

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	10/02/2020 16:54
Date Of Accident	08/02/2020 21:30
Exact Location Of Accident	BEDOK NORTH RD TWDS PIE ENTRT AT BUS STOP 84459
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH2515Y
Insured/Policyholder	
Name Of Registered Owner	HENG TONG CHUAN
NRIC No	S8029494H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92322249
Alternative Phone No	OFFICE-92322249

Vehicle Particulars

Manufacturer	LEXUS
Model	IS-250 (A)

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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00003606
Cover Note Number	

Driver

Name of Driver	HENG TONG CHUAN
NRIC No	S8029494H
Date Of Birth	26/09/1980
Occupation	INDOOR
Date Of Driving Pass	18/02/2002
Driving Experience	17 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92322249
Fax Number	
Contact Number	OFFICE-92322249
EEmail Address	NOEMAIL

Address	29 TAMPINES ST 86 #11-29
Postcode	528571
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?	NO
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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20200208/2148.

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	SJK6175M
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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)

Sketch Plan

SKETCH PLAN

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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:

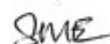
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

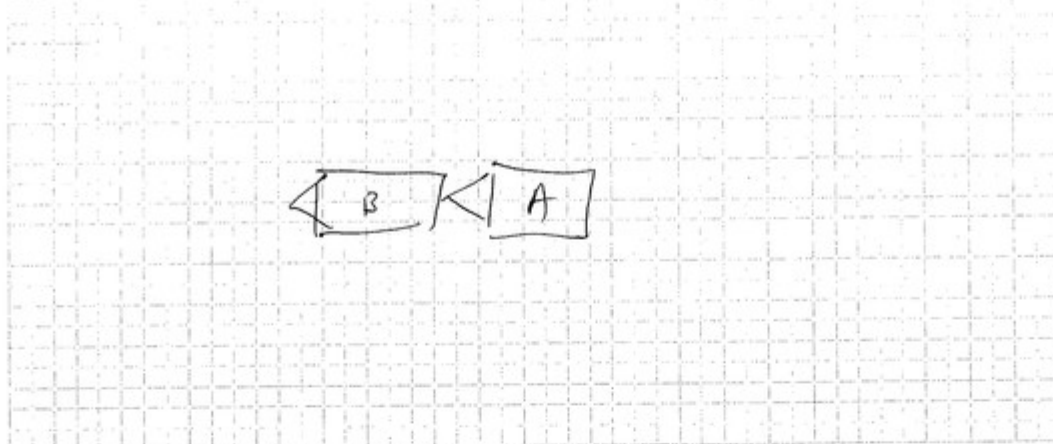
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

2017/03/20 14:00:00



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

T/20200208/2148.

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:

10/2/20
Reporting Centre Personnel's Signature
Name: 10:55 am
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20200208/2148

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

1 of 4

Report No. T/20200208/2148

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/02/2020 23:01		Vide Report No.: G/20200208/0257		Station Diary No.: 96	
Informant's Particulars					
Name of Informant: HENG TONG CHUAN			Address: 29 TAMPINES STREET 86 #11-29 SINGAPORE 528571		
ID Type / ID No.: NRIC NO / S8029494H			Contact No.: Home/Office: Mobile: 92322249		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 39	Date of Birth: 26/09/1980	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: IT MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/02/2020 21:30	Type of Location: Straight Road
Location: Along Road 1 BEDOK NORTH ROAD				
Along Bedok North Road towards PIE, beside busstop 84459				
Weather: Night	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJK6175M	Car	TOYOTA	VI	Silver		1
SMH2515Y	Car	TOYOTA	LEIS ISJC AD LUX	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMH2515Y	FWD Singapore Pte. Ltd	PNPV2019-00003606	13/02/2019	08/03/2020



**SINGAPORE
POLICE FORCE**



T/20200208/2148

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20200208/2148

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMMAD SHAHRAZIN BIN MOHD AMINOLAH	ID No.	S7927622G
Related Vehicle	SJK6175M (Car)	Contact No.	91207690
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HENG TONG CHUAN	ID No.	S8029494H
Related Vehicle	SMH2515Y (Car)	Contact No.	92322249
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	NIL	Degree of Injury	NIL

Brief Details.

On the 08/02/2020 at about 2133hrs, I was driving my vehicle SMH5151Y along Bedok North Road towards PIE. It was a 3 lane road and I was at the left most lane when the car in front of me suddenly stopped beside the bus stop 84459. I couldn't stop my vehicle in time thus the front of my vehicle collided onto the rear of the vehicle SJK6175M.

I went out to check on the car and there was no visible injury on the driver and the passenger seated on at the back seat of the said car. As that was a car rented for private hiring, the driver called his car rental company. Thereafter the rental company called for ambulance on the driver's behalf. The driver then complained the back of his neck and his back has some sore.

