

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	24/11/2020 16:15
Date Of Accident	21/11/2020 22:30
Exact Location Of Accident	BLK 119A KIM TIAN ROAD MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GT8771S
Insured/Policyholder	
Name Of Registered Owner	SUN YEE CHEONG LAUNDRY
Co Reg No	0XXXX700W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91460703
Alternative Phone No	OFFICE-91460703

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	L300
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	REPORTING ONLY

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5010556818-13
Cover Note Number	

Driver

Name of Driver	KWOK KIN YEW
NRIC No	SXXXX135C
Date Of Birth	21/01/1950
Occupation	OUTDOOR
Date Of Driving Pass	18/10/1967
Driving Experience	53 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91460703
Fax Number	
Contact Number	OTHERS 91460703

Address	BLK 93 HENDERSON ROAD #07-228
Postcode	150093
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	NO COLLISION
Weather Conditions	UNKNOWN
Road Surface	UNKNOWN

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	TIONG BAHRU NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 128 KIM TIAN ROAD #01-123/ 125 , POSTCODE: 160128 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2739999 - FAX NO: 62785651
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201124/2043

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	SMP7725H
Vehicle Make/Model/Colour	AUDI A4
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

- Nature Of Damage

- No. Of Passenger (Including Driver)

SKETCH PLAN

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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.

SUN YEE CHEONG
LAUNDRY & DRY CLEANING SERVICES
Blk 110, Bl. Fumai Rd #11-160
Singapore 090110
Pager: 95055264

Policyholder's Signature
Date & Time:

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

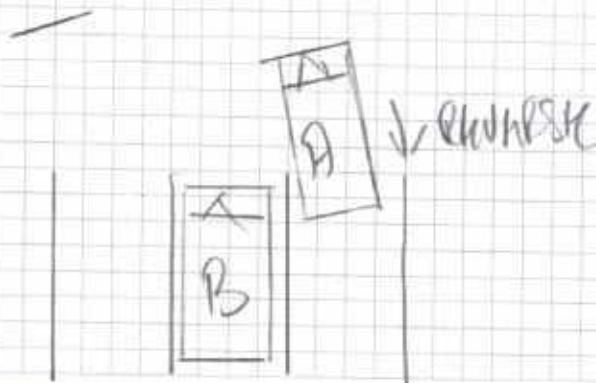
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

BLK 119A KIM TIAU ROAD MSCP

A) GT 8715

B) SMP 77255



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report 7/20201124/2043

DECLARATION

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

SUN YEE CHEONG
LAUNDRY & DRY CLEANING SERVICES
Blk 110, Bl Pumei Rd #11-160
Singapore 090110
Page: 95055264

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 STATEMENT

ACCIDENT DATE: 21/11/2024 (DD/MM/YYYY), TIME: 22:30 (HH:MM)

LOCATION: ALONG Kim Tian Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G7 8771-S
 b) INSURANCE COMPANY: N74C
 c) POLICY NUMBER: 501055681813
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: MITSUBISHI L300P/VAN
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER SUN YOO CHOONG LAUNDRY

- a) NAME: KWOK KIN YEW (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 50236352 CONTACT: 91460703
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: KWOK KIN YEW (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 50236352 CONTACT: 91460703
 c) ADDRESS: B11C 93 407-228 HENDERSON RD.

* d) DATE OF BIRTH: 21/01/50 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 18/10/1967

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)
 IF YES, PLEASE STATE WHICH POLICE STATION: 100th Precinct

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMP 77255 MODEL: AUDI A4
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passengers
 (Including driver)
 ()

* No of passengers
 (Including driver)
 ()

* No of passengers
 (Including driver)
 ()

email =

VIDEO



**SINGAPORE
POLICE FORCE**



T/20201124/2043

Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

1 of 3

Report No: T/20201124/2043

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/11/2020 15:20		Vide Report No.:		Station Diary No.: 28	
Informant's Particulars					
Name of Informant: KWOK KIN YEW			Address: APT BLK 93 HENDERSON ROAD #07-228 SINGAPORE 150093		
ID Type / ID No.: NRIC NO / S0236135C			Contact No.: Home/Office: 91460703 Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 70	Date of Birth: 21/01/1950	Type of Informant: Driver		
Race: Chinese			Language:		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:	Non-Injury	Drink Drive: No	Date/Time of Accident: 21/11/2020 22:30	Type of Location: Car Park
Location: KIM TIAN ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GT8771S	Van	MITSUBISHI	L300 P/VAN	Beige		0
SMP7725H	Car	AUDI	A4 SEDAN 2.0 TFSI S TRONIC (NAV)	Grey		0



SINGAPORE POLICE FORCE



T/20201124/2043

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Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

Report No. T/20201124/2043

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KWOK KIN YEW	ID No.	S0236135C
Related Vehicle	GT8771S (Van)	Contact No.	91460703
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

Brief Details.

