





## 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             | 21/05/2019 15:34                      |
| Date Of Accident           | 20/05/2019 18:40                      |
| Exact Location Of Accident | HOUGANG ST 91 TWDS HOUGANG AVE 4 JUNC |
| Country/State of Loss      | SINGAPORE                             |

### DETAILS OF OWN VEHICLE

|                             |                      |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJD9444D             |
| <b>Insured/Policyholder</b> |                      |
| Name Of Registered Owner    | GOH KOK HWEE         |
| NRIC No                     | S1318712F            |
| Email Address               | NOEMAIL              |
| Mobile Phone No             | (LOCAL) +65-90172741 |
| Alternative Phone No        | OFFICE-90172741      |

### Vehicle Particulars

|  |               |
|--|---------------|
| Manufacturer   | TOYOTA        |
| Model  | COROLLA ALTIS |
| 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 | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                                 |
| Fleet Policy              | NO  |
| Policy Number             | DMPCSN3031611902                              |
| Cover Note Number         | -   |

### Driver

|                      |   |
|----------------------|---|
| Name of Driver       | ANG CHEE TAT ALFRED (WENG ZHIDA ALFRED) |
| NRIC No              | S8243453D                               |
| Date Of Birth        | 22/12/1982                              |
| Occupation           | INDOOR                                  |
| Date Of Driving Pass | 24/03/2004                              |
| Driving Experience   | 15 YEARS AND 1 MONTH                    |
| Gender               | MALE                                    |
| Mobile Number        | (LOCAL) +65-90172741                    |
| Fax Number           |   |
| Contact Number       |   |
| Email Address        | NOEMAIL                                 |

|   |                               |
|---|-------------------------------|
| Address   | BLK 610 HOUGANG AVE 8 #10-492 |
| Postcode  | 530610                        |
| Was driver an employee of the Insured's Company     | NO                            |
| If No, Relationship of the Driver with the Insured  | OTHER - SON IN LAW            |
| Vehicle Registration Number of Driver's Own Vehicle | -                             |
|   | -                             |
| Insurance Company of Driver's Own Vehicle           | -                             |
|   | -                             |
|   | -                             |

#### General Information of the Accident

|                    |                               |
|--------------------|-------------------------------|
| Type Of Accident   | COLLISION - HEAD ON 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                         | 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)   | 2                                      |
| Passenger 1   | NAME: : GOH SI MIN<br>GENDER: : FEMALE |

#### Details of Police Action

|   |   |
|---|---|
| Was the accident reported to the police?  | YES   |
| If Yes, Please state which Police Station |   |
| Police Station Name                       | TRAFFIC POLICE DIVISION HQ                                    |
| Police Station Address                    | ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE |
| Police Station Contact                    | TEL NO: 65470000 - FAX NO:                                    |
| 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 | GY3232M            |
| 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 INJURED PERSON 1**

|   |   |
|---|---|
| Name  | ANG CHEE TAT ALFRED (WENG ZHIDA ALFRED) |
| Approximate Age                                     |   |
| Injuries Sustain                                    | BODY                                    |
| Injured person in which vehicle?                    | SJD9444D                                |
| Were seat belts worn?                               | YES                                     |
| Was this injured conveyed to hospital by ambulance? | NO                                      |
| Address   |   |
| Postcode  |   |

**DETAILS OF INJURED PERSON 2**

|   |            |
|---|------------|
| Name  | GOH SI MIN |
| Approximate Age                                     |            |
| Injuries Sustain                                    | BODY       |
| Injured person in which vehicle?                    | SJD9444D   |
| Were seat belts worn?                               | YES        |
| Was this injured conveyed to hospital by ambulance? | NO         |
| Address   |            |
| Postcode  |            |



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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.