The ambulance and traffic police arrived and took our particulars. The driver was then sent to hospital by the ambulance. The passenger on his car informed that he is fine and his contact number is HP: 96308386, Yang Zhou.

I do not feel any discomfort currently. TP had taken over the SD card of my in car camera at scene.

The front bumper and bonnet of my vehicle is damaged due to the collision.



**SINGAPORE
POLICE FORCE**



T/20200208/2148

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
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Report No. T/20200208/2148

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Related Vehicle	SJK6175M (Car)	Contact No.	91207690
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	HENG TONG CHUAN	ID No.	S8029494H
Related Vehicle	SMH2515Y (Car)	Contact No.	92322249
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	NIL	Degree of Injury	NIL

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T/20200208/2148

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20200208/2148

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:

G /

Sgt 2 CHIN XUE NI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt NORAMEERA BINTE MOHAMED
HUSSEIN

Contact No.: 65476236

Authentication Stamp

NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Signature Of Informant:

Date/Time:

08/02/2020 23:01

Classification Of Case:

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20200208/2148

3 of 4

Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

Report No. T/20200208/2148

CONTINUATION OF REPORT

Accident Sketch Plan



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No: 4/20200208/0257

I, SSG T120174 Tan Wei Siong
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)
of TPHQ
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One Sandisk 32GB MicroSD card (No S/N)
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____

from HENG TONG CHUAN S8029494H
(Name, NRIC or Passport No. / Rank and No.)
of BLK 29 TAMPINES STREET 86 # 11-29 S(328571)
(Address / Police Station / NPC / NPP)
on 8/2/2020 at 10PM
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

Received by:

[Signature]
(Signature)
HENG TONG CHUAN S8029494H
(Name, NRIC or Passport No. / Rank and No.)

[Signature]
(Signature)
SSG T120174 Wei Siong
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: _____

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8029494H**

Name: **HENG TONG CHUAN (WANG ZHONGQUAN)**

Birth Date: **26 Sep 1980**

Issue Date: **31 Jan 2003**

000176404C



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8029494H

Name: **HENG TONG CHUAN (WANG ZHONGQUAN)**

王忠全

Race: **CHINESE**

Date of birth: **26-09-1980**

Country of birth: **SINGAPORE**

Sex: **M**

S8029494H



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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **15 Feb 2002**

Licence No: **S8029494H**

NP 42RA

463840

NRIC No: **S8029494H**

Date of issue: **11-10-2010**

29 TAMPINES STREET 86 #11-29
SINGAPORE 528571

NRIC No: **S8029494H**

Date: **19/07/2017**






YOUR CLASSIC CAR INSURANCE SUMMARY

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.
All accidents must be reported within 24 hours or the next working day of the incident
regardless of whether it will lead to a claim.

POLICY NUMBER : PNPV2019-00003606

About this policy

Premium paid	: S\$1,710.65	Coverage start date	: 13/02/2019
(Inclusive of GST)		Coverage end date	: 12/02/2020
Who is insured to drive:	: You and any Authorised Driver		
Policy Type	: CLASSIC		

About you (As the policyholder)

Your name	: Heng Tong Chuan		
Address	: 29 Tampines Street 86 11-29 The Santorini Singapore 528571		
Email	: tc@magnumfury.com		
NRIC/FIN	: S8029494H	Date of birth	: 26/09/1980
Marital status	: Married	Gender	: Male
Current no claims discount	: 0%	Mobile Number	: 92322249
Years of driving experience	: Three or more	Certificate of merit	: Yes

About your car

Car make and model	: LEXUS IS250 C
Year of first registration	: 2009
Car plate number	: SMH2515Y
Issued on:	: 12/02/2019

Abhishek Bhatia
Chief Executive Officer
FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions
and exclusions of this policy.

Please immediately inform us at +65-6820-8888
or email us to contact.sg@fwd.com if any details in
this Car Insurance Summary need to be changed.

