

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	09/09/2019 15:35
Date Of Accident	07/09/2019 15:05
Exact Location Of Accident	CTE FROM AMK AVE 1 (LEARNING VILLAGE) LP223-225
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU5256E
Insured/Policyholder	
Name Of Registered Owner	THUM CHOW WAH
NRIC No	S0120544G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96567419
Alternative Phone No	OTHERS-96567419

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3 1.6A EX
Exact Purpose for which vehicle was being used at time of accident	PVT USE
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

Insurance Company

Name of Insurance Company	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-V0022906-MVA
Cover Note Number	31/7/19-30/7/20

Driver

Name of Driver	CHENG HUITING, CHERYL
NRIC No	S8137235G
Date Of Birth	11/11/1981
Occupation	INDOOR
Date Of Driving Pass	14/06/2004
Driving Experience	15 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96176536
Fax Number	
Contact Number	
Email Address	DTCYL@HOTMAIL.COM

Address	BLK 173 YISHUN AVE 7 #11-805
Postcode	760173
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - DAUGHTER-INLAW
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?	NO
Was any injured conveyed to hospital by ambulance?	
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)	5
Passenger 1	NAME: : WONG MOI GENDER: : FEMALE
Passenger 2	NAME: : DANIEL THUM GENDER: : MALE
Passenger 3	NAME: : E'NOSH THUM GENDER: : MALE
Passenger 4	NAME: : ELEANOR THUM GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

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	SMD8692A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANG AI NGOH
NRIC/Passport Number	S1811411I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKB5169Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEN HUAWEN
NRIC/Passport Number	G1084578K
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

VEHICLE NO.:

SKU5256E

INSURER

QBE

DATE & TIME:

7/9/19

15:05

IMPORTANT NOTICE

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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.

Policyholder's Signature

Date & Time:

9/9/19
3:35pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

9/9/19

Reporting Centre Personnel's Signature

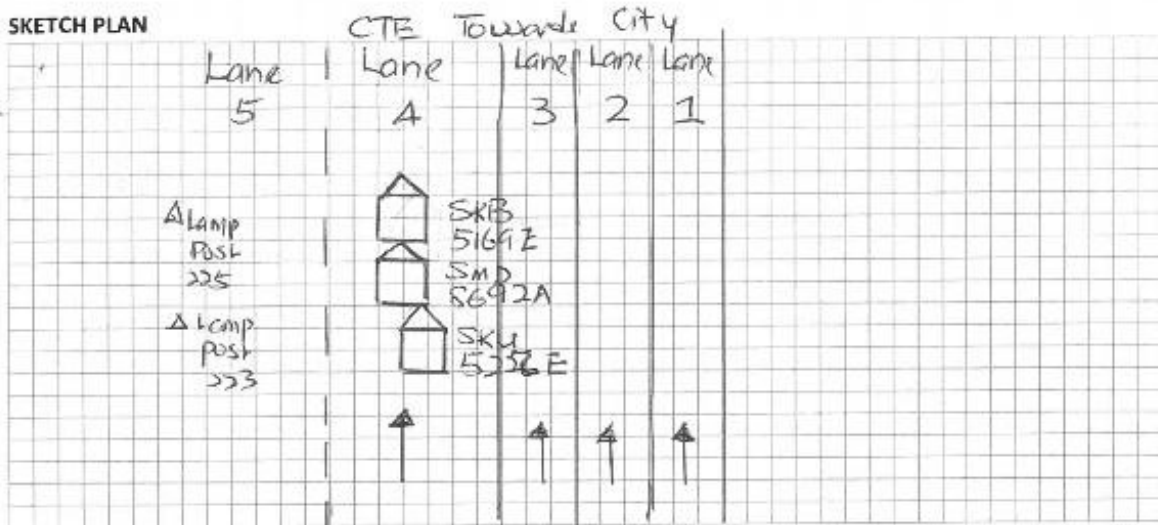
Name:

NRIC/FIN No.:

9/9/19
1/5

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer attached.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

Policyholder's Signature

Date & Time: 9/9/19
3:35 PM

GLARMC SketchPlanErnr_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature _____

Name:

NRIC/FIN No.:

(X) Claim Own Policy () Claim Third Party () Reporting Only
() Claim OD/TP at other workshop (_____)

Sketch Plan #3

Accident report for vehicle SKU 5256E / SMD 8692A / SKB 5169Z at CTE on 7 Sep 2019 at about 1505hr

The accident happened on 07 September 2019 at about 1505hr on the CTE towards the City, near lamp post 223-225.