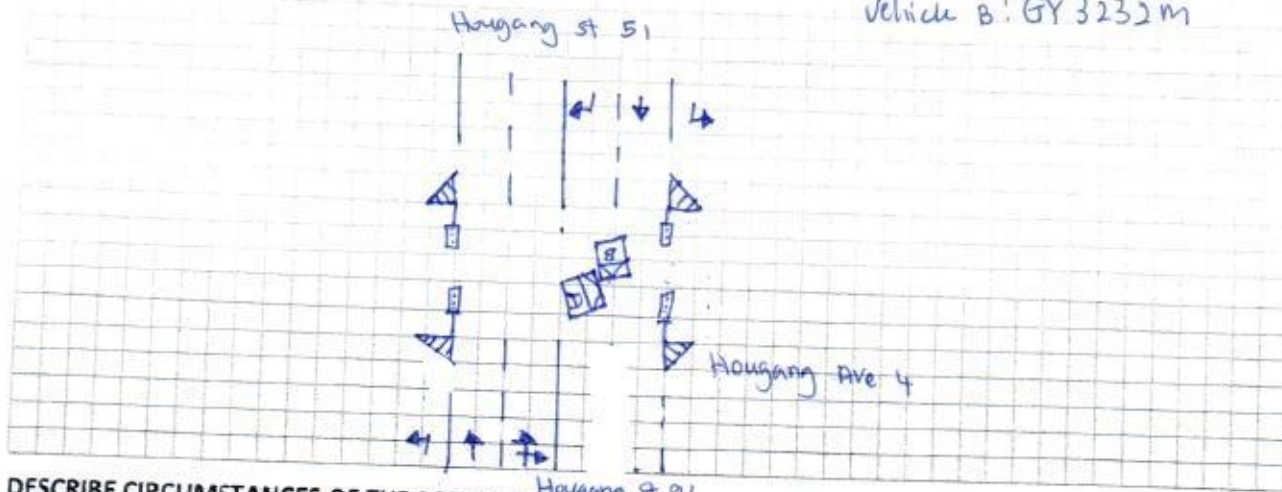
  
 Policyholder's Signature  
 Date & Time:

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

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

SKETCH PLAN

Vehicle A: SJD 9444D  
Vehicle B: GY 3232M



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer To Police Report.

DECLARATION

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

 Goh

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 STATEMENT

ACCIDENT DATE: 20 / 5 / 2019 (DD/MM/YYYY) TIME: 18:40 (HH:MM)

LOCATION: Honggang st 91 towards Honggang Ave 4 Junction

## 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SSD 9444D

b) INSURANCE COMPANY: China Taiping

c) POLICY NUMBER: DmPLSN3031611902

d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)

e) MAKE & MODEL: Toyota Ahi

f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)

g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)

h) PURPOSE OF USING AT ACCIDENT TIME: Private use

i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)

IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

a) NAME: Goh Kok Hwee

(MALE / FEMALE)

b) NRIC/FIN/PASSPORT: S1318712F

CONTACT:

c) ADDRESS: BK 610 Honggang Ave 8 #10-492 (S) 530610

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

a) NAME: Ang Chee Tat Alfred

(MALE / FEMALE)

b) NRIC/FIN/PASSPORT: S8243453D

CONTACT: 907 2741

c) ADDRESS: BK 610 Honggang Ave 8 #10-492 (S) 530610

\* d) DATE OF BIRTH: 22 / 12 / 1982 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE:

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Son - In - Law

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Online

## 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: GY 3232M

MODEL:

b) DRIVER'S NAME:

c) NRIC/FIN/PASSPORT:

CONTACT:

## 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER:

MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT:

CONTACT:

\* No of passenger  
(including driver)  
(02)

① Goh Si Min (F)

\* No of passenger  
(including driver)  
( )

\* No of passenger  
(including driver)  
( )

Email = [rico60autoservices@gmail.com](mailto:rico60autoservices@gmail.com)

fax = 6286 7060



Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

**REPORT OF A TRAFFIC ACCIDENT**

|  |            |  |   |                            |  |
|--|------------|--|---|----------------------------|--|
| Date/Time Report Made:<br>21/05/2019 11:42 |            | Vide Report No.:                         |   | Station Diary No.:         |  |
| <b>Informant's Particulars</b>             |            |  |   |                            |  |
| Name of Informant:<br>ANG CHEE TAT, ALFRED |            |  | Address:<br>APT BLK 610 HOUGANG AVENUE 8 #10-492 SINGAPORE 530610 |                            |  |
| ID Type / ID No.:<br>NRIC NO / S8243453D   |            |  | Contact No.:<br>Home/Office: Mobile: 91918769                     |                            |  |
| Nationality:<br>SINGAPORE CITIZEN          |            |  | Email:<br>alfredang82@gmail.com                                   |                            |  |
| Sex:<br>Male                               | Age:<br>36 | Date of Birth:<br>22/12/1982             | Type of Informant:<br>Driver                                      |                            |  |
| Race:<br>Chinese                           |            | Language:<br>English                     |   | Institution / School Name: |  |
| Occupation:<br>civil servant               |            | Driving Licence Information:<br>Class: 3 |   | Date of Expiry:            |  |

**General Information of the Accident**

|   |                  |   |  |                                     |
|---|------------------|---|--|-------------------------------------|
| Type of Accident:                                       | Injury<br>Others | Drink Drive:<br>No                          | Date/Time of Accident:<br>20/05/2019 18:40 | Type of Location:<br>X-Junction     |
| Location:<br><br>HOUGANG STREET 91                      |                  |   |  |                                     |
| Weather:<br>Clear                                       |                  | Road Surface:<br>Dry                        |  | Road Speed Limit:                   |
| Traffic Flow:<br>Dual Carriage Way                      |                  | Traffic Control:<br>Traffic Light - Working |  | Traffic Volume:<br>Moderate         |
| Type of Collision:<br>Between Moving Vehicles - Head On |                  |   |  | Anyone conveyed by ambulance:<br>No |

**Details of Vehicle Involved**

| Vehicle No. | Type | Make   | Model | Color  | Condition         | No of Passenger |
|-------------|------|--------|-------|--------|-------------------|-----------------|
| GY3232M     | Van  |        |       |        |                   | 0               |
| SJD9444D    | Car  | TOYOTA | ALTIS | Silver | Seriously Damaged | 1               |