Accident Photo



Accident Photo



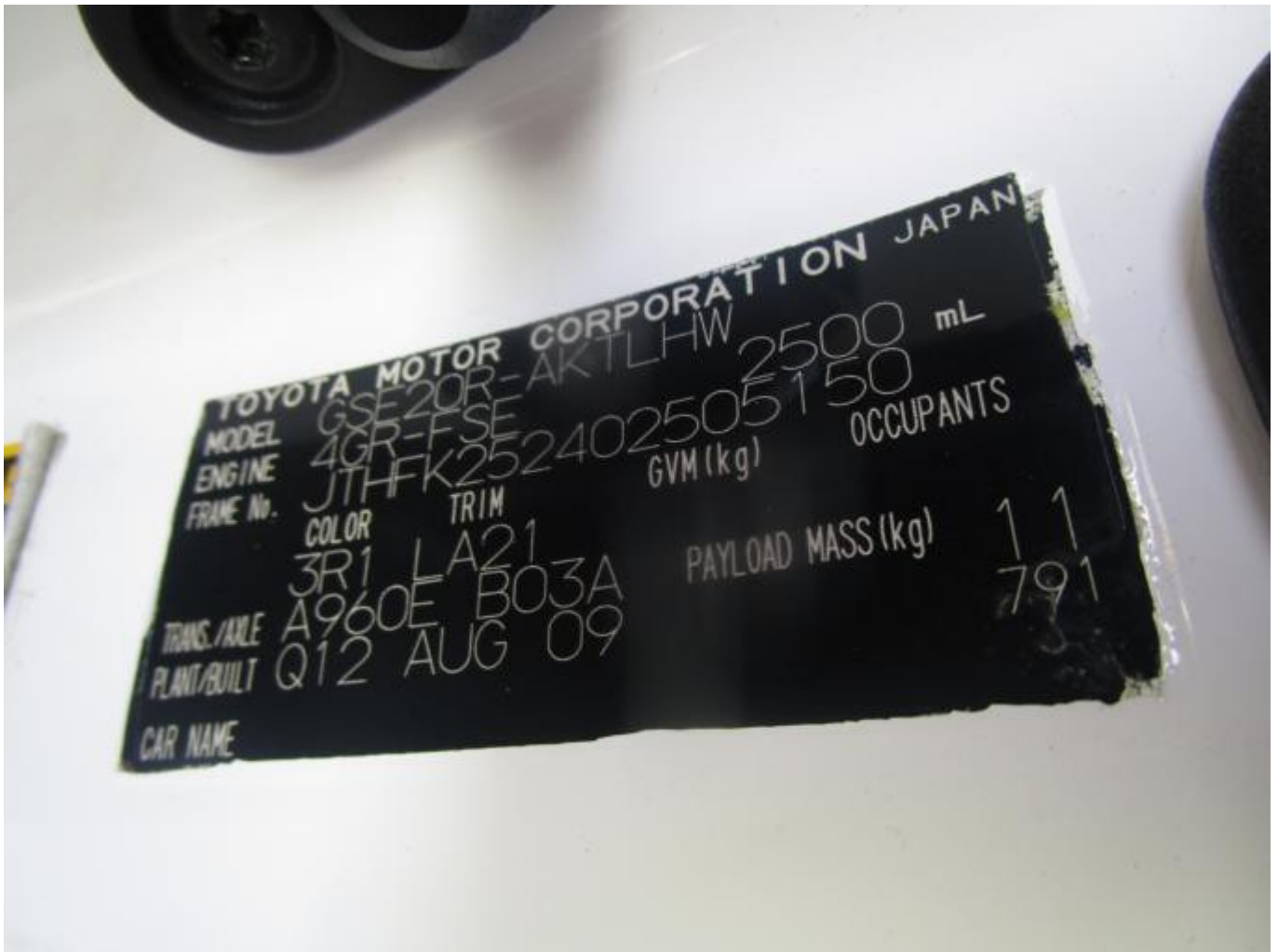
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

Accident Details

Chief Executive Officer

Public Insurance Plan Ltd

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FWD Car Insurance Summary Policy

FWD Car Insurance Summary Policy

FWD Car Insurance Summary Policy

The following are maximum limits per Accident as defined in the contract.

	Yes	No
Emergency assistance		
Third party liability	No Limit	No Limit
Death or injury to a third party	\$55,000,000	\$55,000,000
Damage to a third party's property	\$55,000	\$55,000
Legal costs	Market value	Market value
Loss or damage by fire or theft	Market value	Market value
Accidental loss or damage to	Yes	No
Your car	\$5,000	\$5,000
Your car's accessories	\$5,000	\$5,000
Personal belongings	Not Applicable	Not Applicable
Excess	\$5,000	\$5,000
Standard excess	\$5,000	\$5,000
Young driver excess	\$5,000	\$5,000
Windscreen replacement excess	Not Applicable	Not Applicable
Lifetime NCD Guarantee	\$5,000	\$5,000
Towing	\$540 per occupant	\$540 per day for 6 days
Safe travel after an accident	\$540 per day for 6 days	\$540 per day for 6 days
Daily transport allowance	Yes	No
Replacement keys and locks	Yes	No
Personal accident sum insured	\$530,000	\$530,000
For the driver	\$530,000	\$530,000
For each passenger	\$530,000	\$530,000
Guardian angel benefit	Yes	No
Extended workshop guarantee	Yes	No
(Your repair done by FWD Premium Workshops)	Yes	No
New car replacement	Yes	No
(If Your Car is written off while less than one year old)	Yes	No
Car repairs at	Yes	No
FWD premium workshops	Yes	No

FWD

FWD

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