

## 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	15/07/2019 10:28
Date Of Accident	12/07/2019 17:05
Exact Location Of Accident	SLE TWDS CTE AFTER WOODLANDS AVE 12 EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL3926C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ZENG FANSHENG, REYNOLD
NRIC No	S8843670I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98739838
Alternative Phone No	OFFICE-98739838

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	VERNA 1.4 AUTO
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00013504
Cover Note Number	

### Driver

Name of Driver	ZENG FANSHENG, REYNOLD
NRIC No	S8843670I
Date Of Birth	03/11/1988
Occupation	OUTDOOR
Date Of Driving Pass	20/08/2010
Driving Experience	8 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98739838
Fax Number	
Contact Number	OFFICE-98739838
Email Address	NOEMAIL

Address	BLK 417A FERNVALE LINK #21-182
Postcode	791417
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	CHAIN 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	3
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)	1

#### 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 - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190712/7025.

#### 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	SJM215K
Vehicle Make/Model/Colour	MERCEDES GLC 250
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKS3732X

Vehicle Make/Model/Colour HONDA CIVIC

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)

#### DETAILS OF INJURED PERSON 1

Name ZENG FANSHENG, REYNOLD

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SJL3926C

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

## Accident Sketch Plan


### SKETCH PLAN


#### IMPORTANT NOTICE

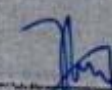
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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5. Any false reporting may be referred to the Police for investigation.
6. The 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 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.

 12/7/19  
Policyholder's Signature  
Date & Time:

 12/7/19  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

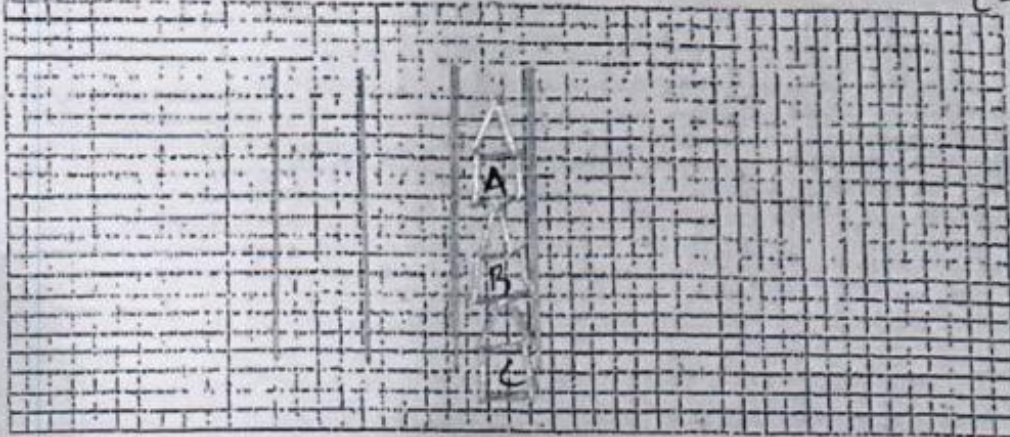
  
Reporting Centre Personnel's Signature  
Name:  
KRIC/FIN No.:

# Accident Sketch Plan

SLE / Before mandai

A-SJL3926X  
B-SJM2151K  
C-SK53732X

## SKETCH PLAN





## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

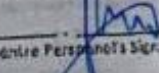
Refer To Police Report.

## DECLARATION

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

  
Policyholder's Signature  
Date & Time: 12/7/19

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 12/7/19

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

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190712/7025

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

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Report No. T/20190712/7025

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/07/2019 22:30	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: ZENG FANSHENG, REYNOLD		Address: APT BLK 417A FERVALE LINK #21-182 SINGAPORE 791417	
ID Type / ID No.: NRIC NO / S8843670I		Contact No.: Home/Office: Mobile: 98739838	
Nationality: SINGAPORE CITIZEN		Email: reynold.zeng@hotmail.com	
Sex: Male	Age: 30	Date of Birth: 03/11/1988	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: IMMIGRATION AND CHECKPOINTS AUTHORITY OFFICER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/07/2019 17:05	Type of Location: Straight Road
Location:  SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJL3926C	Car	HYUNDAI	VERNA 1.4 AUTO	White		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJL3926C	FWD Singapore Pte. Ltd	PNPV2018-00013504	26/11/2018	25/11/2019

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190712/7025

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

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Report No. T/20190712/7025

### CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ZENG FANSHENG, REYNOLD	ID No.	S8843670I
Related Vehicle	SJL3926C (Car)	Contact No.	98739838
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

#### Brief Details.

On 12/7/2019, at about 1705, I was travelling on lane 1 SLE towards CTE after Woodlands ave 12. When my vehicle was in stationary position, suddenly i felt a huge impact from my rear. My vehicle bearing (SJL3926C) was hit by SJM215k white Mercedes GLC 250. Follow by another white Honda Civic Sks3732x Chain collision, which caused a second impact to my vehicle by SJM215K. We all exchanged particular and agreed to do a accident claim. I have a neck back pain and went to see a doctor and was given 3 days Mc.

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190712/7025

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

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Report No, T/20190712/7025

### 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 /  
ANG YI TING, STEPHANIE  
Contact No.: 65476414

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:  
12/07/2019 22:30

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

