

## 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	04/06/2019 14:39
Date Of Accident	03/06/2019 16:20
Exact Location Of Accident	ALONG CAVENAGH ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA5716R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	M/S LONGLIM PTE LTD
Co Reg No	201109995N
Email Address	BC@LONGLIM.COM
Mobile Phone No	(LOCAL) +65-90250917
Alternative Phone No	OFFICE-90250917

### Vehicle Particulars

Manufacturer	NISSAN
Model	URVAN-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	BUS

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMB1SN1745291802
Cover Note Number	

### Driver

Name of Driver	NG CHENG KWANG
NRIC No	S1719455J
Date Of Birth	11/02/1965
Occupation	OUTDOOR
Date Of Driving Pass	10/08/1990
Driving Experience	28 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90250917
Fax Number	
Contact Number	OTHERS-90250917
Email Address	BC@LONGLIM.COM

Address	BLK 128 RIVERVALE STREET #04-832
Postcode	540128
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	NO COLLISION
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 2 SENGKANG SQUARE #01-02 SINGAPORE , <b>POSTCODE:</b> 545025 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800 - 3438999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

#### Attachment(s)

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

### SKETCH PLAN

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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)

(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.

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.

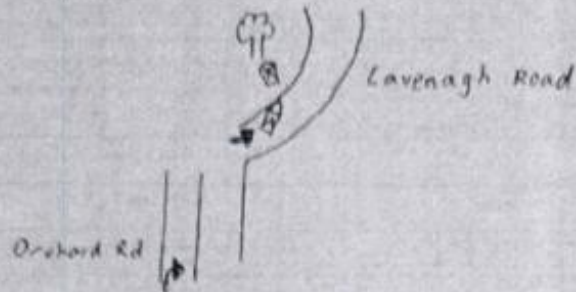
Reporting Centre Personnel's Signature  
Name: Rafael V. Vitoria  
NRIC/FIN No.:



## Accident Sketch Plan

### SKETCH PLAN

A - PA5716R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 03/06/2019 @ 1620 HRS, I was driving my bus PA5716R along Lannagh Road when I lost control and hit onto the tree. The tree was not damage.

## 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: *[Signature]*  
NRIC/FIN No.:

NOTICE OF REPORTING

CONFIDENTIAL

Annex E.

NOTICE OF COMPLIANCE

This is to confirm that Ng Cheng Kwang - 94378326  
NRIC/PIN S17194551, has reported to the Police a non-injury traffic accident  
which occurred at Orchard Road, right turn to Cavenagh Road  
on 03/06/2019 at 4.20 pm involving the following vehicles:

- PA5716R

- 2 If this accident was reported to the Police within 24 hours of its occurrence,  
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSgt Ryan Tan

Date: 04/06/2019

Time: 0833hrs

S/D Ref: 48

Police Post/Unit: Sengkang NPC

  
Sengkang NPC  
2 Sengkang Square  
#01-02 S(545025)  
Tel: 1800-3438959

Original - to be issued to informant  
Duplicate - to be submitted to Traffic Police

