

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	18/08/2020 10:15
Date Of Accident	17/08/2020 13:15
Exact Location Of Accident	UPPER BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLZ899U
Insured/Policyholder	
Name Of Registered Owner	DING YEN SHEE DANIEL
NRIC No	S7729532A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93363962
Alternative Phone No	Office-93363962
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180 SEDAN AVANTGARDE / EXCLUSIVE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800025728-02
Cover Note Number	
Driver	
Name of Driver	DING TUEN CHENG
NRIC No	S0184250A
Date Of Birth	02/01/1951
Occupation	INDOOR
Date Of Driving Pass	24/08/1974
Driving Experience	45 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98249362
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	9 HINDHEDE PLACE
Postcode	587859
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
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: : PASSENGER Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BUKIT TIMAH NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

/Please refer to Sketch Plan & Police Report: T/20200817/2086

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBQ9953C
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

MOTORCYCLE

DETAILS OF INJURED PERSON 1	
Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBQ9953C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

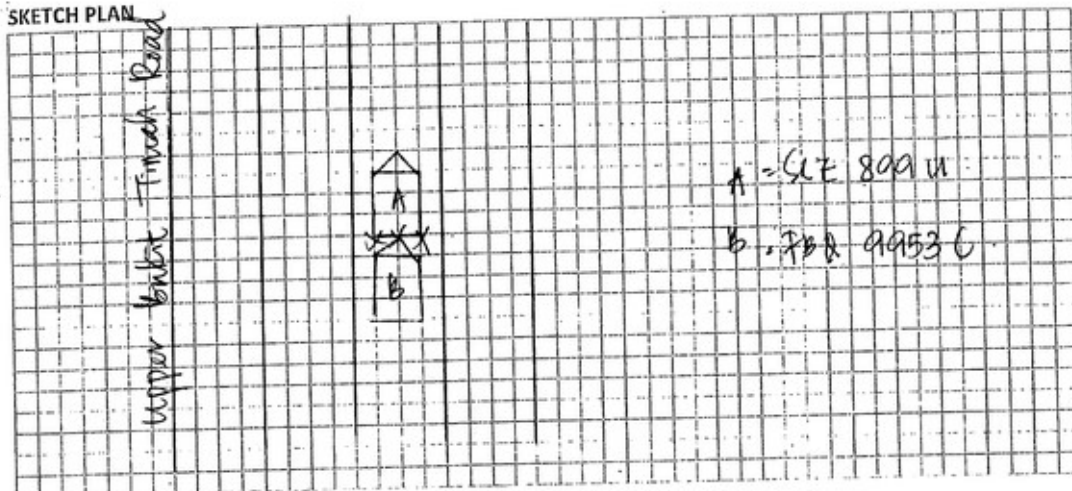
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Driver's Signature
(If driver is not the policyholder)
Date & Time: 18.08.2020 @
18 AUG 2020 09:35

Reporting Centre Personnel's Signature
Name: Tricia Leong
NRIC/FIN No.: 18 AUG 2020

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

DECLARATION

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

Policyholder's Signature
Date & Time:

GIARMAC SketchPlanForm V3

Driver's Signature
(If driver is not the policyholder)
Date & Time: 18.08.2020 @
18 AUG 2020 09:25

Reporting Centre Personnel's Signature
Name: Paccia Leong
NRIC/FIN No.: 18 AUG 2020

