

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	12/08/2020 16:00
Date Of Accident	11/08/2020 20:50
Exact Location Of Accident	PUNGGOL CENTRAL TWDS SUMANG WALK FILTER LANE TO PU
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBU2933K
Insured/Policyholder	
Name Of Registered Owner	WONG JUNJIE JARROD
NRIC No	S8125621G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91004091
Alternative Phone No	OFFICE-91004091

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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?	NO
If No, Please state action to be taken	THIRD PARTY
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-V0017531-MVA-R002
Cover Note Number	

Driver

Name of Driver	WONG JUNJIE JARROD
NRIC No	S8125621G
Date Of Birth	11/08/1981
Occupation	INDOOR
Date Of Driving Pass	21/05/2008
Driving Experience	12 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91004091
Fax Number	
Contact Number	OFFICE-91004091
Email Address	NOEMAIL

Address	BLK 614A EDGEFIELD PLAINS #11-321
Postcode	821614
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	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , 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: F/20200811/2132.

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	SJQ6243T
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)

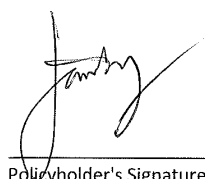
SKETCH PLAN

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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:

12/8/20

Driver's Signature

(If driver is not the policyholder)

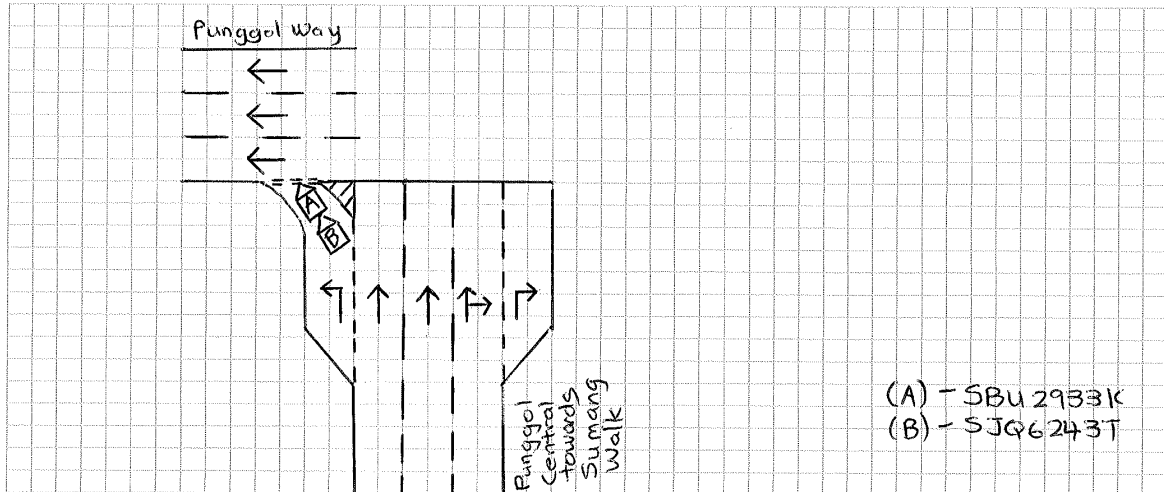
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

— Refer to police report attached —
Report No. F/20200811/2132

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



**SINGAPORE
POLICE FORCE**



F/20200811/2132

1 of 2

POLICE REPORT (NP299)

Report No. F/20200811/2132

Police Station Of Origin
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

Date/Time Report Made 11/08/2020 23:59	Vide Report No.	Station Diary No. 80
Name Of Informant WONG JUNJIE, JARROD	Address APT BLK 614A EDGEFIELD PLAINS #11-321 SINGAPORE 821614	
ID Type / ID No. NRIC NO / S8125621G	Contact No. Home/Office Mobile 91004091	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation SELF-EMPLOYED	Sex Male	Age 39
Institution/School Name	Date of Birth 11/08/1981	Race Chinese
Date/Time Of Incident 11/08/2020 20:50	Location Of Incident PUNGGOL CENTRAL SINGAPORE Filter lane at junction of Punggol Central and Punggol Way	

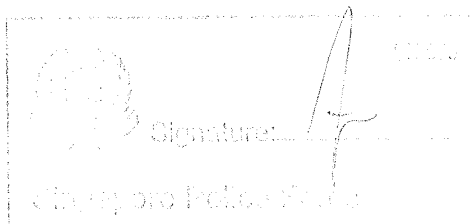
Brief details.

