

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	07/06/2019 13:26
Date Of Accident	07/06/2019 01:45
Exact Location Of Accident	PIE - CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS97C
Insured/Policyholder	
Name Of Registered Owner	SNG THIAM CHYE
NRIC No	S1642454D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90261020
Alternative Phone No	OTHERS-81380341

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY-2.0 (A)

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00004559
Cover Note Number	

Driver

Name of Driver	SNG FU SHENG
NRIC No	S9431440B
Date Of Birth	01/09/1994
Occupation	INDOOR
Date Of Driving Pass	22/07/2015
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81380341
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 3A UPP BOON KENG ROAD #19-610
Postcode	381003
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	WET

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	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SELF SKID REFER TO ATTACHED STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK8147X
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

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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:

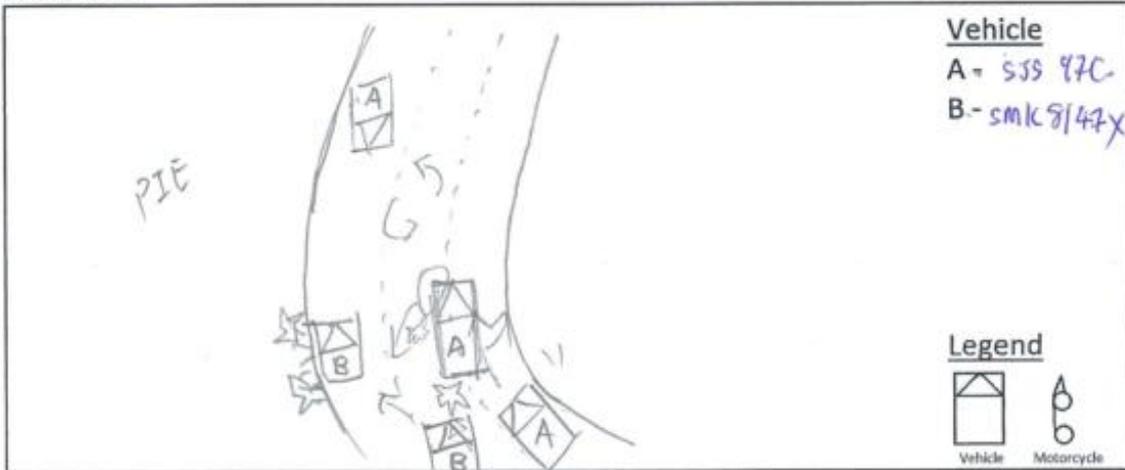


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

7/6/19.

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

front seats: Driver:
 SNG FU MING (M) SNG FU SHENG (M)

Back seats:
 Hui Yi (F) Hui Ming (M)

DECLARATION

I/We declare the foregoing particulars are true in every respect.
 Please be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy must be made within the stipulated timeframe from the day of occurrence. Kindly check your policy for more details.

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.:

7/6/19



**SINGAPORE
POLICE FORCE**



T/20190607/2017

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

2 of 3

Report No. T/20190607/2017

CONTINUATION OF REPORT

Brief Details.

On 7/6/19 at around 0145hrs, I was travelling in my vehicle (SJS97C) at PIE towards Changi and was on my way home. During that point of time there was not much traffic however the floor was wet.

I was on the first lane and I was travelling at around 90km/h when suddenly my vehicle skidded and swerved to the left lane. I tried to swerve it back in lane however I could not make it back to my lane. That was when another vehicle on my left (SMK8147X) collided into the front left portion of my vehicle however the point of contact initially was on my vehicle's rear left portion, causing my vehicle to swerve even more and the other vehicle also swerved to the left and collided into the divider.

I made a check and both myself and my passengers were not injured, the other driver the called for police and ambulance. Shortly later, the other driver was conveyed to the hospital and I also passed the in car camera footage to the traffic police officer.

The front bumper of my vehicle is badly damaged as well. I then left the area and I was advised by the officer to lodge a police report regarding this incident.