I was driving (SKU 5256E) from AMK Ave 1, entered the slip road and turned into CTE at a speed about 60KM/h. Upon entering the CTE, I managed to switch from Lane 5 of the slip road to lane 4 on the CTE. My speed at then was 65-70km/h. The front vehicle SMD 8692A stopped suddenly without slowing down. Immediate I applied the emergency brake to stop but it was too late to stop on time and I collided onto the rear of the vehicle (SMD 8692A). After I came out of my vehicle, I noticed that the front vehicle SMD 8692A has collided onto another vehicle in front (SKB 5169Z) and that had caused the 3 vehicles accident.

The first vehicle (SKB 5169Z) rear bumper was dented, the second vehicle (SMD 8692A) front and rear bumper was also damaged. As for my vehicle (SKU 5256E) front bumper, bonnet and lightings were damaged.

Immediately after the accident, a lady emerged from the co-driver seat (SMD 8692A) and provided her particulars to me. The driver however was a man and he immediately emerged from the driver side, went into the co-driver seat and closed the door. It came to my suspicious that actual driver (the man) could be driving without a driving license. I also noticed the car (SMD 8692A) a triangle plate lying on the front dashboard and the rear windscreen does not have one. A video footage is available as evident, showing the change of drivers on SMD 8692A

The front vehicle driver (SKB 5159Z) came to ask if anyone was injured and all parties claimed no injuries and then he drove off. Comments from the EMAS team that vehicle (SKM 5159Z) is often along the highway creating accident, which, perhaps need to be reported to the proper authority for investigation as well.

Aug 1 9/sep/2019

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20190908/2024

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No. T/20190908/2024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/09/2019 10:34	Vide Report No.:	Station Diary No.: 51
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Informant's Particulars			
Name of Informant: CHENG HUITING, CHERYL		Address: APT BLK 173 YISHUN AVENUE 7 #11-805 SINGAPORE 760173	
ID Type / ID No.: NRIC NO / S8137235G		Contact No.: Home/Office: Mobile: 96176536	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 37	Date of Birth: 11/11/1981	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: PRODUCTION PLANNER		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: 07/09/2019 15:05	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY CTE from AMK Ave 1 (learning village) LP 223 - 225				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SKB5169Z	Car				Slightly Damaged	0
SKU5256E	Car				Slightly Damaged	4
SMD8692A	Car				Slightly Damaged	0

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20190908/2024

2 of 3

Report No. T/20190908/2024

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

CONTINUATION OF REPORT

Brief Details.

On 07/08/2019 at about 1505hrs, I was travelling in my vehicle along CTE from Ang Mo Kio Avenue 1.

At the lane 4 beside Learning village at Lamp post 223 to 225. The traffic was heavy, the vehicle (SMD8692A) in front of me did a sudden brake, I was not able to stop in time and collided into it. There was no visible injury on me and my passengers, I got down from my vehicle and discovered it was a chain collision which involved another vehicle as well (SKB5169Z). There was damages to the front left part of my vehicle. I managed to exchanged particulars with all the parties involved. No Traffic police or ambulance at scene. There is no in-car camera in my vehicle.

I wish to state that I find the vehicle (SMD8692A) suspicious, I have a video footage showing that the son was the driver but the mother was the one who provided her particulars to us as Ang Ai Ngoh, S18114111, Blk 253 Bangkit road #08-234. Both of them also switched seats after the accident. I also noticed that the said vehicle did not display "P plate" at the back of the vehicle but only on the front dashboard.

Furthermore, I was informed by the EMMAS person (SRO Wong Yim Woh) stating that the vehicle (SKB5169Z) was often on the road involving in accidents.

Sketch Plan #6



SINGAPORE
POLICE FORCE



T/20190908/2024

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

3 of 3

Report No. T/20190908/2024

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:

L /

Sgt 1 LOE YU HAO

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

08/09/2019 10:34

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG GECILIA

Contact No.: 65476404

Classification Of Case:

Authentication Stamp
NP168



Signature:

