

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	04/03/2019 09:40
Date Of Accident	01/03/2019 10:10
Exact Location Of Accident	CTE TWDS CITY B4 BRADDELL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD917K
Insured/Policyholder	
Name Of Registered Owner	HAN FONG ALUMINIUM PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97843227

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100374623-04
Cover Note Number	-

Driver

Name of Driver	KANG HAN CHENG
NRIC No	S1294220F
Date Of Birth	25/11/1958
Occupation	OUTDOOR
Date Of Driving Pass	01/07/1977
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97843227
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 313 TAMPINES ST 33 #11-28
Postcode	520313
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	JHG1816 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
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	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2849999 - FAX NO: 63431742
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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	GT9712G
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number JHG1816

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name KANG HAN CHENG

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? GBD917K

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

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. 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.:

Accident Sketch Plan

SKETCH PLAN

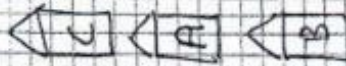
CTE TOWARDS CITY BEFORE BRADDELL

ROAD EXIT

A: GBD 917K

B: GT 9726

C: JMG 1816



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time I (GBD 917K) was travelling on CTE towards city. As I was in the jam the front vehicle stop I follow suit. Suddenly I felt an impact from the back as the impact force me to move forward and hit to the front vehicle. I alighted and found out it was a three car chain collision.

DECLARATION

(We declare the foregoing particulars are true in every respect.



Polyholder's Signature
Date & Time:

SIARAC Slip/StationForm_73

Signature

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

Signature

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190301/2091

1 of 3

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20190301/2091

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2019 14:35	Vide Report No.:	Station Diary No.: 16
--	------------------	--------------------------

Informant's Particulars

Name of Informant: KANG HAN CHENG			Address: APT BLK 313 TAMPINES STREET 33 #11-28 SINGAPORE 520313	
ID Type / ID No.: NRIC NO / S1294220F			Contact No.: Home/Office: Mobile: 97843227	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 60	Date of Birth: 25/11/1958	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 01/03/2019 10:10	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY				
Towards City before Braddell Rd exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
GBD917K	Lorry				Slightly Damaged	0
GT9712G	Van				Slightly Damaged	0
JHG1816	Car				Slightly Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999



T/20190301/2091

2 of 3

Report No. T/20190301/2091

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KANG HAN CHENG	ID No.	S1294220F
Related Vehicle	GBD917K (Lorry)	Contact No.	97843227
Hospital/Clinic	INTEMEDICAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	01/03/2019	Date Discharge	01/03/2019
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On 01/03/2019 at about 1010hrs, I was driving my lorry GBD917K along CTE towards City on the 4th lane. Somewhere before Braddell Rd exit, there was a traffic congestion and the front vehicle, JHG1816, stopped and I follow suit. Suddenly, I felt an impact from the rear of my lorry. The impact caused my lorry to move forward and hit onto the front vehicle. I alighted to make a check and a van GT9712G had hit onto the rear of my lorry which caused a chain collision. I went to seek medical treatment at InteMedical (Ang Mo Kio) and was given 2 days of MC.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190301/2091

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

3 of 3

Report No. T/20190301/2091

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: F / Sgt 3 AIMAN BIN MUHAMAD SALEH	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 01/03/2019 14:35
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No.: 65476404	Classification Of Case:
Authentication Stamp NP168	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1294220F



Name
KANG HAN CHENG

Race
CHINESE

Date of birth
25-11-1958

Sex
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S1294220F**

Name
KANG HAN CHENG

Birth Date: **25 Nov 1958**

Issue Date: **08 Mar 2012**

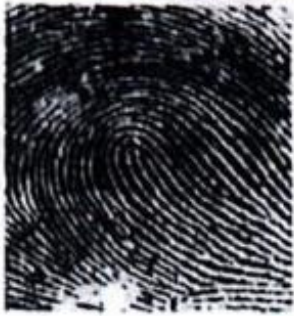


002048019B



4168594





NRIC No. **S1294220F**

Date of issue
14-01-2008

Address
APT. BLK 313 TAMPINES STREET 33
#11-28
SINGAPORE 520313



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

	EFFECTIVE DATE
Class 2B Motorcycles ≤ 200 cc	04 Nov 1978
Class 2A Motorcycles between 201 cc and 400 cc	04 Nov 1978
Class 2 Motorcycles > 400 cc	04 Nov 1978
Class 3 Motor Cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500 kg	01 Jul 1977
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500 kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250 kg	25 Mar 1981
Class 5 Motor vehicles not constructed to carry any load and the unladen weight > 7250 kg	02 Jun 1981

NP 428A



Licence No: S1294220F

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