On the 21/11/2020 at about 2200hrs to 2300hrs, I parked my van GT8771S as usual at the Blk 119A multi-storey carpark. I do not remember which lot I parked my van but I remember it was at the level 1 deck of the carpark. I reversed into my lot and park my car. I did not notice anything unusual when I was reversing and parking my van. Then I left the place to go back home. This morning at about 1100hrs when I went to the carpark to get my van I was approached by one Chinese who claimed that my van had scratched his car SMP7725H. He informed he had already lodged a Traffic Accident Report regarding the matter. Therefore I am lodging this report for Traffic Police to investigate the matter as I do not know what happened and the owner of the said car refused to show me the in-car camera footage that he has which he claimed to be proof of the accident. That is all.



**SINGAPORE
POLICE FORCE**



T/20201124/2043

3 of 3

Report No. T/20201124/2043

Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

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:
A /
Staff Sgt CHIA CHEE PIN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
24/11/2020 15:20

Classification Of Case:

Claim Handling

Accident MT/1111289

Policy No.	5010556818-13	Vehicle No.	GT87715	GST Registration No.
Certificate No.				
Policyholder Name	SUN YEE CHEONG LAUNDRY			Policyholder NRIC
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Third Party	Loading
Contact No.(Mobile)	91460703	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KPK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	20	Private Hire
Accident Details				
Report Date	24/11/2020 16:27	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	21/11/2020	Time of Accident hh:mm	22:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	BLK 119A KIM TIAN ROAD MSCF			
Excess				
Own damage Excess	0.00	Additional Excess		Windscreen Excess
Unnamed Driver Excess		Outside Singapore DD Excess		
Third Party Excess	0.00	Outside Singapore TP Excess		
Benefits				
GST Registered Information				
GST Registered	No	GST Registration Date		
GST Registration No.		GST Status Verified	Yes	
Modification History				
Policyholder Mailing Address				
Address 1	NIL	Address 2		Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5010556818-13	
O1 Driver Info				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	KWOK KIN YEW	Driver NRIC	S0236135C	Driver DOB
Register Date of Driver License	18/10/1967	Driver Age	70	Driving Experience
Contact No.(Mobile)	91460703	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 93 #07-228	Address 2	HENDERSON ROAD	Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.	07-228			
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.	GT87715	Driver Insurer Comp.
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes <input type="radio"/> No <input type="radio"/>	

Modification History

Claim 001

New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop Insured Liability Not at fault

Contact No. Finalisation Preferred Repair Option Preferred Workshop, Name unknown

Date Registered

Report Taken By

☐ Print AK letterDD-MX Insured Name SUN YEEContact No. (Home) O1 Vehicle Number GT87715

GT87715 / SMP77255 ON 21 Nov 2020

GIA report Received 24/11/2020 16:31 Claim Close Date ROSLI WAHAB

Save Submit

Attachment

Accident No. MT/1111289 Claim No. 001
 Last Doc. Received ☒ Yes ☐ No Upload Date 24/11/2020 16:32

Path *

Choose File No file chosen
 Choose File No file chosen
 Choose File No file chosen
 Choose File No file chosen
 Choose File No file chosen
 Choose File No file chosen

Category * Confidential
 Clear Please Select NO
 Clear Please Select NO
 Clear Please Select NO
 Clear Please Select NO
 Clear Please Select NO
 Clear Please Select NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	Photos	Normal	Photos 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	NRIC/ Driving License	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 24 Nov 2020 16:32	SAS	Normal	SAS 20f

Video List

Uploaded By/Date

Folder Date

File Name

Display in New Window

Scan and uploading

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)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5010556818-13

Cover : Third Party

- | | |
|---|--------------------------|
| 1. Index mark and Registration Number of Vehicle | : GT8771S |
| Chassis Number | : JMAJNP15VYA000860 |
| 2. Name of Policyholder | : SUN YEE CHEONG LAUNDRY |
| 3. Effective Date of Insurance | : 01 Apr 2019 |
| 4. Expiry Date of Insurance | : 29 Nov 2020 |
| 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. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |
- This Policy does not cover
- (a) Use for hire or reward.
 - (b) Use for racing, pace-making, reliability trial or speed-testing.
 - (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : INCOME - MAIN SERVICING (00000600057)
Date of issue : 28 Feb 2019 14:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive