

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	09/11/2020 19:59
Date Of Accident	07/11/2020 14:55
Exact Location Of Accident	ROXY SQUARE CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV9559B
Insured/Policyholder	
Name Of Registered Owner	PHEY CHOON TECK
NRIC No	SXXXX400E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97353333
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLC300-2.0 4MATIC COUPE (R19 LED) (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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119097778
Cover Note Number	DRIVO PREMIUM

Driver

Name of Driver	PHEY ZHENG LIANG
NRIC No	SXXXX486H
Date Of Birth	14/03/1999
Occupation	INDOOR
Date Of Driving Pass	08/11/2017
Driving Experience	2 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88589559
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	1 KERIS DRIVE
Postcode	456964
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED. POLICE REPORT NO. T/20201110/7008

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP1130A
Vehicle Make/Model/Colour	
Details Of Properties	
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) 1

DETAILS OF INJURED PERSON 1

Name	PHEY ZHENG LIANG
Approximate Age	21
Injuries Sustain	BODY ACHES
Injured person in which vehicle?	SMV9559B
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	1 KERIS DRIVE
Postcode	456964

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

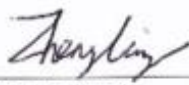
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application 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:

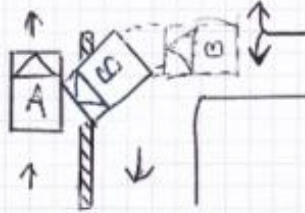
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

Roxy Square
Carpark

A → SMV 9559 B

B → SLP 1130 A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated time & date, I was travelling straight on my vehicle, A, bearing (SMV 9559 B) in Roxy Square Carpark. Suddenly, a vehicle, B, bearing (SLP 1130 A), did a ^{left} wide turning and collided onto the right portion of my vehicle, causing damages to both my doors. We exchanged particulars and decided to proceed with Insurance Claims.

DECLARATION

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

Wink

Policyholder's Signature
Date & Time:

Therese

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

Reporting Centre Personnel's Signature
Name:
NRI/ EIN No.:

Identification Card

GEMALTOSGPU1054519B0418

00000050340821

NRIC No / Colour

S9907486H/ PINK

Race

CHINESE

Date Of Birth

14/03/1999

Service Status

NSF

Address

1 KERIS DRIVE

SINGAPORE 456964

Blood Group

O (+)

Country Of Birth

SINGAPORE

Military Rank Status

ENLISTEE

Sex

M



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

EFFECTIVE DATE

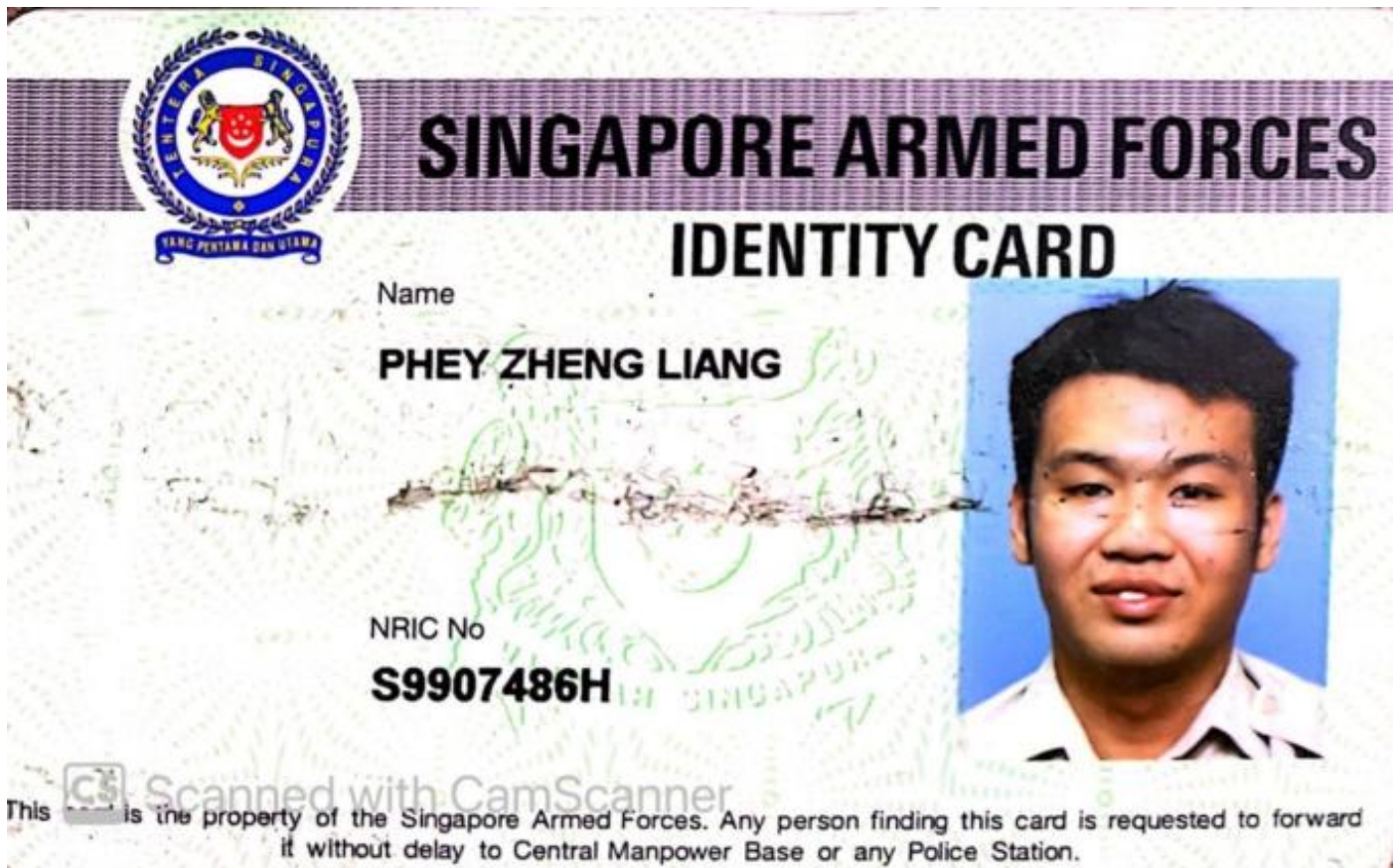
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	08 Nov 2017
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Licence No: S9907486H

