

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	31/05/2019 14:35
Date Of Accident	31/05/2019 00:05
Exact Location Of Accident	PETRONAS FUEL STATION RIGHT A/F MSIA CHECKPOINT
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU9917T
Insured/Policyholder	
Name Of Registered Owner	NG CHIN GUAN (HUANG JINGYUAN)
NRIC No	S9716227A
Email Address	KEN_NBK@YAHOO.COM
Mobile Phone No	(LOCAL) +65-86669917
Alternative Phone No	OTHERS-86669917

Vehicle Particulars

Manufacturer	TOYOTA
Model	VELLFIRE
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	REPORTING ONLY
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	5108159034
Cover Note Number	

Driver

Name of Driver	NG BOON KIAN
NRIC No	S7119427B
Date Of Birth	14/06/1971
Occupation	INDOOR
Date Of Driving Pass	11/05/1992
Driving Experience	27 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86669917
Fax Number	
Contact Number	OTHERS-86669917
EEmail Address	KEN_NBK@YAHOO.COM

Address	BLK 890A TAMPINES AVENUE 1 #14-311
Postcode	521890
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KIM KEAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 231 LORONG 8 TOA PAYOH , POSTCODE: 310231 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2529999 - FAX NO: 63554311
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT E/20190531/2037 (TP REVERSE AND HIT INSURED)

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	SJQ1395X
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)

Accident Sketch Plan

SKETCH PLAN

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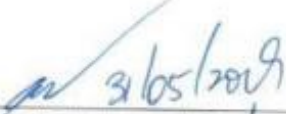
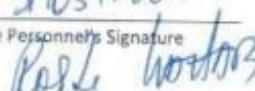
8. Consent under the Personal Data Protection Act (PDPA)

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.

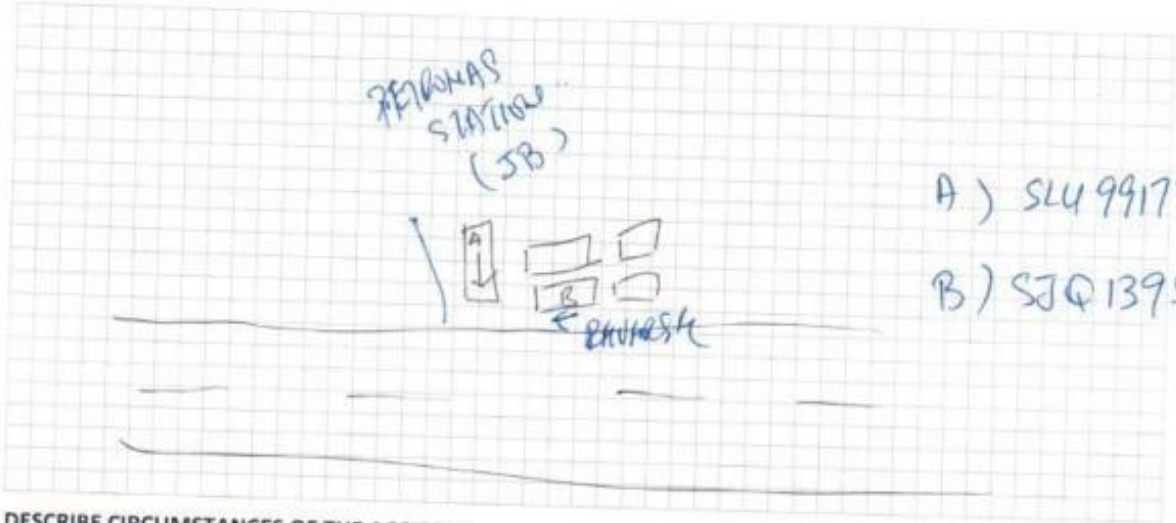
Policyholder's Signature
Date & Time:

 31/5/19
Driver's Signature
(If driver is not the policyholder)
Date & Time: 14 20

 31/5/2019
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

He reverse .

~~PLS REFUSE TO SIGN REPORT~~
~~E/20190531/2037~~

DECLARATION

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature _____ 14
(If driver is not the policyholder)
Date & Time: _____

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



E/20190531/2037

1 of 2

POLICE REPORT (NP299)

Report No. E/20190531/2037

Police Station Of Origin
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

Date/Time Report Made 31/05/2019 13:24		Vide Report No.		Station Diary No. 5	
Name Of Informant NG BOON KIAN		Address APT BLK 890A TAMPINES AVENUE 1 #14-311 SINGAPORE 521890			
ID Type / ID No. NRIC NO / S7119427B		Contact No. Home/Office Mobile 86669917			
Nationality SINGAPORE CITIZEN		Email Address			
Occupation GRAB DRIVER		Sex Male	Age 47	Date of Birth 14/06/1971	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 31/05/2019 00:00		Location Of Incident At the Petronas fuel station right after Checkpoint MALAYSIA			

Brief details.

On 31/05/2019 at about 0000hrs, I had just finished changing money at the Petronas fuel station at the station right after Woodlands Checkpoint. As I was driving my vehicle (SLU9917T) and about to exit the station, I felt a sudden bump on the passenger seat of my car.

I made a check and discovered that another car (SJQ1395X) had bumped into my car with his rear. Subsequently, I alighted my vehicle and discovered that the passenger side of my car suffered slight

Signature Of Officer Recording The Report: E / Sgt 2 MUHAMMAD NOOR HAIKAL BIN MUHAMMAD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/05/2019 13:24
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / SSI SUHAILAH BINTE MOHAMED Contact No.: 63910000	Classification Of Case:
Authentication Stamp	

POLICE REPORT



SINGAPORE
POLICE FORCE



E/20190531/2037

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20190531/2037

scratches. The other party's right rear bumper and spoiler was also damaged. The both of us then agreed to settle the matter with our respective insurance companies and left the scene. No particulars were exchanged. I do have any footage of the incident, however the other party claimed that he has camera footage of the incident. No assault or threat had taken place.

I am lodging this report for insurance claiming purposes.

Signature Of Officer Recording The Report: E / Sgt 2 MUHAMMAD NOOR HAIKAL BIN MUHAMMAD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/05/2019 13:24
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / SSI SUHAILAH BINTE MOHAMED Contact No.: 63910000	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