On 11/08/2020 at about 2050hrs, I was in a road traffic accident.

I was in my vehicle (SBU2933K) at the filter lane at the junction of Punggol Central and Punggol Way, intending to turn left into Punggol Way, heading towards TPE/CTE. After checking for safety, I decided to move off from the filter lane. However, I noticed a motorcycle from the on coming traffic, as such, I had

Signature Of Officer Recording The Report: F / Sgt 3 NURFADHIL BIN AYOB	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/08/2020 23:59
Officer In-Charge Of Case: F / Punggol N.P.C / Sgt 3 MUHAMMAD HANAFI BIN ROSLI Contact No.: 66049999	Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



F/20200811/2132

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200811/2132

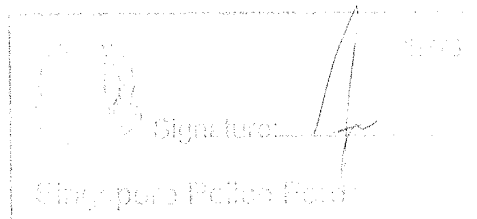
stopped my vehicle from moving. Out of a sudden, I felt a collision from the rear. Another vehicle (SJQ6243T) had collided onto the rear portion of my vehicle. The driver of said vehicle and I went out to make a check and took some photos of the incident before moving to a safe area to speak. We had exchanged our particulars and the driver of the other vehicle is ONE Jeremy Soh Tien Huat, NRIC: S8466715A, HP: 92348823. We have negotiated but have not come into a conclusion whether to have a private settlement or to resort to insurance claims as I have to send my vehicle to a workshop and I am currently awaiting the quotations of the damages that will be made known to me by tomorrow, 12/08/2020.

I would like to state that I am lodging this report for my own record purpose only.

Signature Of Officer Recording The Report: F / Sgt 3 NURFADHIL BIN AYOB
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: F / Punggol N.P.C / Sgt 3 MUHAMMAD HANAFI BIN ROSLI Contact No.: 66049999

Signature Of Informant:
Date/Time: 11/08/2020 23:59
Classification Of Case:

Authentication Stamp





Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no: SBU 2933K

Date of Accident: 11/08/20

SBU 2933K



Usage for Insurance Motor Accident Reporting and Claims Purposes Only

Vehicle no: SBU 2933K
Date of Accident: 11/08/20

SBU2933K

QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583
Tel: 65-6224 6633 Fax: 65-6533 3270
GST Registration No.: M200644018
www.qbe.com/sg



Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No.

8-V0017531-MVA-R002

Account Name **I INSURANCE SG AGENCY**

MCI Type **MX1**

- 1 Index Mark and Registration Number of Vehicle or Chassis No: **SBU2933K**
- 2 Name of Policyholder **WONG JUNJIE JARROD**
- 3 Effective date of Commencement of Insurance for the purpose of the Regulations 15/05/2020
- 4 Date of Expiry **14/05/2021**
- 5 Person or Classes of Person entitled to drive*

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.

(b) Any person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from the driving the Motor Vehicle

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage

- 6 Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

- 7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings

I/WE HEREBY CERTIFY that the Policy to which this certificate relates is issued in accordance with the provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)

QBE Insurance (Singapore) Pte Ltd

A handwritten signature in black ink, appearing to read 'Renee Loh'.

Authorized Signature

Date of Issue: 08/04/2020



Accident Photo



Accident Photo



Accident Photo



Accident Photo