NP 428A

Scanned with CamScanner



The image shows a Singapore Armed Forces Identity Card. At the top left is the Singapore Armed Forces crest, which features a lion and a red shield with a white crescent and star, surrounded by a blue wreath and the text 'TENTERA SINGAPURA' and 'SANG PERTAMA DAN UTAMA'. To the right of the crest, the text 'SINGAPORE ARMED FORCES' and 'IDENTITY CARD' is printed in large, bold, black letters. Below this, the name 'PHEY ZHENG LIANG' is printed in bold black letters. To the right of the name is a color photograph of a young man with short black hair, wearing a white shirt, against a blue background. Below the name, the NRIC No 'S9907486H' is printed in bold black letters. A large, faint green watermark of the Singapore map is visible in the background. At the bottom left, there is a small icon of a camera and the text 'Scanned with CamScanner'. Below this, a disclaimer in small black text reads: 'This is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.'

SINGAPORE ARMED FORCES
IDENTITY CARD

Name
PHEY ZHENG LIANG

NRIC No
S9907486H

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This is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S 9907486H**
Name: **PHEY ZHENG LIANG**

Birth Date: **14 Mar 1999**
Issue Date: **08 Nov 2017**



 002741771E

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CERTIFICATE OF INSURANCE



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: S119097778

Cover : drive PREMIUM

1. Index mark and Registration Number of Vehicle : SMV9559B
Chassis Number : WDC2539847F739076
2. Name of Policyholder : PHEY CHOON TECK
3. Effective Date of Insurance : 17 Sep 2020
4. Expiry Date of Insurance : 16 Sep 2021
5. Persons 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.
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 driving the Motor Vehicle.

6. Limitations as to Use#

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

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

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: PHEY CHOON TECK
NAMED DRIVER (1)	: PHEY ZHENG YANG
NAMED DRIVER (2)	: PHEY ZHENG LIANG
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)


Agency : ASSURE PTE. LTD. (00000572842)

Date of Issue : 16 Sep 2020 11:32 hrs


For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1425400E



Name
PHEY CHOON TECK




Place
CHINESE

Date of Birth
25-08-1960

Sex
M

Country of Birth
SINGAPORE

彭春德



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Identification Card

0 0 1 6 8 4 7



NRIC No. **S1425400E**



Blood Group Date of Issue
O+ **17-06-1991**

**1 KERIS DRIVE
SINGAPORE 456964**

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NRIC No: **S1425400E** Date: **15/04/2011** No: **6729253**

Police Report



**SINGAPORE
POLICE FORCE**



T/20201110/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20201110/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/11/2020 12:33		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: PHEY ZHENG LIANG			Address: 1 KERIS DRIVE SINGAPORE 456964		
ID Type / ID No.: NRIC NO / S9907486H			Contact No.: Home/Office: Mobile: 88589559		
Nationality: SINGAPORE CITIZEN			Email: pheyzhengliang@gmail.com		
Sex: Male	Age: 21	Date of Birth: 14/03/1999	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Army			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/11/2020 14:55	Type of Location: Car Park
Location: EAST COAST ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 20 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLP1130A	Car					0
SMV9559B	Car					0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20201110/7008

3 of 3

Report No. T/20201110/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
10/11/2020 12:33

Classification Of Case:

Police Report



**SINGAPORE
POLICE FORCE**



T/20201110/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20201110/7008

CONTINUATION OF REPORT

Driver			
Name	PHEY ZHENG LIANG	ID No.	S9907486H
Related Vehicle	SMV9559B (Car)	Contact No.	88589559
Hospital/Clinic	PARKWAY EAST HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	07/11/2020	Date	07/11/2020
No. of Days granted Medical Leave	03	Degree of	Serious

Brief Details.

On stated date and time, i was travelling straight in my vehicle bearing (SMV9559B) at roxy square carpark. Suddenly a vehicle bearing (SLP1130A) did a left wide turn and collided onto the right portion of my vehicle causing damages to both my doors. We then exchange particulars and decide to proceed with insurance claims. Later in the evening i felt aches and went to see a doctor. I receive 3 days mc

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MABW20099154 Vehicle Registration No: SMV9559B
Name(as shown in NRIC) : PHEY ZHENG LIANG NRIC/FIN/Passport No : S99074864
(*Vehicle Driver /Vehicle Owner) (*) Please delete as appropriate
Address : 1 KERIS DRIVE Singapore(456964)
Contact (Tel) : _____ Mobile No. : 8858 9559
Email Address : _____
Date of Accident : 07/11/2020 Time of Accident : 14:55
Place of Accident : ROYAL SQUARE CAR PARK
Insurance Company: HTUC INCOME

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Here enclosed policy holder identification card and police report.
Police Report No. - T/20201110/7008. Policy holder's name
should be Phey Choon Teck.

Phey Liang

Policyholder / Driver's Signature
Date:

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