SINGAPORE
POLICE FORCE



T/20190607/2017

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

3 of 3

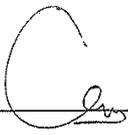
Report No. T/20190607/2017

CONTINUATION OF REPORT

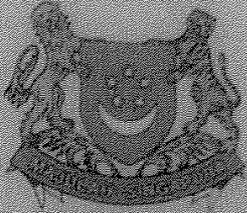
Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sgt 2 CHANG JUN KAI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 07/06/2019 03:50
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI Contact No: 65476904	Classification Of Case:
Authentication Stamp NP168 	

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S9431440B**



Name
SNG FU SHENG

孙 福 盛
Race
CHINESE

Date of birth **01-09-1994** Sex **M**

Country of birth
SINGAPORE

4394700

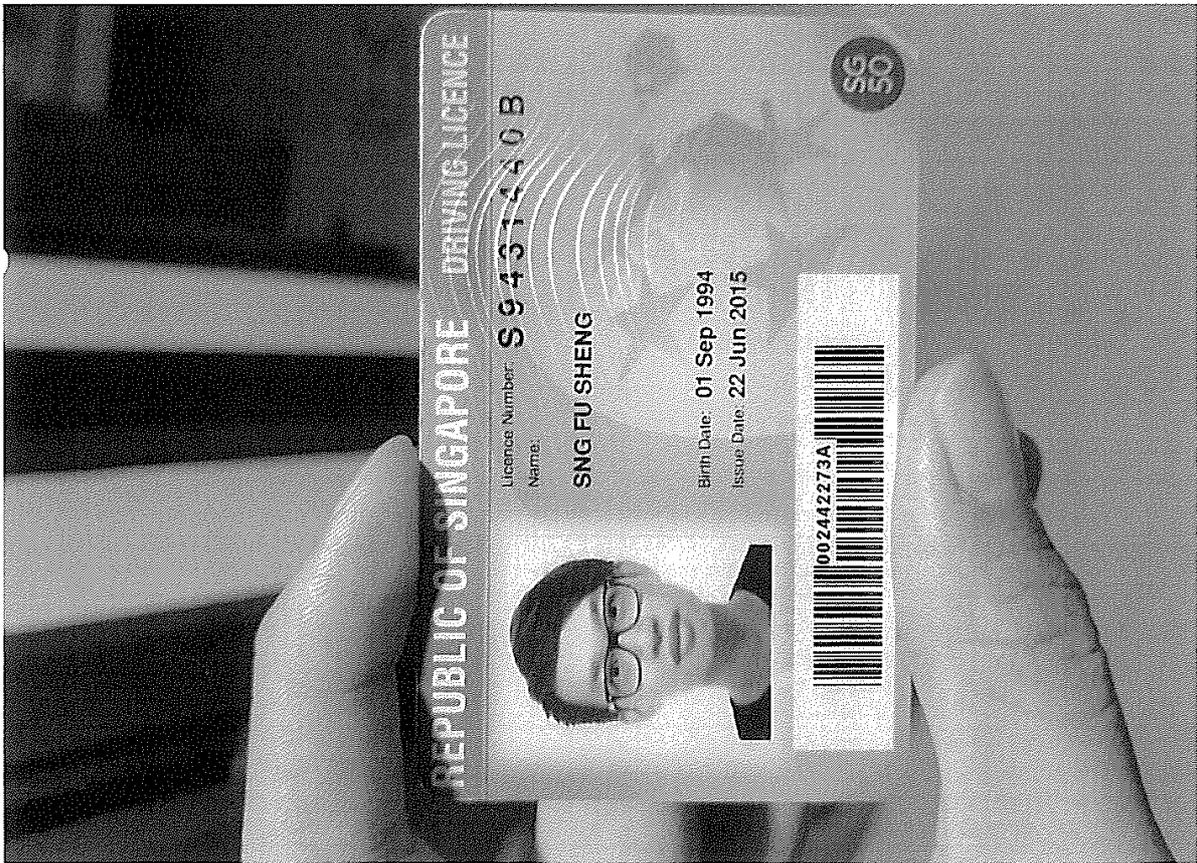
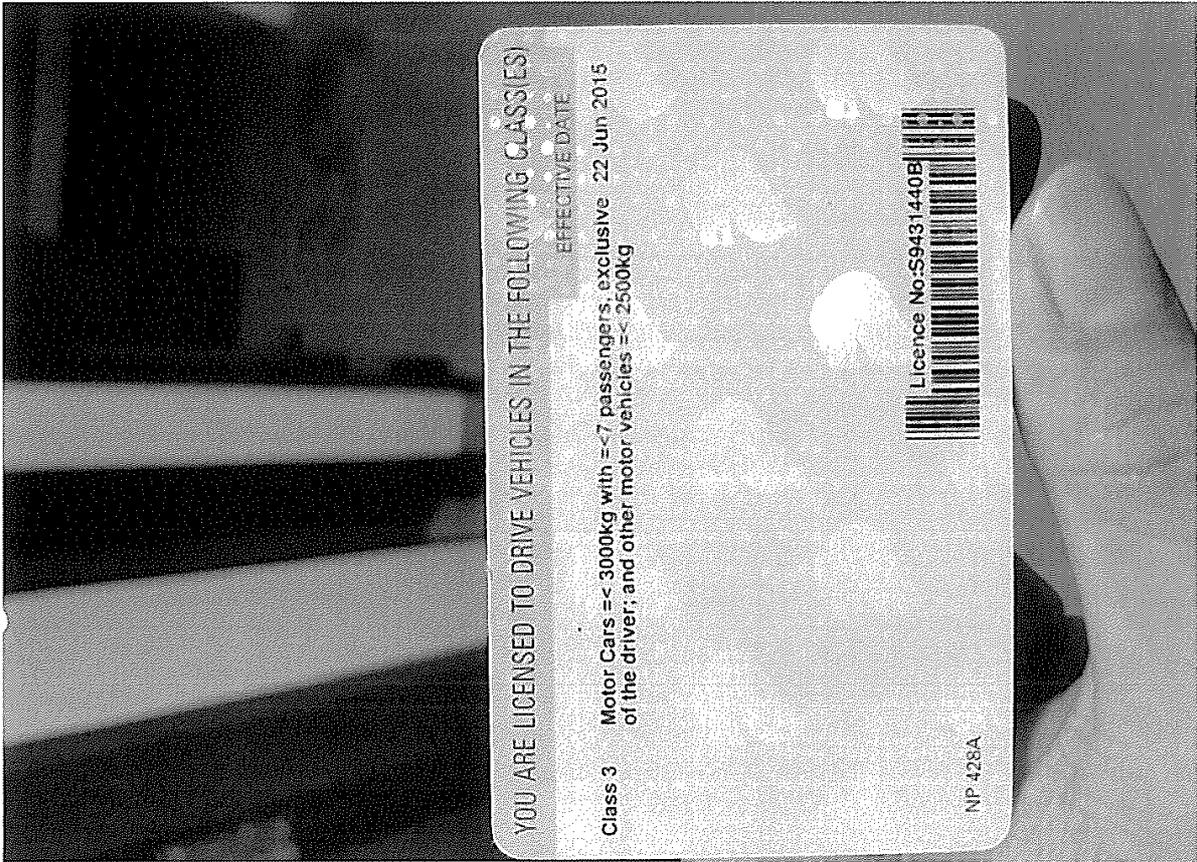


NRIC No. **S9431440B**



Date of issue
27-04-2009

Address
**APT BLK 3A UPPER BOON KENG ROAD
#19-610
SINGAPORE 381003**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

