

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	02/05/2019 10:14
Date Of Accident	30/04/2019 21:50
Exact Location Of Accident	STADIUM WALK & STADIUM CRESCENT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX9360G
Insured/Policyholder	
Name Of Registered Owner	ONG BOON TIONG
NRIC No	S7814630C
Email Address	ALVINONGBT.AO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90102759
Alternative Phone No	OTHERS-90102759

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.6 L (A)
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3010431901
Cover Note Number	03/02/2019 - 02/02/2020

Driver

Name of Driver	ONG BOON TIONG
NRIC No	S7814630C
Date Of Birth	22/05/1978
Occupation	INDOOR
Date Of Driving Pass	16/04/2002
Driving Experience	17 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90102759
Fax Number	
Contact Number	OTHERS-90102759
Email Address	ALVINONGBT.AO@GMAIL.COM

Address	BLK 618A PUNGGOL DRIVE #09-707
Postcode	821618
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 - MAJOR/MINOR RD
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?	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)	4
Passenger 1	NAME: : ONG HUISHAN JUNE GENDER: : FEMALE
Passenger 2	NAME: : ONG YI XUAN AVELINE GENDER: : FEMALE
Passenger 3	NAME: : ONG WEIJUN REYES GENDER: : MALE

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

AFTER I HAD CHECKED AND CONFIRM NO VEHICLES ON RIGHT SIDE, I SLOWLY DROVE OUT AND STOP AT THE INTERSECTION UPON SPOTTING MOTOR CAR SJX3895U ON THE LEFT. HOWEVER, MOTOR CAR SJX3895U COULD NOT STOP IN TIME AND HIS VEHICLE RH PORTION HAD GRAZED ONTO MY VEHICLE FRONT PORTION. NO ONE WAS INJURED.

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	SJX3895U
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)

Sketch Plan

SKETCH PLAN

VEHICLE NO.: SJX93606
INSURER: China
DATE & TIME: 30/04/2019 @ 2150

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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.

Q 02/05/19
Policyholder's Signature
Date & Time:

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

[Signature]
Reporting Centre Personnel's Signature
Name: Samy (AMK) 02/05/19
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Kallang Theatre

Stadium Walk

Stadium Crescent

SportsHub OSEP

A: SJX 93606
(w 3 passengers).

B: SJX 38954

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: SJX 93609 (China)
Date & Time: 30/04/2019 @ 2150 (Clear dry)

After i had checked and confirm no vehicles on right side, i slowly drove out and stop at the intersection upon spotting motor car SJX 38954 on the left. However, motor car SJX 38954 could not stop in time and his vehicle RH portion had grazed onto my vehicle front portion. No one was injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

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.:

GIARMC SketchPlanForm: M

☒ Claim Own Policy ☐ Claim Third Party ☐ Reporting Only

() Claim OD/TP at other workshop (

REPUBLIC OF SINGAPORE DRIVING LICENCE

Vehicle Number: **S7814630C**

ONG BOON TIONG
(WANG WENZHONG)

First Date: 22 May 1978
New Date: 25 Mar 2017

COMPONENT



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7814630C**

ONG BOON TIONG
(WANG WENZHONG)
王文忠

CHINESE

Date of Birth: 22-05-1978
Country/Place of Birth: SINGAPORE

Sex: M

57814630C



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

CLASS(S) Motor cars with unladen weight \leq 3500kg with \leq 7 passengers, exclusive of driver, and other motor vehicles with unladen weight \leq 3500kg

EFFECTIVE DATE: 16 Apr 2002

NP 423A

Vehicle No: S7814630C



5812213

Vehicle No: **S7814630C**

Date of issue: 18-07-2019

Address




Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

