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 witholding 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.

	ACCIDENT STATEMENT
Date Of Report	24/01/2019 17:50
Date Of Accident	23/01/2019 18:10
Exact Location Of Accident	UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKA5370M
Insured/Policyholder	
Name Of Registered Owner	PANG TONG FONG
NRIC No	\$7124812G
Email Address	RAYMOND@CURRENT.COM.SG
Mobile Phone No	(LOCAL) +65-93874748
Alternative Phone No	OTHERS-93874748

					rs.

Manufacturer NISSAN

Model TEANA 2.5 CVT ABS D/AB HID 2WD 4DR

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 TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 18-MX002338-R04

Cover Note Number 05/04/2018 - 04/04/2019

Driver

Name of Driver PANG TONG FONG

 NRIC No
 \$7124812G

 Date Of Birth
 26/07/1971

 Occupation
 INDOOR

 Date Of Driving Pass
 07/07/1992

Driving Experience 26 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93874748

Fax Number

Contact Number OTHERS-93874748

EMail Address RAYMOND@CURRENT.COM.SG

Address BLK 122B SENGKANG EAST WAY #12-19

Postcode 542122

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 **CHAIN COLLISION**

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : PANG XINYING, CASSIA

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

YE\$

3

NO

NO

2

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] ANG MO KIO DIVISION HQ

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLV6334P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TAN PANG KUAN, JASON

S9029668Z NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SDA1648Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

YEO KIM NEO

S1477531E

Sketch Plan Pg. 1

Time: 17-10 Location: Con	or Serangun rand
Date of accident: 23/01/9. Time: 18-10 Location: Opposite of Accident: 23/01/9. Time: 18-10 Location: Opposite of Accident: 23/01/9. Time: 18-10 Location: Opposite of Accident: 23/01/9.	Vehicle C: SDA 16484
SKETCH PLAN	
SDA 16484. SKA 5370M	5LV6334p
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
Refer to police report	
Ven C: Yeo Kim Neo SIL	
Claim OD/TP at Ah Lim Motor . Claim De TP at other works Remarks: Please forward a copy of my efile accident report to: My workshop: Jingkia Car Services Email address: Jingkia carservices @ Jahao.com.sg & myself: Email address: Common De Com. Sg Note: Please take note that your insurer have 14 days timeframe for you to	
you own policy. Kindly check with your own insurer for more information.	
DECLARATION I/We declare the foregoing particulars are true in every respect. 24/01/4 24/01/9.	A H
Policyhelder's Signature Date & Time: Date & Time: Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

AHLIM MOTOR COMPANY

Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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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.
- 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:
 - (1) 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.:





1 of 3

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No:1800-2180000

Report No. F/20190124/7022

Date/Time Report Made 24/01/2019 16:09	Vide Report No.			Station Diary No.	
Name Of Informant	Address	;			
PANG TONG FONG	APT BLK 122B SENGKANG EAST WAY #12-19				
	SINGAF	ORE 5421:	22		
ID Type / ID No.	Contact				
NRIC NO / S7124812G	Home/Office: Mobile:		Mobile:		
	93874748				
Nationality	Email Address				
SINGAPORE CITIZEN	raymond@current.com.sg				
Occupation	Sex	Age	Date of Birth	Race	
Managing director/Chief executive officer	Male	47	26/07/1971	Chinese	
Institution/School Name	Languag	19.11(190			
	English				
Date/Time Of Incident .	Location Of Incident				
23/01/2019 18:00 - 23/01/2019 18:10	APT BLK 122B SENGKANG EAST WAY #12-19				
<u> </u>	SINGAPORE 542122				
Brief details.					

I am the owner of car (license number SKA5370M) and I was involved in a 3 cars traffic accident along Upper Serangoon road just outside Kovan MRT on 23 January 2018 at about 6pm.

It was the evening rush hour and my car was stationary at the traffic junction. My car was knocked from the rear by another driver (car license number SLV6334P). My daughter was in the front passenger seat with me. Luckily, both my daughter and I have our seat belt on.

It was quite a big impact - the rear of my car was severely smashed in while the front of the vehicle

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/01/2019 16:09
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190124/7022

SLV6334P was severely dented in. I have observed that for Vehilce SLV6334P, both of the front airbags were activated, water was dripping and there was also some smoke/ steam coming out from the engine compartment. The driver repeatedly apoliogised and explained that his slipper gave way while braking and his foot slipped and stepped onto the accelerator instead.

As a result of the impact, my car slightly bumped into the front vehicle (Mercedes SDA1648Y) as the Mercedes was driving away.

The back car driver (SLV6334P) seems to be in shock, was visibly shaken and was stammering when speaking He also complained of some ringing sound in his ear. I called the police and a TP and an ambulance arrived to assess his condition.

The lady Mercedes driver reported that she was fine to the TP and the Paramedic. I had whiplash soreness to my neck immediately post accident.

As I have a persistent soreness. I had seen a medical doctor the next day on 24 January and was prescribed with 2 days MC and some medications.

Selection in the Section Secti			1000
Person Name	PANG TONG FONG		
ID Type	NRIC NO	ID No	071040400
Gender	Male	Age	S7124812G
Race	Chinese	Language	47
Occupation	Managing director/Chief	Address Type	English
	executive officer	Address Type	

Signature Of Officer Recording The Report:	Signature Office		
Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 24/01/2019 16:09		
Officer In-Charge Of Case:	Classification Of Case:		
Authentication Stamp			





3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190124/7022

Address	APT BLK 122B SENGKANG EAST WAY #12-19	Mobile No	93874748	
	SINGAPORE 542122			
s Informant A	Yes			
Victim?				
Person Name	PANC TONG FONO (L.			
erson rame	PANG TONG FONG (Informan	t)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/01/2019 16:09
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	