**Details of Vehicle Insurance**

| Vehicle No. | Insurance Company                             | Insurance No      | Effective  | Expiry Date |
|-------------|---|-------------------|------------|-------------|
| SJD9444D    | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | DMPCSN30316119 02 | 10/04/2019 | 09/04/2020  |





Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20190521/7008

**CONTINUATION OF REPORT**

| <b>Details of Person Involved</b> |                                     |  |                                   |
|-----------------------------------|-------------------------------------|--|-----------------------------------|
| Any Pedestrian Involved: No       |                                     |  |                                   |
| No. of Pedestrians Injured: NIL   |                                     | Use of Pedestrian Crossing: NA         |                                   |
| <b>Passenger</b>                  |                                     |  |                                   |
| Name                              | GOH SI MIN                          | ID No.                                 | S9449857J                         |
| Related Vehicle                   | SJD9444D (Car)                      | Contact No.                            | 98536794                          |
| Hospital/Clinic                   | SENGKANG GENERAL HOSPITAL PTE. LTD. | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | 20/05/2019                          | Date Discharge                         | 20/05/2019                        |
| No. of Days granted Medical Leave | 03                                  | Degree of Injury                       | Slight                            |
| <b>Driver</b>                     |                                     |  |                                   |
| Name                              | ANG CHEE TAT, ALFRED                | ID No.                                 | S8243453D                         |
| Related Vehicle                   | SJD9444D (Car)                      | Contact No.                            | 91918769                          |
| Hospital/Clinic                   | SENGKANG GENERAL HOSPITAL PTE. LTD. | Class of Driving Licence & Expiry Date | Class: 3<br>Date of Expiry: NIL   |
| Date Treatment                    | 20/05/2019                          | Date Discharge                         | 20/05/2019                        |
| No. of Days granted Medical Leave | 03                                  | Degree of Injury                       | Slight                            |

**Brief Details.**

ON THE STATED DATE & TIME. I, VEHICLE A WAS TRAVELLING ON THE STATED VENUE. I STOP AT THE TRAFFIC JUNCTION, WHEN THE TRAFFIC LIGHT TURNS TO THE GREEN ARROW I ACCELERATE MY VEHICLE BUT SAW VEHICLE B APPROACHING HENCE I STOP MY VEHICLE. VEHICLE B THEN COLLIDED INTO MY STATIONARY VEHICLE FRONT PORTION.



**SINGAPORE  
POLICE FORCE**



T/20190521/7008

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20190521/7008

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204

Authentication Stamp

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
21/05/2019 11:42

Classification Of Case:



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8243453D**

Name  
**ANG CHEE TAT, ALFRED**  
(WENG ZHIDA, ALFRED)

Birth Date: **22 Dec 1982**  
Issue Date: **24 Mar 2004**

001162771E

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8243453D**

Name  
**ANG CHEE TAT, ALFRED**  
(WENG ZHIDA, ALFRED)

翁志达

Race  
**CHINESE**

Date of birth  
**22-12-1982**

Country of birth  
**SINGAPORE**

Sex  
**M**

S8243453D

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE  
**24 Mar 2004**

Licence No: **S8243453D**

NP 428A

4918721

NRIC No **S8243453D**

Date of issue  
**02-01-2013**

APT BLK 610 HOUGANG AVENUE 8 #10-492  
SINGAPORE 530610

NRIC No. **S8243453D** Date **23/04/2018**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1318712F



Name

GOH KOK HWEE



吴国辉

Race

CHINESE

Date of Birth

27-12-1958

Sex

M

Country of Birth

SINGAPORE

1152103



NRIC No. S1318712F



Blood Group Date of issue

A+

14-07-1994

APT BLK 610 HOUGANG AVENUE 8 #10-492  
SINGAPORE 530610

NRIC No. S1318712F

Date: 22-10-2000

No: 3836796





中国太平  
CHINA TAIPING  
中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200209384E

MX1F  
R SN  
AN0287A  
Cov.Type: C

MOTOR PRIVATE CAR

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No. DMPCSN3031611902

Engine No :3224743777  
Chano:MR053ZEE106102418

1. Index Mark and Registration  
Number of Vehicle

SJD9444D

AUTOSAFE

2. Name of Policy Holder

GOH KOK HWEE

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

10 April 2019

Named Drivers Ex Sect. I ..... S\$500.00

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

09 April 2020

Ex Sect. I - Age <= 25..... S\$3,000.00

Ex Sect. I - Age >= 26..... S\$500.00

\* Age as at date of accident

EX ON WINDSCREEN ..... S\$100.00

5. Persons or Classes of Persons entitled to drive\*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:

Use for social, domestic and pleasure purposes and for the Policyholder's business.  
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised workshops for each Policy Year.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ..... WEE GIAP ENTERPRISE LLP .....  
Authorised Officer

Authorised Signatory