

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	16/09/2019 17:55
Date Of Accident	14/09/2019 15:50
Exact Location Of Accident	AYE FILTERING TO ALEXANDRA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT7992S
Insured/Policyholder	
Name Of Registered Owner	PANG'S MOTOR RENTAL PTE. LTD.
Co Reg No	201608109H
Email Address	RICHARDWOO86@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90691091
Alternative Phone No	OFFICE-90691091

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO
Exact Purpose for which vehicle was being used at time of accident	GOING TO OFFICE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5104142597
Cover Note Number	

Driver

Name of Driver	RICHARD WOO JIA XIANG
NRIC No	S8608292F
Date Of Birth	14/03/1986
Occupation	INDOOR
Date Of Driving Pass	26/06/2008
Driving Experience	11 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90691091
Fax Number	
Contact Number	OTHERS-90691091
Email Address	RICHARDWOO86@GMAIL.COM

Address	BLK 671A JURONG WEST STREET 65 #16-98
Postcode	641671
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
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)	2
Passenger 1	NAME: : LOW MEI PING (WIFE) GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI POLICE DIVISIONAL HQ (D DIVISION)
Police Station Address	ROAD: 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7740000 - FAX NO: 67741705
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT D/20190915/7009

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW6229D
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MAX THEIN
NRIC/Passport Number	S8006349J
Contact Number	90020404

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKV3397P
Vehicle Make/Model/Colour HONDA VEZEL
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver PATRICK HO
NRIC/Passport Number S1600950D
Contact Number 96951177

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name RICHARD WOO JIA XIANG
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SJT7992S
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO

Address
Postcode

DETAILS OF INJURED PERSON 2

Name LOW MEI PING (WIFE)
Approximate Age
Injuries Sustain SERIOUS INJURY
Injured person in which vehicle? SJT7992S
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES

Address
Postcode

Accident 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:

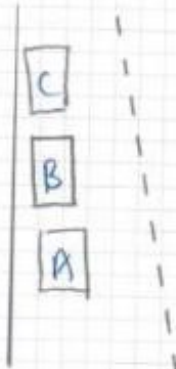
Driver's Signature
(If driver is not the policyholder)
Date & Time: 16/09/19

Reporting Centre Personnel's Signature
Name: Koshi Lim
NRIC/FIN No.: 42522

Accident Sketch Plan

SKETCH PLAN

BYE FILTRINES To ALEXANDRA ROAD



A) SJT 7992S

B) SJW 6229D

C) SKV 3397P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/9/2019, 4:50pm, I was entering the exit towards Alexandra Road. The car (SJW6229D) suddenly jam braked in front of me. The brake light of the car cannot be seen.

Police Report D/20190915/2009

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: 16/09/19
4:25pm

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

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Report No. D/20190915/7009

Date/Time Report Made 15/09/2019 14:15	Vide Report No.	Station Diary No.		
Name Of Informant RICHARD WOO JIA XIANG	Address APT BLK 671A JURONG WEST STREET 65 #16-98 SINGAPORE 641671			
ID Type / ID No. NRIC NO / S8608292F	Contact No. Home/Office:	Mobile: 90691091		
Nationality SINGAPORE CITIZEN	Email Address richardwoo86@hotmail.com			
Occupation Financial/Investment adviser	Sex Male	Age 33	Date of Birth 14/03/1986	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 14/09/2019 16:50 - 14/09/2019 18:30	Location Of Incident AYER RAJAH EXPRESSWAY			

On 14/9/2019. 450pm, i was entering the exit towards Alexandra road. The car (SJW6229D) suddenly jam braked infront of me. The brake light of the car cannot be seen that's why i could not differentiate whether the car was stopped or still moving. When i start to notice that the car was stopped, then i immediately jam braked my car and it was too late. My car banged into SJW6229D. Both my wife and myself have injuries, as both our airbags were activated. She was also conveyed to National University Hospital via ambulance shortly after. She had a cut underneath her chin and was bleeding profusely. I twisted my finger and my lips were injured due to the impact.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. Date/Time: 15/09/2019 14:15 Classification Of Case:
Not applicable	
Signature Of Interpreter: Not applicable	
Officer In-Charge Of Case:	

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POLICE REPORT



**SINGAPORE
POLICE FORCE**



D/20190915/7009

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190915/7009

We managed to exit from the car after the accident after ensuring that both of us have no major injuries and can still move and not feeling giddy. I came out to gather some information from the incident. The car in front of me jam braked because of the car in front of him (SKV3397P) jam braked as well. They mentioned that there was another car which jam brake in front of SKV3397P and moved off after that. All the cars have no recording devices.

Both my wife and myself were wearing seatbelt before the incident happened.

