

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	12/04/2019 14:31
Date Of Accident	11/04/2019 16:30
Exact Location Of Accident	ALONG BALMORAL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG1815S
Insured/Policyholder	
Name Of Registered Owner	NG HWEE TENG
NRIC No	S8203573G
Email Address	NG_HWEETENG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98435348
Alternative Phone No	OTHERS-98435348

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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-MT107831-R00
Cover Note Number	

Driver

Name of Driver	NG HWEE TENG
NRIC No	S8203573G
Date Of Birth	11/01/1982
Occupation	OUTDOOR
Date Of Driving Pass	14/05/2001
Driving Experience	17 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98435348
Fax Number	
Contact Number	OTHERS-98435348
EEmail Address	NG_HWEETENG@HOTMAIL.COM

Address	BLK 527 JURONG WEST STREET 52 #12-287
Postcode	640527
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	WET

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?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190412/2043

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME3758Y
Vehicle Make/Model/Colour	HONDA
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	NG HWEE TENG
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SKG1815S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

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: 12 Apr 2019
12.45pm


Driver's Signature
(If driver is not the policyholder)
Date & Time: 12 Apr 2019
12.45pm


Reporting Centre Personnel's Signature
Name: Rosh
NRIC/FIN No.: 12/04/2019

GIA/ACC Sketch Plan Form, 01

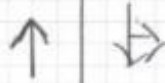
Accident Sketch Plan

SKETCH PLAN

ALONG BALMORE ROAD

A) SKG 1815S

B) SME 3758Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/20190412/2043.

DECLARATION

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

Policyholder's Signature
Date & Time: 12 Apr 2019
12.45pm

Driver's Signature
(If driver is not the policyholder)
Date & Time: 12 Apr 2019
12.45pm

Reporting Centre Personnel's Signature
Name: ROSH LIAW
NRIC/FIN No.: 12/04/2019

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190412/2043

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

1 of 3

Report No. T/20190412/2043

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/04/2019 12:09	Video Report No.:	Station Diary No.: 34
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Informant's Particulars

Name of Informant: NG HWEE TENG			Address: APT BLK 527 JURONG WEST STREET 52 #12-287 SINGAPORE 640527	
ID Type / ID No.: NRIC NO / S8203573G			Contact No.: Home/Office: Mobile: 98435348	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 37	Date of Birth: 11/01/1982	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Real estate agent			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 11/04/2019 16:20	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 STEVENS ROAD BALMORAL ROAD Stevens Road Towards Balmoral Road				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit: 60 Km/h	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: HIT AND RUN; HEAD TO REAR			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKG1815S	Car	MERCEDES BENZ	C 180 CGI	Red	Slightly Damaged	0
SME3758Y	Car	HONDA		Black	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKG1815S	TOKIO MARINE INSURANCE SINGAPORE LTD.	MT107831	26/09/2018	20/10/2019

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190412/2043

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

2 of 3

Report No. T/20190412/2043

CONTINUATION OF REPORT

Brief Details.

On 11/04/2019 @420pm, I was driving along Steven Road turning left towards Balmoral Road. At that point of time, there was a m/car SME3758Y in front of my car. It stopped suddenly at one side of the road, then it suddenly turned right after it stopped without signaling. I think the driver was trying to go to the opposite side of the road, that's why it suddenly turned right after stopping at the road side. I could not brake in time or response to his sudden change of directions, my car collided onto his car rear right side. I wished to state that he was making an illegal U-turn at that point of time, he also didn't signal his intention when he was turning right. He then left the scene without even stopping. I am lodging this Police report to claim against his insurance company.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190412/2043

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 3

Report No. T/20190412/2043

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:

D /

Sgt 2 CHIEW BENJAMIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Signature Of Informant:

Date/Time:

12/04/2019 12:09

Classification Of Case:

Authentication Stamp

NP158

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. SB203573G



Name
NG HWEE TENG
黄惠婷
Race
CHINESE
Date of Birth
11-08-1982 Sex
F
Country of Birth
SINGAPORE



MTC No. SB203573G



Date of Issue
09-03-2012

APT BLK 827 JURONG WEST STREET 82 #13-087
SINGAPORE 640027
MTC No. SB203573G Date: 11/02/2018