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. S1719455J**



Name  
**NG CHENG KWANG**  
**黃清源**

Race  
**CHINESE**

Date of Birth  
**11-02-1965**

Sex  
**M**

Country of Birth  
**SINGAPORE**



*For LKK/NAC Use Only*



Identification Card

2843498



NRIC No: S1719455J



For LKK/NAC Use Only

Blood Group: O+ Date of issue: 07-06-1996

APT BLK 128 RIVERVALE STREET #04-832  
SINGAPORE 540128

NRIC No: S1719455J Date: 07/11/2007 (R) No: 57270

Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

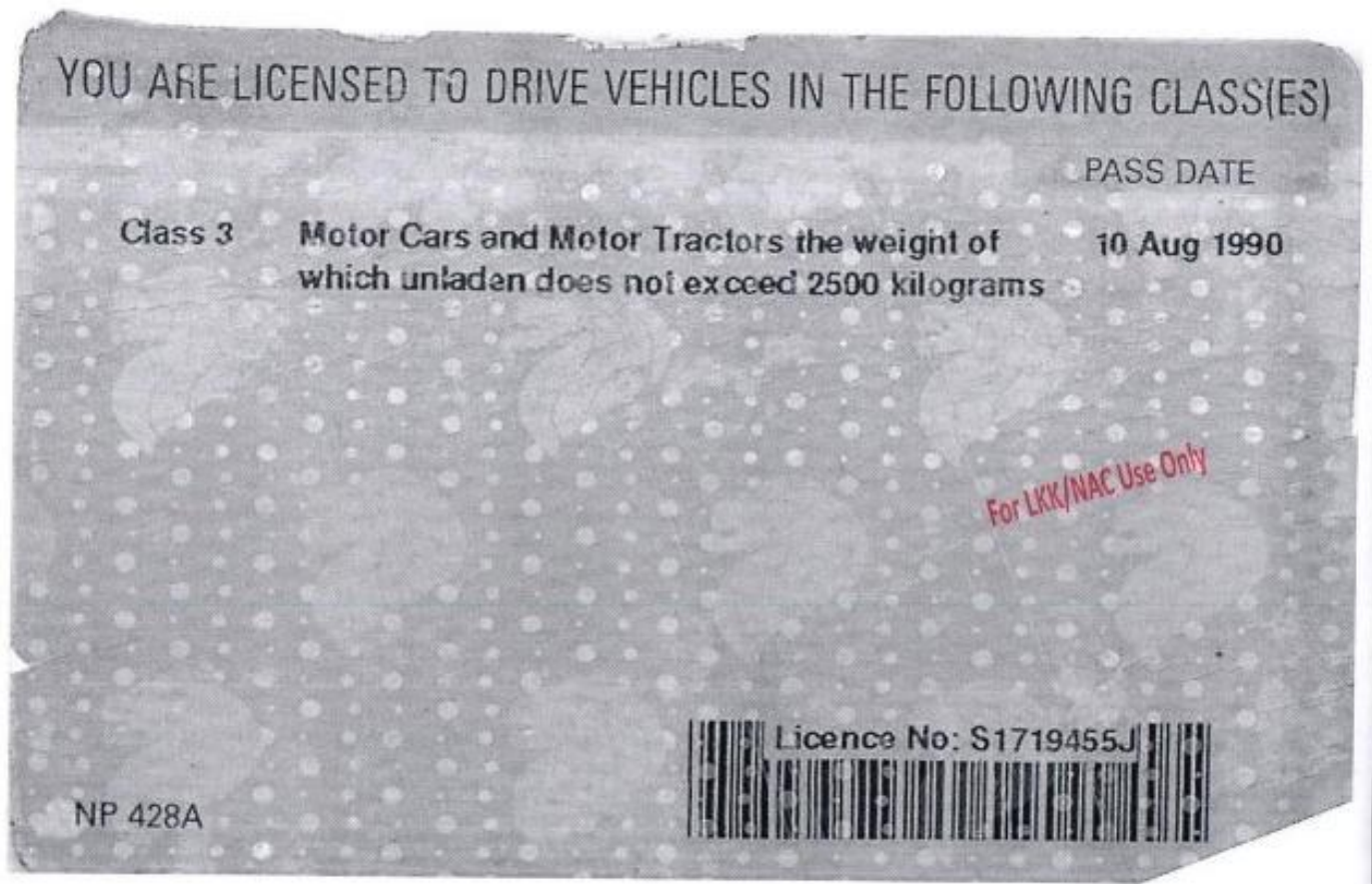
Licence Number: **S 1719455J**  
Name: **NG CHENG KWANG**

*For LKK/NAC Use Only*

Birth Date: **11 Feb 1965**  
Issue Date: **31 Jul 2003**



 000702909H





Land Transport Authority



## VOCATIONAL LICENCE

Licence No : S1719455J

Name : NG CHENG KWANG

Issue Date : 7/7/2008

*For LKK/NAC Use Only*

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check  
the status of this vocational licence



# Driving License

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	21/07/1995
04	BUS ATTENDANT	21/07/1995



For LKK/NAC Use Only

