

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	02/01/2020 09:34
Date Of Accident	30/12/2019 09:50
Exact Location Of Accident	PATERSON HILL & GRANGE RD JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCM7798G
Insured/Policyholder	
Name Of Registered Owner	CHENG WAK HENG
NRIC No	S0242850D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96787798
Alternative Phone No	Office-96787798

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200
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

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100503726
Cover Note Number	

Driver

Name of Driver	CHENG WAK HENG
NRIC No	S0242850D
Date Of Birth	22/02/1945
Occupation	INDOOR
Date Of Driving Pass	23/05/1962
Driving Experience	57 YEARS AND 7 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96787798
Fax Number	
Contact Number	OFFICE-96787798
EMail Address	NOEMAIL
Address	77 KING'S ROAD
Postcode	268138
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	COLLISION - HEAD TO REAR
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	2
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: : UNKNOWN Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20191230/2137. BUKIT TIMAH NPC.

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	SMQ7654Z
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle CategoryPRIVATE 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

Approximate Age

Injuries Sustain

Injured person in which vehicle?SCM7798G

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:

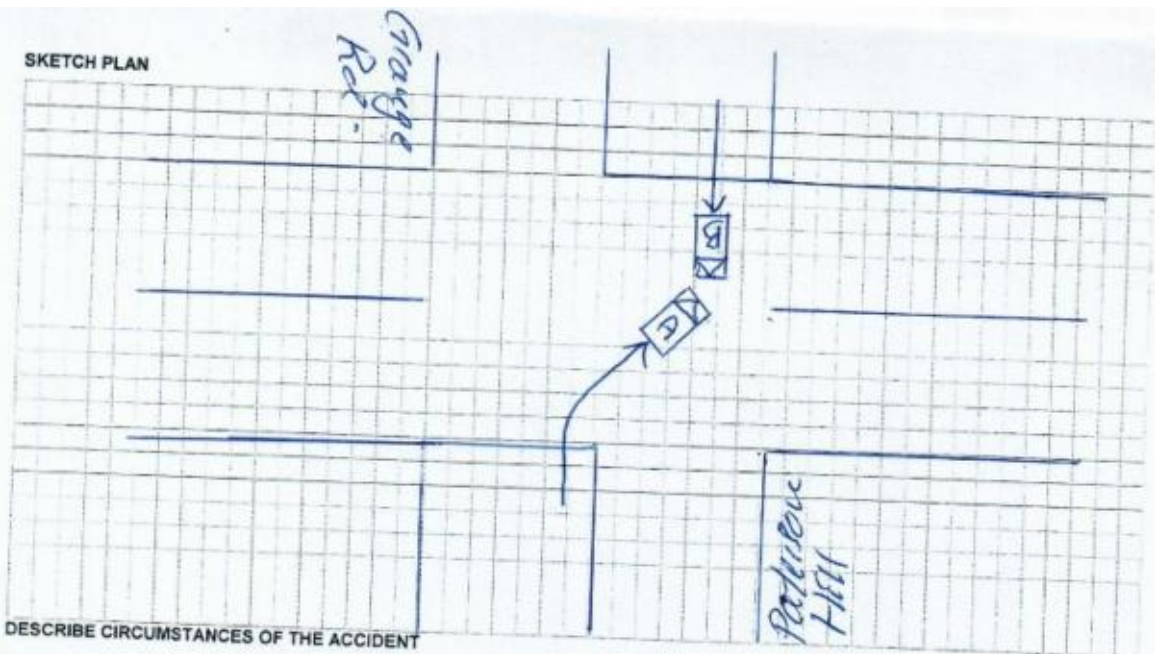
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

Yik Chan Hoe
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
DID: 6771 4353 HP: 9186 5109 Fax: 6872 1272
Email: chanhoe@yikchanhoe.com.sg
Reporting Centre Personnel's
Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report no.
 T/20091230/2137

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
 Date & Time

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

Reporting Centre Personnel's
 Name:

Yik Chan Hoe
 Cycle & Carriage Industries Pte Ltd
 Body Care & Repair Center
 DRD: 6771 4353 HP: 9186 5109 Fax: 6872 1272
 Email: chanhoe.yik@cyclecarriage.com.sg



Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/12/2019 18:39	Vide Report No.:	Station Diary No.: 137
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Informant's Particulars

Name of Informant: CHENG WAK HENG	Address: 77 KING'S ROAD SINGAPORE 268138		
ID Type / ID No.: NRIC NO / S0242850D	Contact No.: Home/Office: Mobile: 96787798		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 74	Date of Birth: 22/02/1945	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Company director	Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 30/12/2019 09:50	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 PATERSON HILL GRANGE ROAD Junction of Paterson Hill and Grange Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SCM7798G	Car	MERCEDES BENZ	E200 EXCLUSIVE (R18 LED)	Silver	Seriously Damaged	1
SMQ7654Z	Car				Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SCM7798G	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100503726-02	31/03/2019	30/03/2020

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999



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Report No. T/20191230/2137

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Driver		Use of Pedestrian Crossing: NA	
Name	CHENG WAK HENG	ID No.	S0242850D
Related Vehicle	SCM7798G (Car)	Contact No.	96787798
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	30/12/2019	Date Discharge	30/12/2019
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Passenger			
Name	CHIA MEOW HIANG	ID No.	S0088735H
Related Vehicle	SCM7798G (Car)	Contact No.	97308711
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	30/12/2019	Date Discharge	30/12/2019
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

On 30/12/2019 at about 0952hrs, I was driving my car (SCM7798G) along Paterson Hill towards Grange Road. when approaching the traffic junction of Paterson Hill, Grange Road, Hoot Kiam Road and Irwell Bank Road, I signaled right to turn right into Grange Road. As I was turning to the right with the green arrow in my direction. A car with the registration number SMQ7654Z came from the direction of Hoot Kiam Road banged into the front left side of my car. The front left of my car was badly damaged.

Shortly the traffic police and the ambulance came, my wife and I were taken to the Hospital for observation.

Accident Sketch Plan



SINGAPORE
POLICE FORCE



T/20191230/2137

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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Report No. T/20191230/2137

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:
E /
Sgt 2 TEO JIE DONG, MARCUS

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI THABAGESH JEYATHESH
Contact No.: 65476232

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SN 170

SIGNATURE

Signature Of Informant:

Date/Time:
30/12/2019 18:39

Classification Of Case:

Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S0242850D**
Name: **CHENG WAK HENG**

Birth Date: 22 Feb 1945
Issue Date: 23 Oct 2012

002116674K

FOR C&C USE ONLY

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

		EFFECTIVE DATE
Class 2B	Motorcycles \leq 200 cc	23 Jun 1964
Class 2A	Motorcycles between 201 cc and 400 cc	23 Jun 1964
Class 2	Motorcycles $>$ 400 cc	23 Jun 1964
Class 3	Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	23 May 1962

FOR C&C USE ONLY

NP 428A

Licence No: S0242850D

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

