

112008



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**  
6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

## TAX INVOICE

Our Ref No: GR-20-017225  
Date of Request: 30/01/2020

Your Ref No: AM-INS-T140-112008-19-ATV

VISION LAW LLC  
133 New Bridge Road #18-01/02  
Chinatown Point  
Singapore 059413

Dear Sir/Madam,

Date of Accident: 04/02/2019  
Vehicle No: SMD9330M  
Place of Accident: WOODLANDS AVE 2 TWDS WOODLANDS AVE 9 DIRECTION  
Involving Vehicle No: SLN3553K

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLN3553K	WOODLANDS AVE 2 TWDS WOODLANDS AVE 9 DIRECTION	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☒ [X] GIRO ☐ [ ] Cash ☐ [ ] Cheque

## 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	08/02/2019 13:08
Date Of Accident	04/02/2019 13:10
Exact Location Of Accident	WOODLANDS AVE 1 & AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SI N3553K
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#### Insured/Policyholder

Name Of Registered Owner	SUM WAI LENG
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#### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	A200
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	1700061282
Cover Note Number	

#### Driver

Name of Driver	NG KHOON CHEAH (HUANG KUNJIE)
NRIC No	S7329042B
Address	BLK 626 YISHUN ST 61 #05-95

#### General Information of the Accident

Type Of Accident	COLLIDED INTO MOTORCYCLIST
Weather Conditions	CLEAR

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

#### Circumstances of Accident

REFER POLICE REPORT NO: T/20190204/2167. QUEENSTOWN NPC.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REFER CSE AQ
Was there any audio recorded?	NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FBK9911E

Vehicle Make/Model/Colour

Name of Driver

Insurance Company Name

**DETAILS OF INJURED PERSON 1**

Name

Injured person in which vehicle? FBK9911E

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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

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

## Accident Sketch Plan

### SKETCH PLAN

Sketch plan diagram showing vehicle positions and directions on a grid. Vehicle A is a car, and Vehicle B is a smaller vehicle. Arrows indicate the direction of travel. A station is marked with an arrow pointing to the left.

(A) SLN3553K

(B) FBK9911E

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref police report for detail.


### 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

 08/02/19  
Reporting Centre Personnel's  
Name: Alan Quah  
NRIC/FIN No.:

# Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20190204/2167

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

1 of 3

Report No. T/20190204/2167

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/02/2019 22:10		Vide Report No.: L/20190204/0118		Station Diary No.: 61	
<b>Informant's Particulars</b>					
Name of Informant: NG KHOON CHEAH			Address: APT BLK 626 YISHUN ST 61 #05-95 SINGAPORE 760626		
ID Type / ID No.: NRIC NO / S7329042B			Contact No.: Home/Office: Mobile: 91878769		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 15/08/1973	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/02/2019 13:10	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 WOODLANDS AVENUE 2 WOODLANDS AVENUE 1 Junction of Woodlands Ave 2 and Woodlands Ave 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
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
FBK0911E	Motorcycle					0
SLN3553K	Car	MERCEDES BENZ	A200		Seriously Damaged	1
SMD9330M	Car					0

## Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

# Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20190204/2167

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
TelNo: 1800-4719999

2 of 3

Report No. T/20190204/2167

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	NG KHOON CHEAH		ID No. S7329042B
Related Vehicle	SLN3553K (Car)		Contact No. 91878769
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Passenger</b>			
Name	SUM WAI LENG		ID No. S7417730A
Related Vehicle	SLN3553K (Car)		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	NIL

### Brief Details.

On 04/02/2018 at about 1310hrs, I was travelling in Vehicle SLN3553K along Woodlands Ave 2, wanting to make a turn to Woodlands Ave 1. There was oncoming traffic on the other direction, thus I had to stop before the yellow box. Suddenly, I felt an impact from the rear. I made a check and realized that vehicle FBK9911E had collided into the left rear of my vehicle. The rider was conveyed to the hospital by an ambulance. I would like to add that after my vehicle came to a stop, I checked my rear view mirror and noticed vehicle FBK9911E coming from a distance. I also noticed that as he came nearer, his speed did not slow.

