

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	29/01/2019 12:21
Date Of Accident	29/01/2019 11:50
Exact Location Of Accident	ALONG JLN BOON LAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR9690L
Insured/Policyholder	
Name Of Registered Owner	HUANG YISHU
NRIC No	S8778445B
Email Address	ANDY.YISHU@ICLOUD.COM
Mobile Phone No	(LOCAL) +65-96641957
Alternative Phone No	OFFICE-96641957

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C350E-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	5096924396
Cover Note Number	

Driver

Name of Driver	HUANG YISHU
NRIC No	S8778445B
Date Of Birth	19/04/1987
Occupation	INDOOR
Date Of Driving Pass	05/10/2015
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96641957
Fax Number	
Contact Number	OFFICE-96641957
EMail Address	ANDY.YISHU@ICLOUD.COM

Address	BLK 669C JURONG WEST STREET 64 #05-68
Postcode	643669
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 - CHANGE/CROSS LANE
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	2
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN

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	XD318D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MOHD FADIL BIN MD TAHIR
NRIC/Passport Number	S7428181H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	HUANG YISHU
------	-------------

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

NECK & BACK INJURY

SLR9690L

YES

NO

SKETCH PLAN


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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

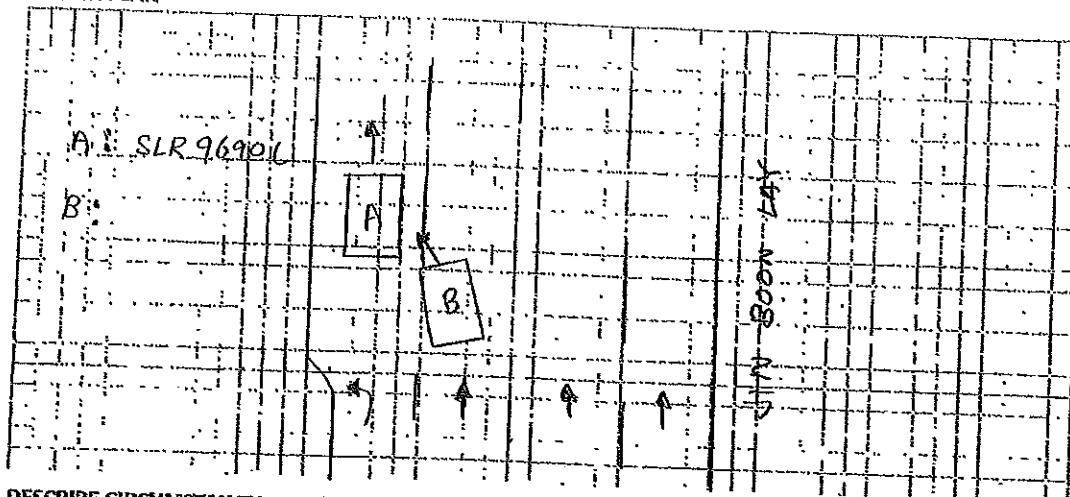
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: **Danny Ong**
NRIC/FIN No.: **Claims Adviser**
HP: **9325 5558**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING AT JLN BOON LAY
ON THE VERY LEFT LANE.
GOING TO AYE.
BEHIND WAS A VEDIA TRUCK.
SUDDENLY HIT ME FROM RIGHT SIDE.
THEN HE DIDN'T NOTICE HITTING ME,
PUSHING ME A FEW METERS FORWARD
CAUSING THE RIGHT BEHIND SIDE OF
MY CAR TOTALLY WRECKED

DECLARATION

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

Policyholder's Signature
Date & Time:

GRU/HC Sketch #2 A/T Form V3

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

Hu Han Yishu
29 FEB 19

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

Danny Ong
Claims Advisor
HP: 9328 8888



**SINGAPORE
POLICE FORCE**



J/20190129/7027

1 of 2

POLICE REPORT (NP299)

Report No. J/20190129/7027

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 29/01/2019 15:08	Vide Report No.	Station Diary No.
Name Of Informant HUANG YISHU	Address APT BLK 669C JURONG WEST STREET 64 #05-68 SINGAPORE 643669	
ID Type / ID No. NRIC NO / S8778445B	Contact No. Home/Office: Mobile: 96641957	
Nationality SINGAPORE CITIZEN	Email Address andy.yishu@gmail.com	
Occupation Other business services and administration managers nec	Sex Male	Age 31
	Date of Birth 19/04/1987	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 29/01/2019 11:30 - 29/01/2019 11:40	Location Of Incident JALAN BOON LAY	

Brief details.

Car accident on 29/01/2019

I WAS TRAVELLING ALONG JLN BOON LAY WITH MY VEHICLE NUMBER BEARING (SLR9690L) ON 29/01/2019 AT AROUND 1150 HRS, I WAS DRIVING ON THE EXTREME LEFT LANE, ALL OF THE SUDDEN, A TRUCK (XD318D) WHICH WAS ON THE RIGHT LANE FILTER INTO MY LANE AND COLLIDED ONTO MY VEHICLE.

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: 29/01/2019 15:08
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



J/20190129/7027

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20190129/7027

THE IMPACT WAS HUGE AND IT MADE MY CAR SURGE FORWARD. AFTER THE ACCIDENT, WE CAME DOWN TO EXCHANGE PARTICULAR.

I WAS UNWELL AFTER THE ACCIDENT, THUS I WENT VISIT A DOCTOR ON THE SAME DAY AND GET IT CHECKED OUT.

I HAD MC FOR 5 DAYS.

Subjects Involved			
Victim			
Person Name	HUANG YISHU		
ID Type	NRIC NO	ID No	S8778445B
Gender	Male	Age	31
Race	Chinese	Language	English
Occupation	Other business services and administration managers nec	Address Type	
Address	APT BLK 669C JURONG WEST STREET 64 #05-68 SINGAPORE 643669	Mobile No	96641957
Is Informant A Victim?	Yes		
Person Name HUANG YISHU (Informant)			

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

29/01/2019 15:08

Classification Of Case:

Authentication Stamp

> [Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details			
Vehicle No.:	SLR9690L		
Vehicle Type:	P10 - Passenger Motor Car		
Vehicle Attachment 1:	With Sun Roof		
Vehicle Scheme:	Normal		
Vehicle Make:	MERCEDES BENZ		
Vehicle Model:	C350E SALOON SPORT AUTO		
Chassis No.:	WDD2050472F423647		
Propellant:	Petrol-Electric (Plug-In)		
Engine No.:	27492030757926		
Motor No.:	27492030757926		
Engine Capacity:	1991 cc		
Power Rating:	60.0 kW		
Maximum Power Output:	205.0 kW (274 bhp)		
Maximum Laden Weight:	2305 kg		
Unladen Weight:	1780 kg		
Year Of Manufacture:	2016		
Original Registration Date:	01 Sep 2016		
Lifespan Expiry Date:	-		
COE Category:	B - Car above 1600cc or 97kW (130bhp)		
Quota Premium:	\$47,501.00		
COE Expiry Date:	30 Aug 2027		
Road Tax Expiry Date:	31 Aug 2019		
PARF Eligibility Expiry Date:	31 Aug 2026		
Inspection Due Date:	31 Aug 2019		
Intended Transfer Date:	29 Jan 2019		
CO2 Emission:	94.00 (g/km)		
CEV/VES Rebate Utilised Amount:	\$30,000.00		
CO Emission:	-		
HC Emission:	-		
NOx Emission:	-		
PM Emission:	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

[OK](#)

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