MTE119036739 / Trans Eurokars Pte Ltd - Sungei Kadut ENTRY DATE & TIME: 20/03/2019 09:42 SUBMITTED BY: Ng Pei Fang

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 <u>truthful and accurate</u> 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.
- 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

	ACCIDENT STATEMENT
Outs Of December	
Date Of Report	20/03/2019 09:42
Date Of Accident	19/03/2019 09:35
Exact Location Of Accident	KPE TURNEL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SMG2669S
Insured/Policyholder	
Name Of Registered Owner	JIANG WENHAI
NRIC No	S8683865F
Email Address	KINGSLEYJIANG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97249898
Alternative Phone No	Others-97249898
Vehicle Particulars	
Manufacturer	MAZDA
Model	CX5
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	YES
f No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900003666
Cover Note Number	
Driver	
Name of Driver	JIANG WENHAI
NRIC No	S8683865F
Date Of Birth	08/12/1986

INDOOR

15/07/2013

5 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97249898

Fax Number

Contact Number OTHERS-97249898

EMail Address KINGSLEYJIANG@GMAIL.COM

Address BLK 338C ANCHORVALE CRESCENT

#04-49

Postcode 543338
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

3

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

soliciting/offering accident claims assistance.

NO

YES

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Police Station Name SENGKANG NEIGHBOURHOOD POLICE CENTRE

ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 ,

Police Station Address COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800 - 3438999 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO SKETCH PLAN AND STATEMENT

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons:

WITH TP

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKW7600X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver ROSLAN BIN SAMSON

NRIC/Passport Number S7628389C

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMD7586E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver MOHAMMED RAFI

NRIC/Passport Number S8428955H

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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)
 - (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.

Policyho

Date &

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

GIARRIC Sketchilland onen. Mä

SKETCH PLAN	-1-4-4-4-	A. A. A. C. C. C.	9P 1-2						
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Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

1 of 4 Report No. T/20190319/2066

REPORT O	FA	TRAFFIC	ACCIDENT
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19/03/2019 13:56		/lade:	Vide Report No.: G/20190319/0081	Station Diary No.: 39			
Informa	nt's Partic	ulars		CELEBRATE HERE			
Name of	f Informant: VENHAI		Address: APT BLK 338C ANCHORVALE CRESCENT #04-49 SINGAPORE 543338				
ID Type / ID No.: NRIC NO / S8683865F			Contact No.: Home/Office: Mobile: 97249898				
National CHINES			Email:				
Sex: Male	Age: 32	Date of Birth: 08/12/1986	Type of Informant:				
Race: Chinese			Language: Institution / School Nam English				
Occupation: MANAGER			Driving Licence Information: Class: 3 Date of Expiry:				

Type of Accident:	Attended by Police	Drink Drive: No	Date/Time of Accident: 19/03/2019 09:35	Type of Location Expressway	
	YA LEBAR EXPRESSV	VAY			
Weather: Clear	-Agressing, Laile 1	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Dual Carriage	Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMG2669S	Car	MAZDA	CX-5 2.0 AT PREMIUM 2WD	Grey		0
	Car					0

Details of Vehicle Insurance			
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999 2 of 4 Report No. T/20190319/2066

CONTINUATION OF REPORT

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
SMG2669S	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900003666	12/12/2018	11/12/2020			

Details of Perso Any Pedestrian I	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	***************************************			Production of the last of the	Marini averanti	
				e of Pedestrian Crossing: NA			
Driver					DATE OF THE PARTY		
Name	JIANG WENHAI			ID No		S8683865F	
Related Vehicle	SMG2669S (Car)			Conta	ct No.	97249898	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Date Disc		NIL			
No. of Days granted Medical Leave NIL			Degree o		NIL		

Brief Details.

I am Jiang Wenhai, NRIC S8683865F, DOB 08/12/1986 residing at Block 338C Anchorvale Crescent #04 -49 Singapore 543338. Contact 97249898. I am working as a Manager.

On 19/03/2019 at about 0935hrs whilst driving my vehicle bearing the registration number SMG2669S along Lane 1 at KPE(Tunnel) I was involved in an accident.

I wish to inform that whilst travelling on the said lane, there was 3 other cars in front of mine. I wish to mention that I was the 4th car in the said lane when all of a sudden, I saw the car bearing the registration number SKW7600X suddenly jammed his brakes and as a result of the sudden braking, I was unable to stop my vehicle in time and collided into the rear portion of his vehicle. I also wish to inform that the said car had collided into the car in front bearing the registration number SMD7586E.

I wish to inform that the 5th car in the said lane managed to stop in time and did not hit my vehicle however, the 6th car had collided into the rear of the 5th car and due to that a motorcyclist was involved as well and was injured and conveyed to the hospital by ambulance whom came to the accident location.

I wish to inform that I managed to get the particulars of the drivers in front of mine namely as follow;

- 1) Second Car: SMD7586E, NRIC S8428955H, Mohammed Rafi
- 2) Third Car: SKW7600X, NRIC S7628389C, Roslan Bin Samson, DOB 15/09/1976

Thereafter, the traffic police also came down to scene and had seized my car's in-car camera SD card. I was also asked to lodge an accident report at the police station in regards to this accident.





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

Tel No: 1800-343 8999

3 of 4 Report No. T/20190319/2066

CONTINUATION OF REPORT





4 of 4 Report No. T/20190319/2066

Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

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 F / Sgt 3 MOHAMMED RAMDHAN BIN PANE	
Signature Of Interpreter: Not applicable	Date/Time: 19/03/2019 13:56
Officer In Charge Of Case: TP / GIT / Sgt 2 LEE MING CAI Contact No.: 65476960	Classification Of Case:
	Signature:

(Y3



SINGAPORE POLICE FORCE ACKNOWLEDGEMENT SLIP

To Ohadril
Tel: 6547 6187.
** Make police according report at any police po

Ref: Report No: 1/20140314	0081		*Make police a report at any
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from JIANG WONHAI	S 8683 26 (Name, NRIC or Pa	ssport No. / Rank and No.)	543338
on 19/03/19.	(Address / Polic	se Station / NPC / NPP)	742220
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Other Remarks:			

NP 323 (1/07)

Accident Photo









Accident Photo



Accident Photo