When vehicle FBK9911E collided into my vehicle, the storage box of the motorcycle flew and hit onto the top of vehicle SMD9930M.

9350M

*[Handwritten signature]*

Accident Sketch Plan



SINGAPORE  
POLICE FORCE



T/20190204/2167

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

3 of 3

Report No. T/20190204/2167

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:

D /

Sgt 3 HO YUAN REN, JUSTIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD SHAHRIL BIN ABDULLAH

Contact No.: 65476083

SN 49

Authentication Stamp

NP188

Signature Of Informant:

Date/Time:

04/02/2019 22:10

Classification Of Case:

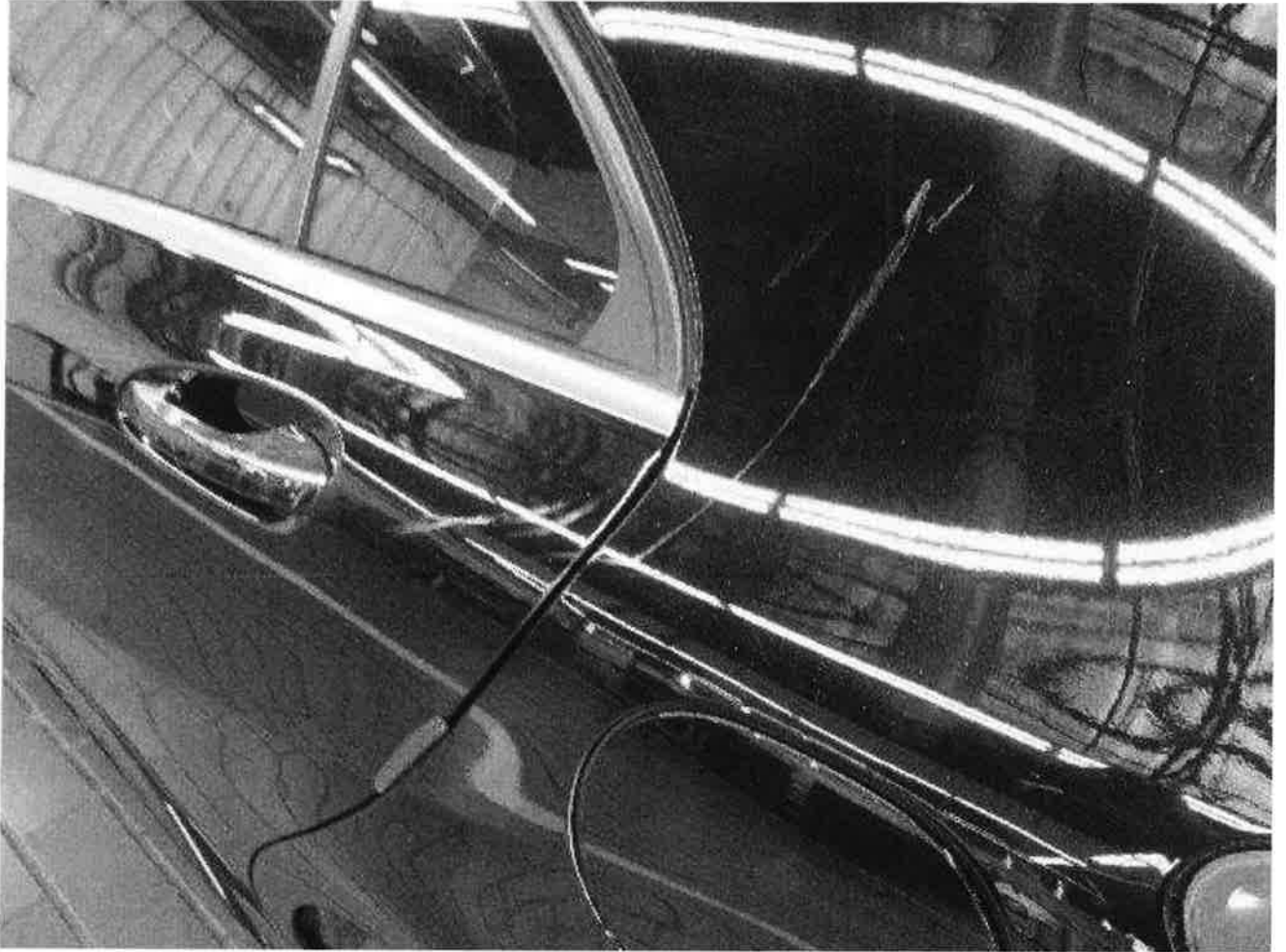




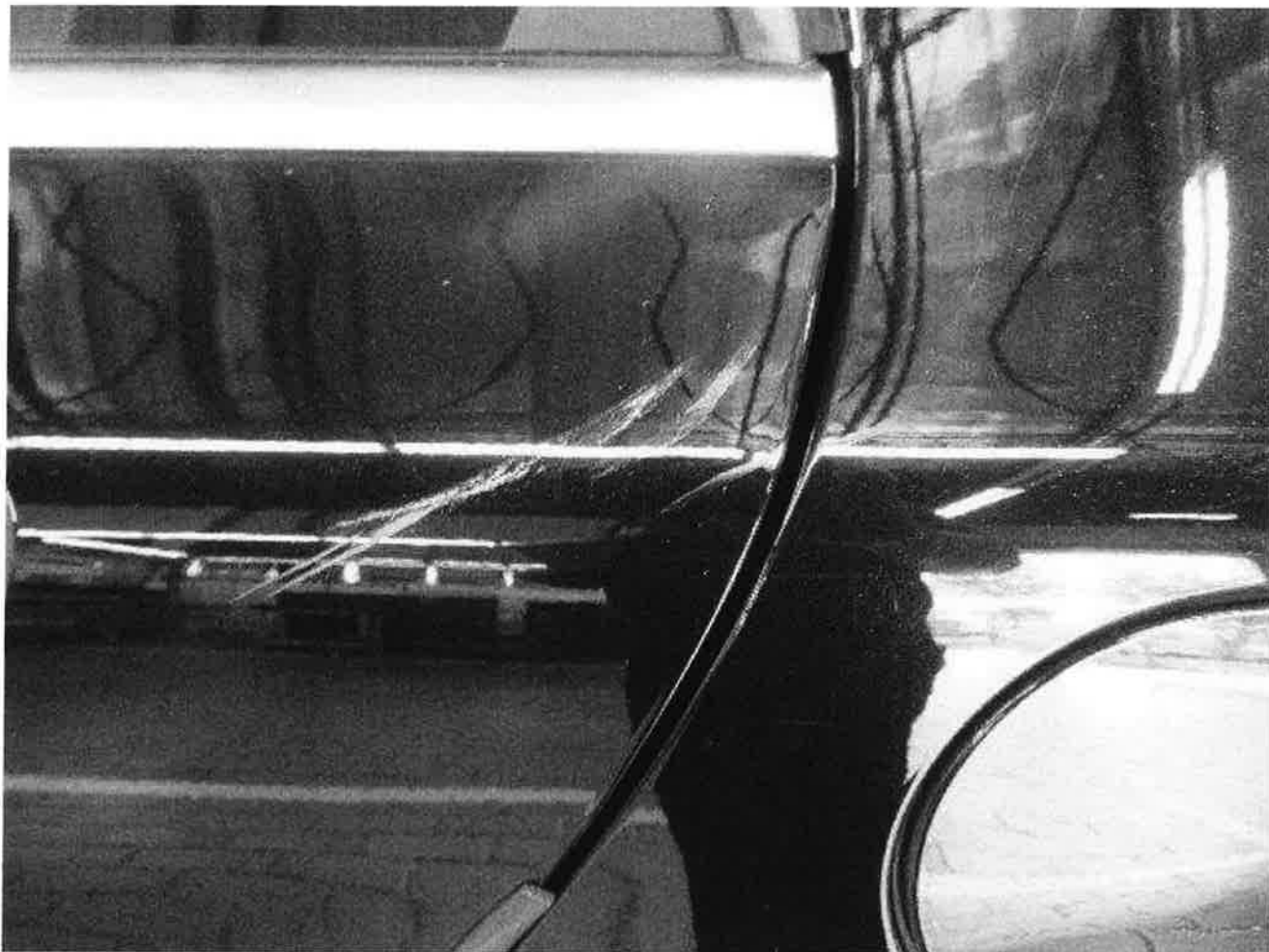
Accident Photo



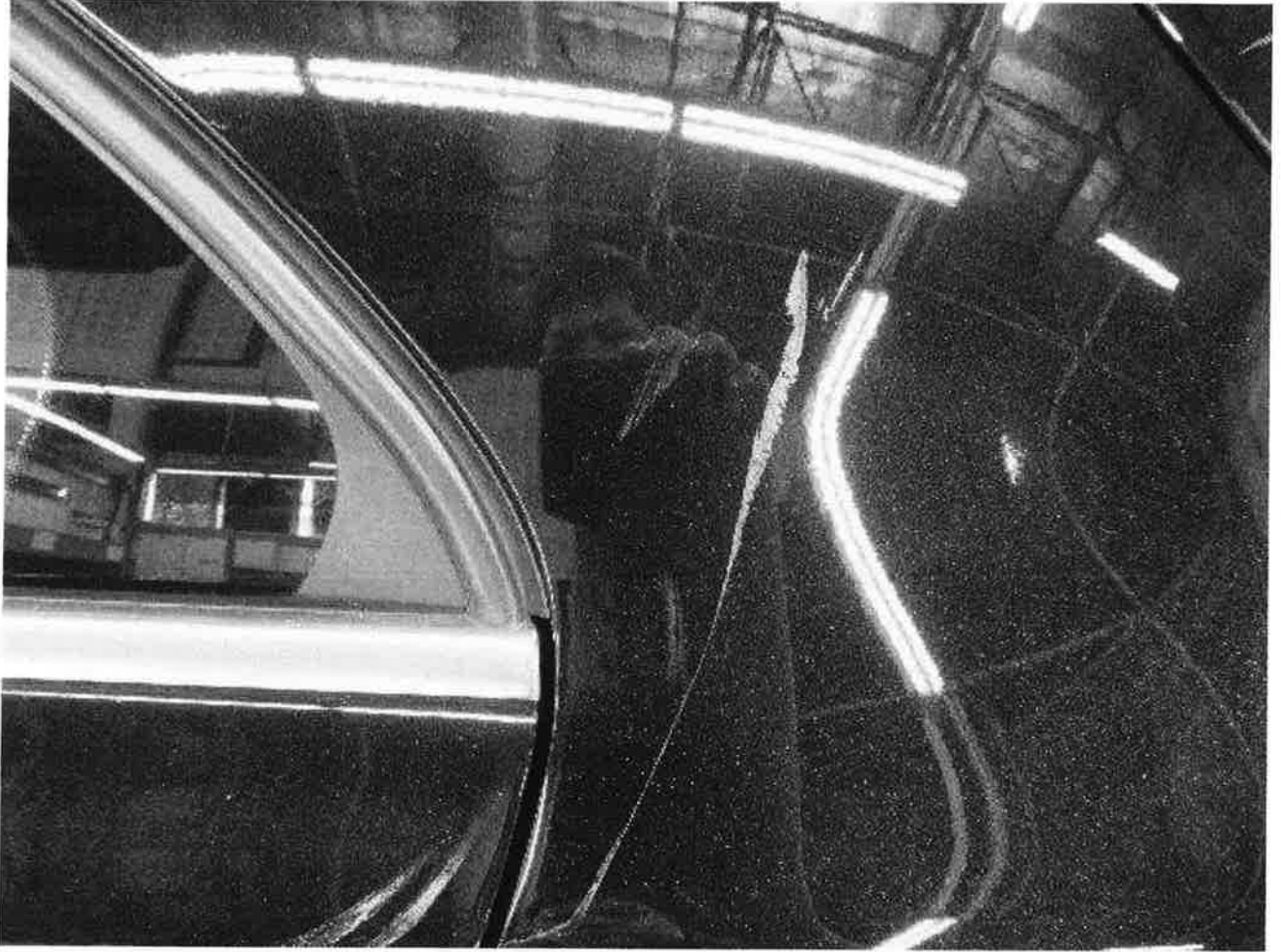
**Accident Photo**



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





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Accident Photo

