

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	12/06/2019 16:42
Date Of Accident	11/06/2019 19:15
Exact Location Of Accident	JUNCTION OF CLEMENTI RD & KENT RIDGE CRESCENT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFU7737E
Insured/Policyholder	
Name Of Registered Owner	NG WEE CHENG
NRIC No	S1726235A
Email Address	JOREEN_DEW@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96692072
Alternative Phone No	OFFICE-91820798

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ 1.3
Exact Purpose for which vehicle was being used at time of accident	
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	
Cover Note Number	

Driver

Name of Driver	NG WEE CHENG
NRIC No	S1726235A
Date Of Birth	26/04/1965
Occupation	INDOOR
Date Of Driving Pass	11/06/1999
Driving Experience	20 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96692072
Fax Number	
Contact Number	OFFICE-91820798
Email Address	JOREEN_DEW@HOTMAIL.COM

Address	BLK 234 BUKIT PANJANG RING ROAD
Postcode	
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 - CHANGE/CROSS LANE
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

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

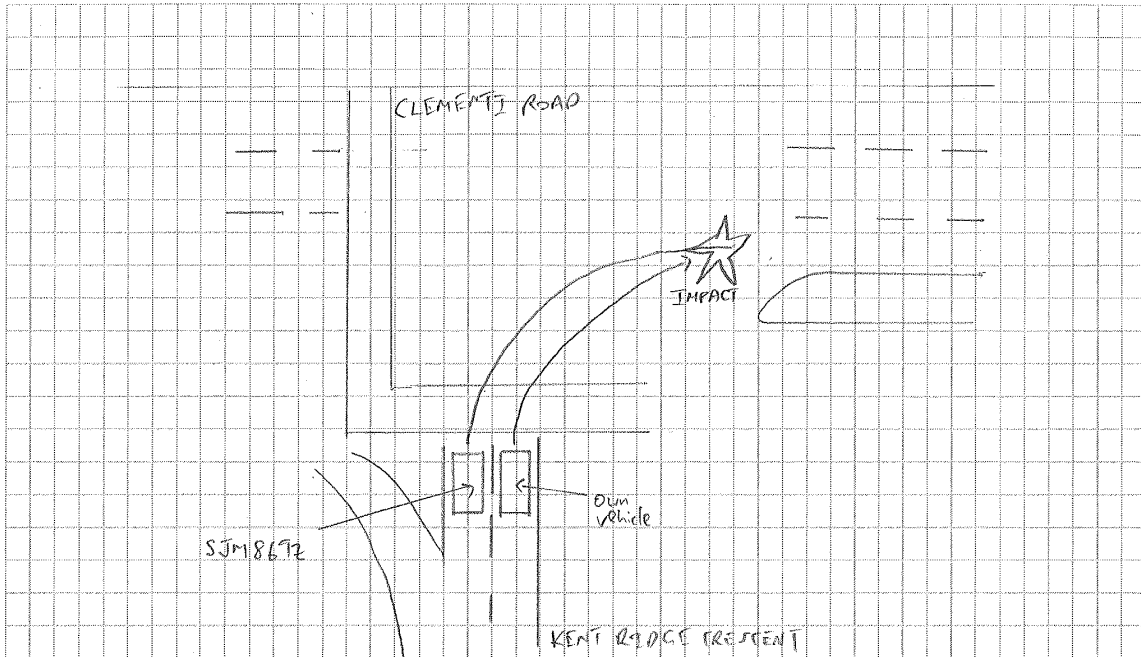
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJM869Z
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)	

Cheng, J. and
Chen, J.

Vehicle Number: SFM 7737 E

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11 June 2019 (Tuesday), I was driving home after work. At the junction between Kent Ridge Crescent and Clementi Road (exiting National University of Singapore), I ~~was~~ stopped for the red light at Lane 1 (rightmost lane) and SJM 869Z stopped to the left. At 19:14, when the traffic lights were green, I began turning right into the rightmost lane on Clementi Road (Lane 1). Vehicle SJM 869Z also turned right but I observed he was turning straight into Lane 1. I braked my vehicle but SJM 869Z was travelling too fast and bumped into the front left of my vehicle. I signalled for him to stop his vehicle along the leftmost lane and he exchanged details.

DECLARATION

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

Policyholder's Signature

Date & Time: 12/6/19 13:00

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

