

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	29/10/2019 16:01
Date Of Accident	27/10/2019 12:30
Exact Location Of Accident	JURONG WEST AVE 4 OPP DOU TIAN GONG TEMPLE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM1996H
Insured/Policyholder	
Name Of Registered Owner	MR ONG SOON FOO
NRIC No	S1513771A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94361676
Alternative Phone No	OFFICE-94361676

Vehicle Particulars

Manufacturer	HYUNDAI
Model	HD AVANTE 1.6 A
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MB024725-R09
Cover Note Number	

Driver

Name of Driver	ONG KWEE LEONG (WANG GUILIANG)
NRIC No	S8309553I
Date Of Birth	06/04/1983
Occupation	INDOOR
Date Of Driving Pass	21/11/2003
Driving Experience	15 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94361676
Fax Number	
Contact Number	OFFICE-94361676
Email Address	NOEMAIL

Address	BLK 124 BUKIT BATOK CENTRAL #01-375
Postcode	650124
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	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)	2
Passenger 1	NAME: : PENG HUI LIAN, JILLIAN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG POLICE DIVISIONAL HQ ('J' DIVISION)
Police Station Address	ROAD: NO. 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7910000 - FAX NO: 68965649
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - J/20191028/7011.

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	SKR8292X
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMF5398J
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)

DETAILS OF INJURED PERSON 1

Name ONG KWEE LEONG (WANG GUILIANG)
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJM1996H
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name PENG HUI LIAN, JILLIAN
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJM1996H
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

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5. 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:

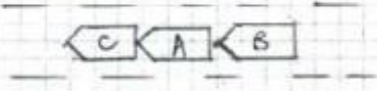
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Accident Sketch Plan

SKETCH PLAN:

Jurong West Ave 4 Opposite Dou Tian Gong Temple



A : SM1996H
B : SHR8292X
C : SNF5398J

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG JURONG WEST AVE 4 OPPOSITE DOU TIAN GONG TEMPLE. VEHICLE AHEAD SLOWED DOWN AND STOPPED. I FOLLOWED SUIT. MOMENTS LATER, VEHICLE B REAR-ENDED MY VEHICLE. THE IMPACT FORCED MY VEHICLE FORWARD TO HIT VEHICLE C.

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:

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

Police Report



**SINGAPORE
POLICE FORCE**



J/20191028/7011

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POLICE REPORT (NP299)

Report No. J/20191028/7011

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 28/10/2019 12:26	Vide Report No.	Station Diary No.
Name Of Informant ONG KWEE LEONG	Address APT BLK 124 BUKIT BATOK CENTRAL #01-375 SINGAPORE 650124	
ID Type / ID No. NRIC NO / S8309553I	Contact No. Home/Office: Mobile: 94361676	
Nationality SINGAPORE CITIZEN	Email Address ONG Kwee Leong@spf.gov.sg	
Occupation Police officer	Sex Male	Age 36
Institution/School Name	Date of Birth 06/04/1983	Race Chinese
Date/Time Of Incident 27/10/2019 12:30 - 27/10/2019 13:00	Location Of Incident JURONG WEST AVENUE 4	

Brief details.

On the 27 Oct 2019 at about 1230hrs, together with my wife I was travelling in my vehicle SJM1996H (Hyundai Avente) along Jurong West Ave 4 towards Pioneer Road North. Weather was sunny and dry.

While travelling along Jurong West Ave 4 near opposite Dou Tian Gong temple, a Toyota Prius - SMF5398J - brake in front of me. As such I applied my brake and manage to stop behind the vehicle in time. However a Toyota Altis - SKR8292X - knocked onto my rear bumper causing me to knock onto the Toyota Prius - SMF5398J - in front. No one was injured during that point of time and no ambulance or

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: 28/10/2019 12:26
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

Police Report



**SINGAPORE
POLICE FORCE**



J/20191028/7011

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20191028/7011

towing crew was activated. No assault or dispute took place. The drivers exchanged particulars and we agreed to proceed for insurance claim.

While we were on the way to the workshop, my wife and I began to feel unwell and we proceeded to see a doctor. After relating what happen earlier, the doctor performed a check on my us and issued us with 3 days MC.

I roughly remember there were 2 passengers and 1 driver inside the Toyota Prius and 4 passengers and 1 driver inside the Toyota Altis. All vehicles were able to drive off after the accident. I am lodging this report for my insurance claim.

Driver of Toyota Prius - SMF5398J

Leong Sing Tai, Male, 1971

NRIC: S7142593B

HP: 98627108

Driver of Toyota Altiss - SKR8292X

Yu Zheng Way, Male, 1988

NRIC: S8871404J

HP: 98515345

Subjects Involved	
Victim	
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	28/10/2019 12:26
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Police Report



**SINGAPORE
POLICE FORCE**



J/20191028/7011

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20191028/7011

Person Name	ONG KWEE LEONG		
ID Type	NRIC NO	ID No	S8309553I
Gender	Male	Age	36
Race	Chinese	Language	English
Occupation	Police officer	Address Type	
Address	APT BLK 124 BUKIT BATOK CENTRAL #01-375 SINGAPORE 650124	Mobile No	94361676
Is Informant A Victim?	Yes		
Person Name	Peng Hui Lian, Jillian		
ID Type	NRIC NO	ID No	S8702686H
Gender	Female	Age	32
Race	Chinese	Language	English
Occupation	Police officer	Address	124 Bukit Batok Central #01- 376 SINGAPORE 650124
Mobile No	96941579	Relation To Informant	Wife
Person Name	ONG KWEE LEONG (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: 28/10/2019 12:26
Officer In-Charge Of Case:	Classification Of Case:
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Accident Photo



Accident Photo



Accident Photo



Accident Photo



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