

MSME18037437 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 19/03/2018 17:08
 SUBMITTED BY: Chia Pei Ying

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 ability.
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	19/03/2018 17:08
Date Of Accident	16/03/2018 23:45
Exact Location Of Accident	ALONG RAFFLES AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP5354T
Insured/Policyholder	
Name Of Registered Owner	VETTURA LEASING PTE LTD
Co Reg No	201720229W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-82005070

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC
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	5092986452
Cover Note Number	

Driver

Name of Driver	EDWARD NG YONG YEW
NRIC No	S9243543A
Date Of Birth	21/11/1992
Occupation	OUTDOOR
Date Of Driving Pass	14/07/2011
Driving Experience	6 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98767340
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 2 ST GEORGE'S ROAD #08-47
 Postcode 322002
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - HIRER
 Vehicle Registration Number of Driver's Own Vehicle -
 Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles involved in the accident
 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) 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

I WAS DRIVING ALONG RAFFLES AVE GOING STRAIGHT. JUST AS I WAS APPROACHING RITZ CARLTON YELLOW BOX, I CONFIRM THAT THERE WERE NO VEHICLES THEN I PROCEED. SUDDENLY MID WAY THROUGH THE YELLOW BOX, I FELT A HUGE IMPACT FROM THE RIGHT. THE IMPACT CAUSED MY VEHICLE TO BE PUSHED SLANTED. I ALIGHT FROM MY VEHICLE AND REALISED VEHICLE B DID NOT STOP AT THE STOP LINE AND NEVER CHECK FOR VEHICLE ON THE MAIN ROAD AND DASHED OUT THUS COLLIDED ONTO MY VEHICLE.

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 SLN9226R
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 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)

Sketch Plan Pg. 1

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

Vettura Leasing Pte Ltd
201720229W

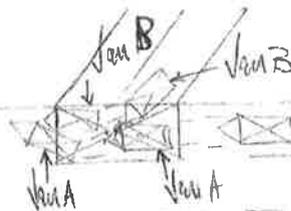
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

Van A - 7 SJP 5334 T
Van B - 7 SLW 9226 R



JD MOTORSPORT

Sketch Plan #2 Pg. 1

Describe Circumstances of the Accident

I was driving along Roffles Ave going straight, just as I was approaching Ritz
 Carlton yellow box, I confirm that there were no vehicle then I proceed. Suddenly
 midway through the yellow box, I felt a huge impact from the right. The impact
 caused my veh to be pushed skated. I alight from my veh and realise veh B
 did not stop at the stop line and never check for veh on the main road and dashed out,
 thus collided onto my vehicle.

Declaration

We declare the foregoing particulars are true in every respect.

Vettura Leasing Pte Ltd
 201720229W

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

REPORT OF A TRAFFIC ACCIDENT

Station Diary No.:
97

Date/Time Report Made:
17/03/2018 14:06

Vide Report No.:

Informant's Particulars

Name of Informant:
EDWARD NG YONG YEW

Address:
APT BLK 2 ST. GEORGE'S ROAD #08-47 SINGAPORE
322002

ID Type / ID No.:
NRIC NO / S9243543A

Contact No.:
Home/Office: Mobile: 98767340

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Age: Date of Birth:
Male 25 21/11/1992

Type of Informant:
Driver

Race:
Chinese

Language:
Chinese

Institution / School Name:
National University of
Singapore

Occupation:
Student

Driving Licence Information:
Class: 2B,3 Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 16/03/2018 23:40	Type of Location: Straight Road
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Location:
Along Road 1
RAFFLES AVENUE

Outside the one-way exit of Ritz Carlton Hotel, towards Esplanade

Weather: Clear	Road Surface: Dry	Road Speed Limit:
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Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate
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Type of Collision: Between Moving Vehicles - Head To Side	Anyone conveyed by ambulance: No
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Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJP5354T	Car	HONDA	CIVIC	White	Seriously Damaged	0
SLN9226R	Car	MERCEDES BENZ		Black		0

Details of Person Involved

Number of Pedestrian Involved: No

Number of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Driver Name		EDWARD NG YONG YEW		ID No.	S9243543A
Related Vehicle		SJP5354T (Car)		Contact No.	98767340
Hospital/Clinic		TAN TOCK SENG HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment		17/03/2018		Date Discharge	17/03/2018
No. of Days granted Medical Leave		04		Degree of Injury	NIL
Driver Name		HAN LIANGCHOU		ID No.	S8730974F
Related Vehicle		SLN9226R (Car)		Contact No.	91542153
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

Brief Details.

On 16/03/2018 at about 2343hrs, I was travelling on the right most lane of a straight road along Raffles Avenue. As I was driving past along Ritz Carlton Hotel on my right side, a vehicle (SLN9226R) had driven out from the one-way exit of the said hotel. There was a stop line before the exit however the driver of the vehicle had not intended to slow down or stop.

In order to avoid the collision, I had swerved my vehicle slightly to the left however the vehicle had still collided onto the right side of my vehicle. After the collision, both our vehicles had skidded a distance to the front before both came to a halt.

I believe the other driver has a front camera in his vehicle. I have a front camera as well however it was not working at the time of the accident.

After the accident, I felt a sharp pain on my back as such I had consulted the doctor and was given 4 day medical leave.

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 SHALYN GOH HWEE LING



Signature Of Informant:



Signature Of Interpreter:
Not applicable

Date/Time:
17/03/2018 14:06

Officer In Charge Of Case:
/ GIA /
Off Sgt TANG SIEW PING
Contact No: 65476430

Classification Of Case:

Authentication Stamp
SINGAPORE POLICE FORCE
SN 168
SIGNATURE