Identification Card

Owner :-

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7729532A



Name
DING YEN SHEE DANIEL

Race
CHINESE

Date of birth
11-10-1977

Sex
M

Country of birth
SINGAPORE

S7729532A

4132565



NRIC No. S7729532A



Date of issue
20-11-2007

11 ARDMORE PARK #12-03
SINGAPORE 250057

NRIC No. S7729532A Date: 28/07/2019

Driving License



Identification Card

DRIVER:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0184250A

Name
DING TUEN CHENG

陈重靖

Place
CHINESE

Date of Birth
02-01-1951

Sex
M

Country of Birth
SINGAPORE



0293853

NRIC No. S0184250A

Wood Group
A+

Date of issue
27-03-1992

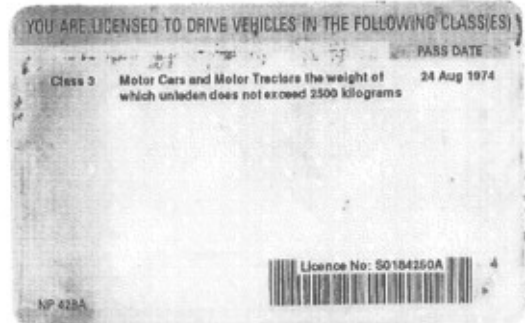
0 HINCHIDE PLACE
SINGAPORE 687859

NRIC No. S0184250A

Date: 02/11/2015



Driving License



Insurance Certificate



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : DING YEN SHEE DANIEL
Period of Insurance : 15 Mar 2020 To 14 Mar 2021
Engine No. : 27491031272797
Chassis No. : WDD2050402R371082

Vehicle No. : SLZ899U
Policy No. : 1800025728-02
Endorsement No. :
Issued Date : 12 Feb 2020

ABOUT THE COVER

Make/Model : MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE
Engine Capacity/Tonnage : 1,595.00 CC Sum Insured : Market Value First Year of Registration : 2018
Driver Restriction : NA Off Peak Car : No Insuring with COE/PAF : Yes
Person or Classes of Persons Entitled to Drive* :

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

DING YEN SHEE DANIEL - \$800 (Own Damage), \$800 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Carriage Eunice Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408550 62061818
2. Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other Approved Reporting Centres/AIG Authorized Repairers, please contact our 24-hour accident emergency hotline at +65 6335 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download 'AIG SG' from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504612252
CYCLE & CARRIAGE - TOMMY
239 ALEXANDRA ROAD
SINGAPORE 159930

AIG Asia Pacific Insurance Pte. Ltd.
This computer generated document does not require a signature.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200817/2086

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

1 of 3

Report No. T/20200817/2086

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/08/2020 16:42		Vide Report No.: E/20200817/0092		Station Diary No.: 28	
Informant's Particulars					
Name of Informant: DING TUEN CHENG			Address: 9 HINDHEDE PLACE SINGAPORE 587859		
ID Type / ID No.: NRIC NO / S0184250A			Contact No.: Home/Office: Mobile: 98249362		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 02/01/1951	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Retiree			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: 17/08/2020 13:15	Type of Location: Straight Road
Location: UPPER BUKIT TIMAH ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
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
FBQ9953C	Motorcycle				Slightly Damaged	0
SLZ899U	Car	MERCEDES BENZ	C180	Grey	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLZ899U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800025728-02	15/03/2020	14/03/2021

Police Report



**SINGAPORE
POLICE FORCE**



T/20200817/2086

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

2 of 3
Report No. T/20200817/2086

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	Unknown Rider	ID No.	NIL
Related Vehicle	FBQ9953C (Motorcycle)	Contact No.	NIL
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	Slight
Driver			
Name	DING TUEN CHENG	ID No.	S0184250A
Related Vehicle	SLZ899U (Car)	Contact No.	98249362
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 17 Aug 2020 at about 1315 hrs, I was driving my vehicle registration number SLZ899U along Upper Bukit Timah Road towards Bukit Batok Nature Reserve when I made a U-Turn in front of No.219 Shell Upper Bukit Timah going back towards Clementi. A few seconds after I made the U-Turn, there was a motorcyclist came from behind and collided into my rear of my car. The rider was still conscious. Police and ambulance attended to my incident and the rider was conveyed by the ambulance. Both my vehicle and the rider's motorcycle had slight damages. The Traffic Police then retrieved my In-Car Camera Memory Card and advised me to lodge a police report.



**SINGAPORE
POLICE FORCE**



T/20200817/2086

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

3 of 3

Report No. T/20200817/2086

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

NA

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:

D /

SI MOHAMAD ISMADI BIN MOK'IN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt MOHAMMED FEROZ BIN HUSSEIN

Contact No.: 65476206

Authentication Stamp:

NP168

SINGAPORE POLICE FORCE

SM 30

Signature

Signature Of Informant:

Date/Time:

17/08/2020 16:42

Classification Of Case:

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