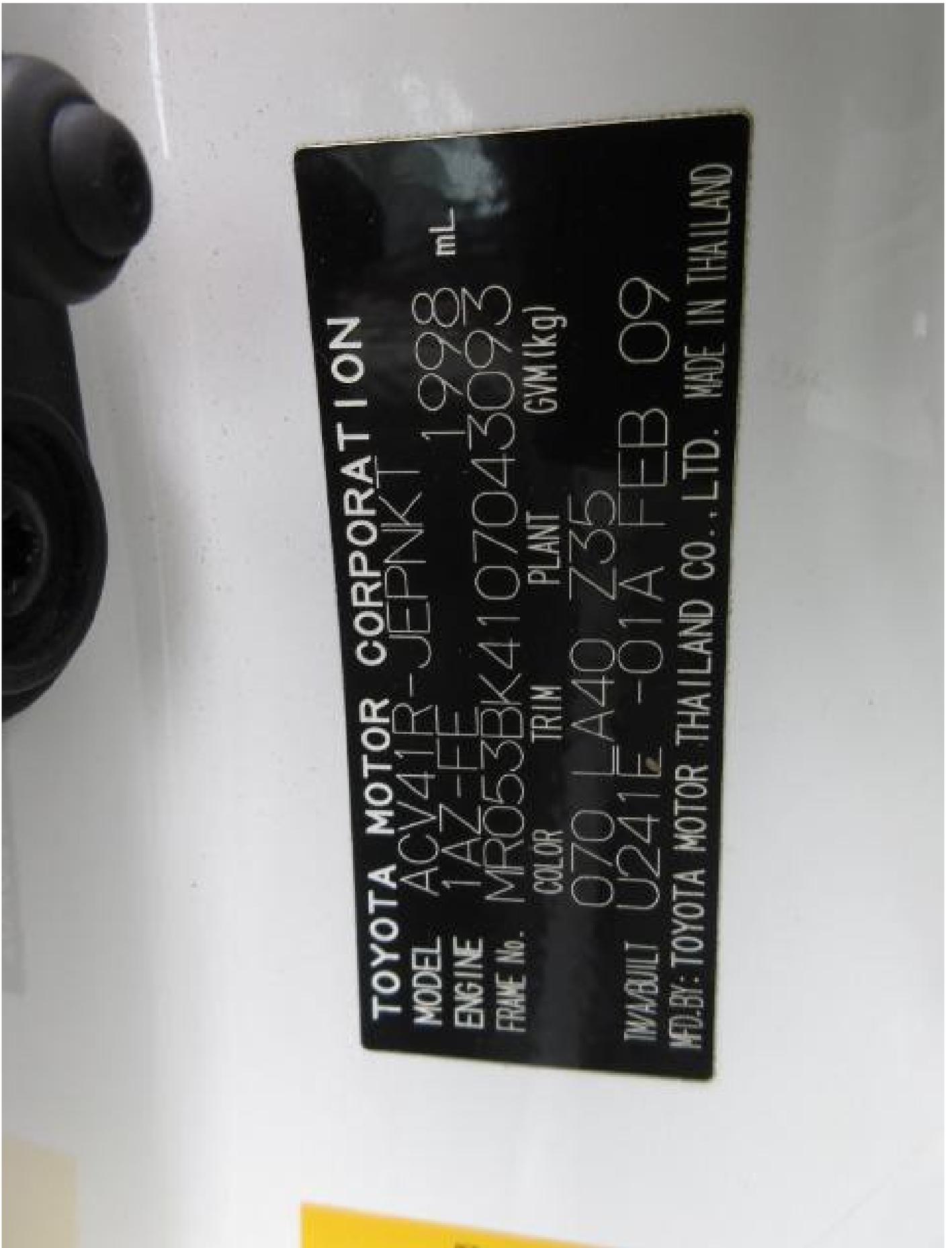


Accident Photo



Accident Photo





TOYOTA MOTOR CORPORATION

MODEL ACV41R-JEPNKT 1998 mL

ENGINE 1AZ-FE

FRAME No. MR053BK4107043093

COLOR 070 L A40 Z35

TRIM U241E -01A

PLANT FEB 09

GVM (kg) 1241E
MADE IN THAILAND