SN 085

Singapore Police Force

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0120544G



Name
THUM CHOW WAH
譚周華

Race
CHINESE

Date of Birth
09-07-1953

Sex
M

Country of Birth
SINGAPORE




REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8137235G



Name
CHENG HUITING, CHERYL

Race
CHINESE

Date of Birth
11-11-1981

Sex
F

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S8137235G



Name
CHENG HUITING, CHERYL

Birth Date 11 Nov 1981

Issue Date 14 Jun 2006



3394896



NRIC No. S0120544G



Group Group Date of issue
B+ 17-09-1994

Address

4817840



NRIC No. S8137235G



Date of issue
28-12-2012

Address

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

CLASS	VEHICLE CLASS	PASS DATE
Class 3	Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver, and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	14 Jun 2004

chans Car Rentals 67532536
www.chans.com.sg

License No. S8137235G



HIF 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



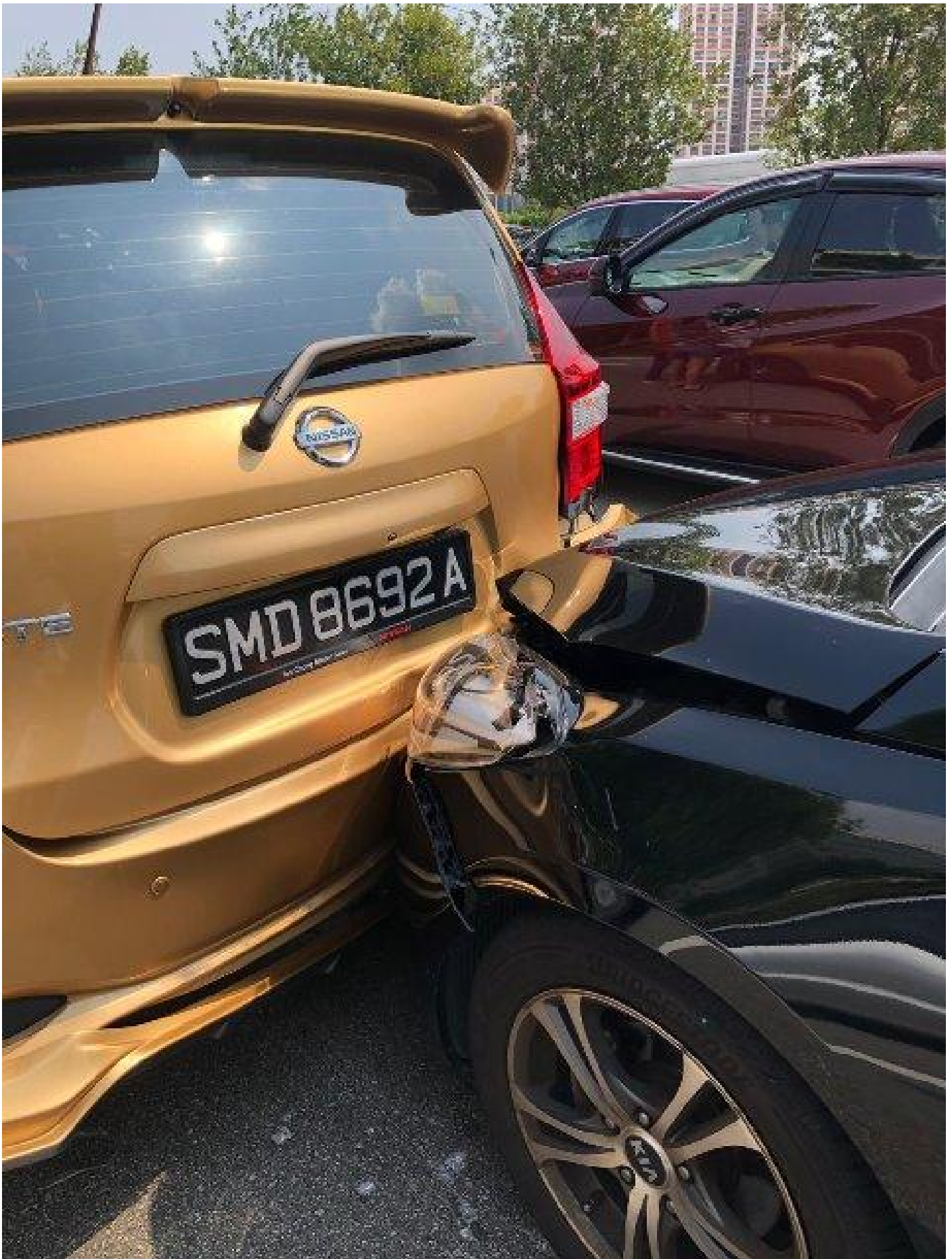
Accident Photo



Accident Photo



SCENE



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SCENE



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