

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	03/11/2020 18:11
Date Of Accident	02/11/2020 19:00
Exact Location Of Accident	UPPER SERANGOON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFP8889U
Insured/Policyholder	
Name Of Registered Owner	NG SOON CHAI
NRIC No	SXXXX947F
Email Address	KENNETHNGSC@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91788889
Alternative Phone No	OTHERS-91788889

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119238591
Cover Note Number	

Driver

Name of Driver	NG SOON CHAI
NRIC No	SXXXX947F
Date Of Birth	21/05/1961
Occupation	OUTDOOR
Date Of Driving Pass	10/12/1979
Driving Experience	40 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91788889
Fax Number	
Contact Number	
Email Address	KENNETHNGSC@GMAIL.COM

Address	BLK 27 ROSEWOOD DRIVE #16-21
Postcode	737920
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	COLLIDED INTO BICYCLIST
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	1
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)	2
Passenger 1	NAME: : PASSENGER GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JOO CHIAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 267 ONAN ROAD , POSTCODE: 424773 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3459999 - FAX NO: 64474181
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20201103/2048

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	MAIL TO OD SUPPORT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	
Details Of Properties	CYCLIST
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident 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: 03 NOV 20

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

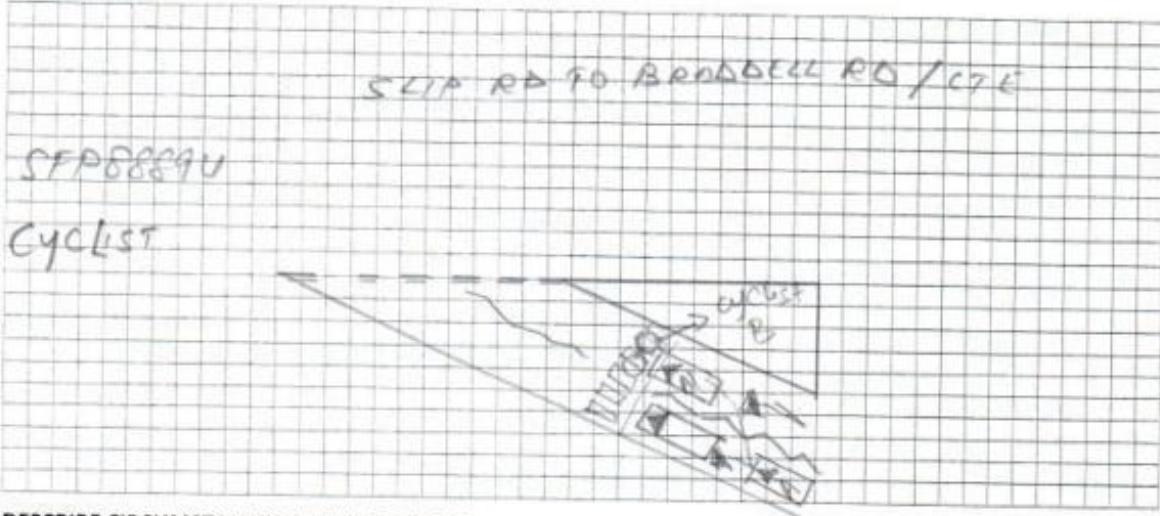
Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

A- SFP8889U
B- CYCLIST



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20201103/2048

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.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20201103/2048

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

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Report No. T/20201103/2048

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFP8889U	NTUC Income Insurance Co-Operative Limited	5119238591	05/10/2020	04/10/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NG SOON CHAI	ID No.	S1501947F
Related Vehicle	NIL	Contact No.	91788889
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 02/11/2020 at 1900hrs, I was driving my car (SFP8889U) along Upper Serangoon Road towards Braddell Road. Eventually I came to a stop before the Zebra Crossing at the slip road (of Upper Serangoon Road and Braddell Road) on the 2nd lane.

My car was stopped inside the Single Zigzag White line. Because there was no car on the 1st lane, I changed to the 1st lane. Before I change, I did check for my blind-spot and showed my intention through signaling.

From the 1st lane, I was driving towards Braddell Road or Zebra Crossing. As I was approaching the Zebra Crossing, there was a van on my left side. Suddenly a cyclist appeared from the left side of the Zebra Crossing. The cyclist caused me to stop abruptly and I have accidentally knocked onto the cyclist or the right pedal of the bicycle to which he fell down.

Before I collided onto the cyclist, there was a blind spot on my left side due to a Van. The cyclist dash across the Zebra Crossing. To my knowledge, the cyclist was supposed to dismount and push his bicycle but he did not do so. Due to the blind spot and the cyclist was travelling at a fast speed, I could not react on time.

The cyclist got up and informed that he was alright but he appeared aggressive. The cyclist exchanged particulars with my passenger (HP: 8808 5187). Eventually my passenger gave me his contact number to contact him. I was busy managing the traffic at that point of time.

Due to the collision, my front number plate was dented and have cracks/scratches. There was no ambulance or police at scene.

I have two in-car cameras (front/back) and I have the recordings of this traffic accident.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T20201103/2048

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

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Report No: T20201103/2048

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/11/2020 13:39		Vide Report No.:		Station Diary No.: 8	
Informant's Particulars					
Name of Informant: NG SOON CHAI			Address: APT BLK 27 ROSEWOOD DRIVE #16-21 SINGAPORE 737920		
ID Type / ID No.: NRIC NO / S1501947F			Contact No.: Home/Office: Mobile: 91788889		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 59	Date of Birth: 21/05/1961	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Grab Driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident: Non-Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 02/11/2020 19:00	Type of Location: Slip Road
Location: UPPER SERANGOON ROAD			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Pedestrian Crossing	Traffic Volume: Heavy	
Type of Collision: Moving Vehicle Against - Cyclist			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFP8889U	Car	HONDA	VEZEL 1.5X HYBRID CVT ABS D/AIRBAG 2WD	Black	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Police Report



**SINGAPORE
POLICE FORCE**



T/20201103/2048

Police Station Of Origin:
Joo Chiat NPP
267 Chan Road SINGAPORE 424773
Tel No: 1800-3458999

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Report No. T/20201103/2048

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SFP8889U	NTUC Income Insurance Co-Operative Limited	5119238591	05/10/2020	04/10/2021

Details of Person Involved			
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No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name:	NG SOON CHAI	ID No.	S1501947F
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Police Report



**SINGAPORE
POLICE FORCE**



T/20201103/2048

Police Station Of Origin:
Joo Chiat NPP
267 Oran Road SINGAPORE 424773
Tel No: 1800-3459999

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Report No. T/20201103/2048

CONTINUATION OF REPORT

I am lodging this report for record purpose.

2020
11
03

Police Report



**SINGAPORE
POLICE FORCE**



T/20201103/2048

Police Station Of Origin:
Joe Chiat NPP
287 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

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Report No. T/20201103/2048

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 TAN YIK PING

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/11/2020 13:39

Officer In Charge Of Case:

TP / AEIT /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

ASIR 9910 100

Authentication Stamp

NP-150