The details as follows:

1st car - SKV3397P, Patrick Ho 96951177, S1600950D

2nd car - SJW6229D, Max Thein 90020404, S8006349J

3rd car - SJT7992S, Richard Woo 90691091, S8608292F

Subjects Involved			
Victim			
Person Name	RICHARD WOO JIA XIANG		
ID Type	NRIC NO	ID No	S8608292F
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Financial/Investment adviser	Address Type	
Address	APT BLK 671A JURONG WEST	Mobile No	90691091
	STREET 65 #16-98		
	SINGAPORE 641671		

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter:	Date/Time:
Not applicable	15/09/2019 14:15
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

POLICE REPORT



**SINGAPORE
POLICE FORCE**



D/20190915/7009

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190915/7009

Is Informant A Victim?	Yes		
Person Name	Low Mei Ping		
ID Type	NRIC NO	ID No	S8808507H
Gender	Female	Age	31
Race	Chinese	Language	English
Occupation	Exhibition/Conference/Event planner	Address	671A Blk 671A Jurong West St 65 #16-98 SINGAPORE 641671
Mobile No	82027004	Relation To Informant	wife
Person Name	RICHARD WOO JIA XIANG (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 15/09/2019 14:15
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



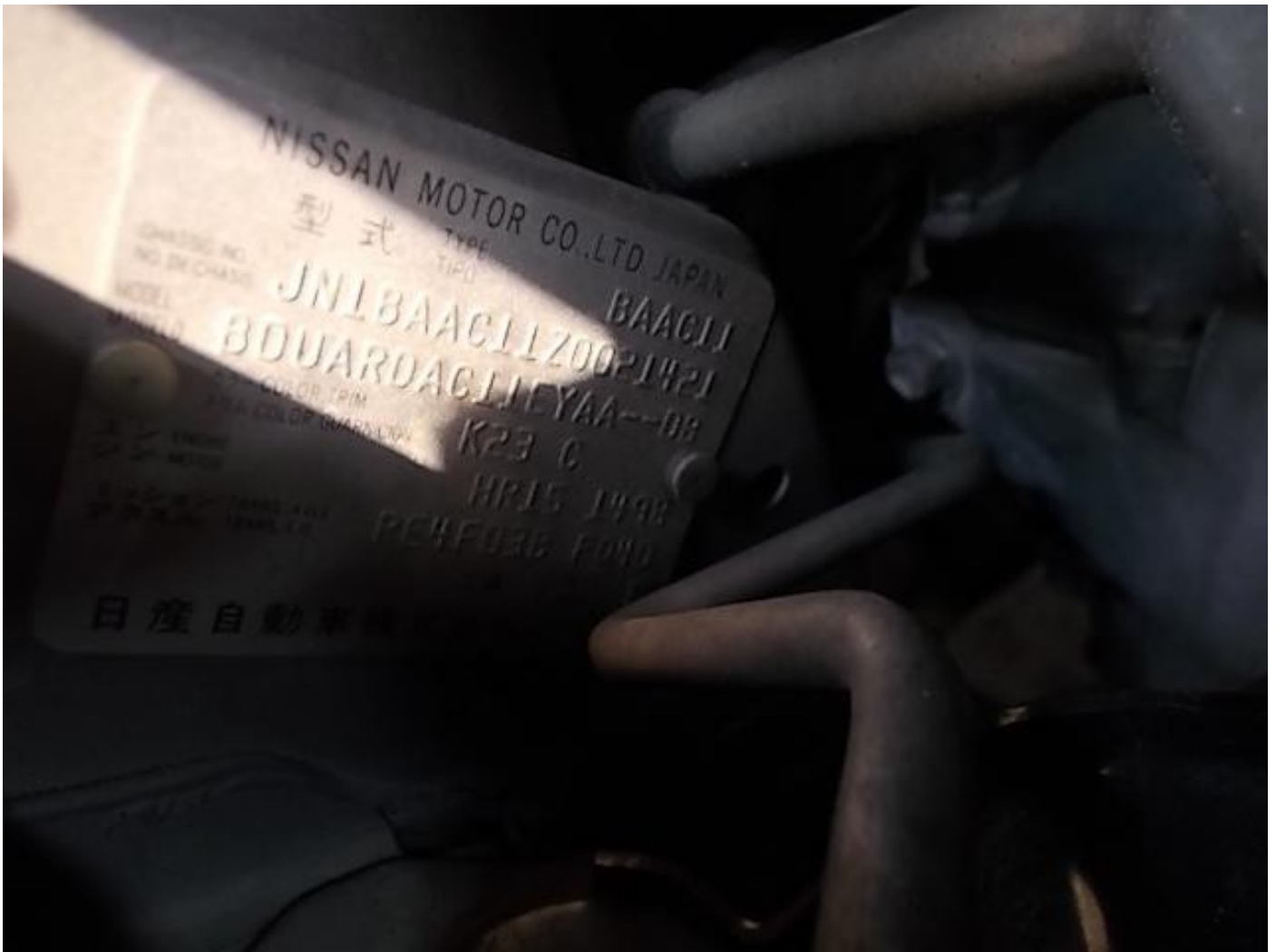
Accident Photo



Accident Photo



Accident Photo



Accident Photo

