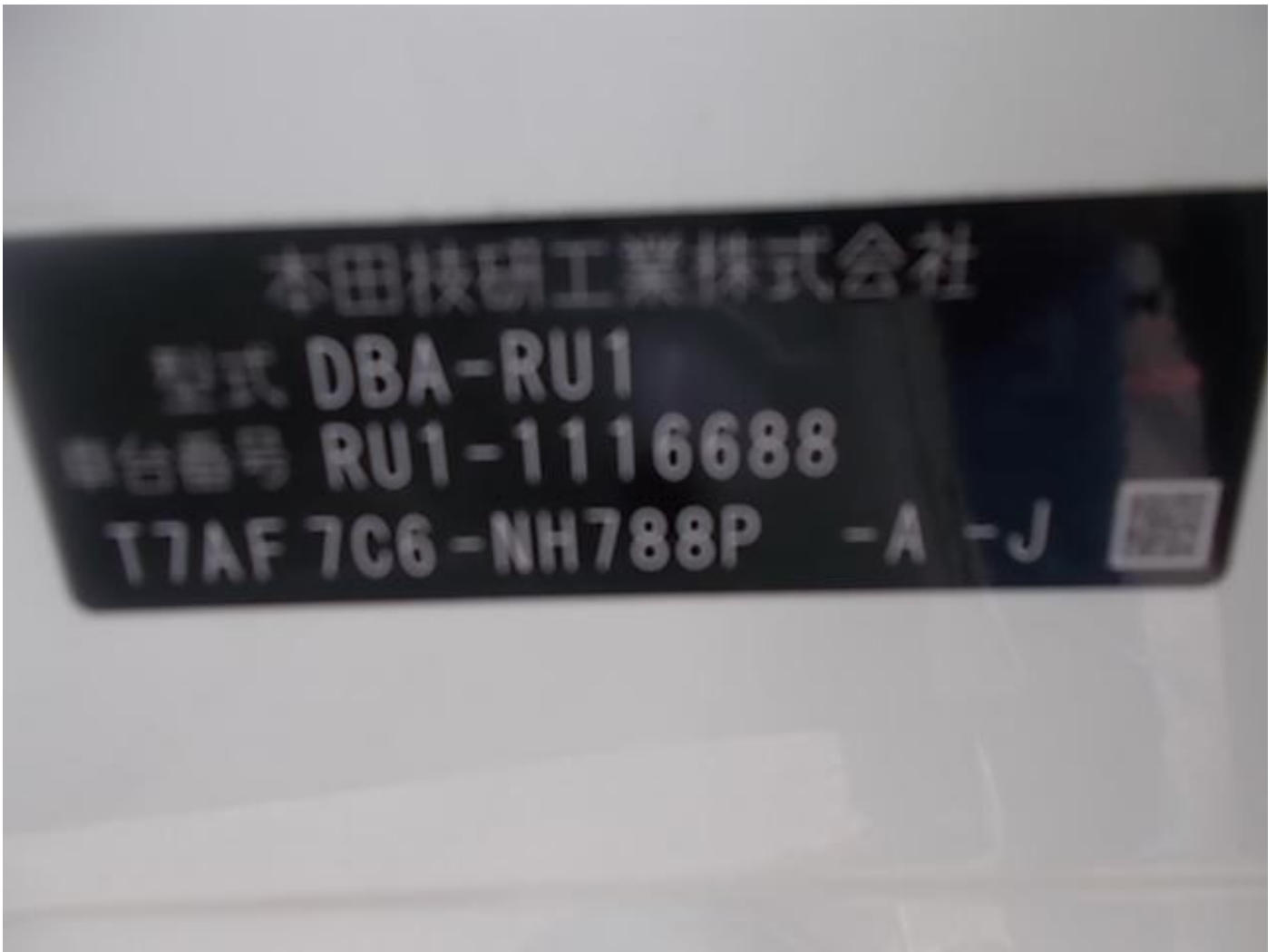


Accident Photo



Accident Photo





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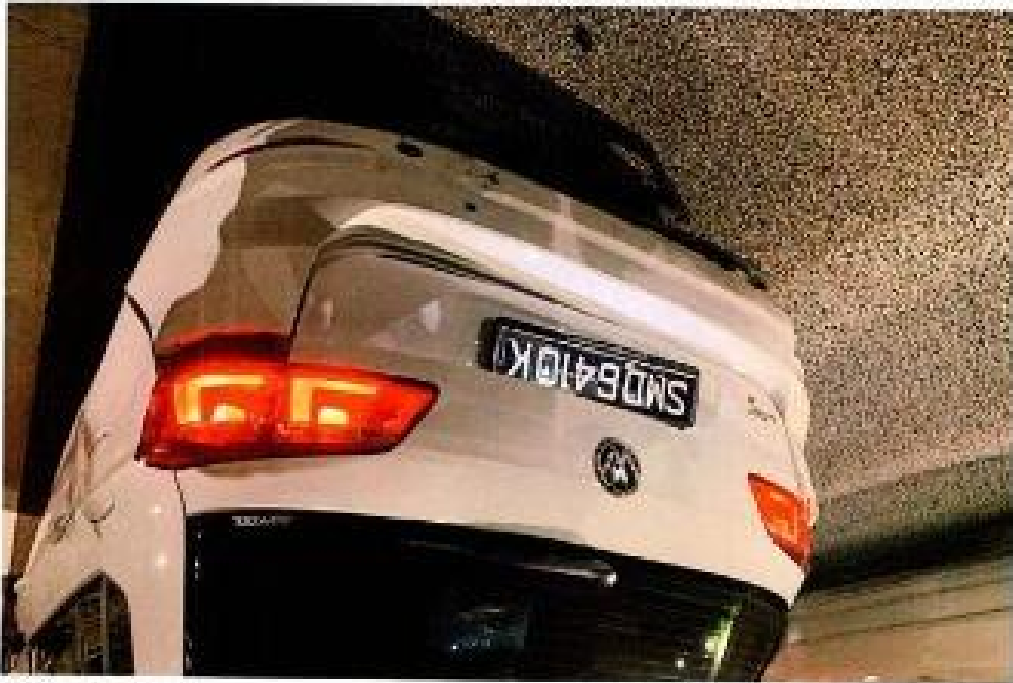
Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190110/2164

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
648482
Tel No: 1800-7929999

1 of 3

Report No. T/20190110/2164

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/01/2019 22:50	Vide Report No.: D/20190110/0099	Station Diary No.: 243
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Informant's Particulars			
Name of Informant: DEAN NG GUO SHENG		Address: 16 CACTUS DRIVE #05-01 SINGAPORE 809690	
ID Type / ID No.: NRIC NO / S9128999G		Contact No.: Home/Office: Mobile: 92358841	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 27	Date of Birth: 09/08/1991	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: SALES EXECUTIVE		Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/01/2019 19:40	Type of Location: Expressway
Location: Along Road 1 AYER RAJAH EXPRESSWAY AYE towards Tuas at the Exit 9 signage				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Moderate	
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
JSV8557	Car				Slightly Damaged	0
SLC7704Z	Car				Seriously Damaged	0
SLF4639H	Car				Slightly Damaged	0
SMD6410K	Car				Slightly Damaged	1

Police Report



**SINGAPORE
POLICE FORCE**



T/20190110/2164

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7928999

2 of 3

Report No. T/20190110/2164

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	DEAN NG GUO SHENG	ID No.	S9128999G
Related Vehicle	NIL	Contact No.	92358841
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
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No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

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I am lodging this report for insurance claim purposes.

Police Report



SINGAPORE
POLICE FORCE



T/20190110/2164

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

Report No: T/20190110/2164

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:

Sgt 2 TAN LITEK

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

10/01/2019 22:50

Officer In Charge Of Case:

TP / GIT /

Sgt 3 RASHIDAH BINTE AZMAN

Contact No: 65478216

Classification Of Case:

Authentication Stamp
NP108



Signature:

Officer In Charge Of Case