SK0M20C10003 / KANG CAR REPAIRERS PTE LTD ENTRY DATE & TIME: 01/12/2020 09:50 (SGT) SUBMITTED BY: ALICE TNG VERSION: 1 (01/12/2020 09:50 (SGT))

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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 witholding 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 Submission Date of Accident

**Exact Location of Accident** 

Additional Location Information

Country/State of Loss

01/12/2020 09:50 (SGT) 27/11/2020 16:41 (SGT)

Bedok, Singapore

Bedok North Road - Cross Junction

Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SMP3467D

## INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

Ang Woo Boon

SXXXX069E

hongyw@yahoo.com

(Phone) +65-94570976

+65-94570976

#### VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Vehicle Category

your vehicle?

Are you claiming under your own insurance policy for repair to

Private use

Toyota

Estima

No - Claiming third party

Private car

## INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy Policy Number

Cover Note Number

NTUC

Comprehensive

No

5119063674

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Ang Thiam Hock SXXXX296E 22/02/1951 Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number

**Email Address** Address

Address complement

Postcode Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear Clear

Dry

No

10/08/1978

460126

Parent

No

No

42 YEARS AND 3 MONTHS

Blk 126 Bedok North Street 2 #08-74

(Phone) +65-93836831

hongyw@yahoo.com

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 2 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 5

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

PASSENGER 1

Name Goh Ai Beng Gender Female

PASSENGER 2

Name Ang Swee Zi Gender Female

PASSENGER 3

Name Ang Swee Ying Gender Female

PASSENGER 4

Name Ang Swee Jun Gender Male

**DETAILS OF POLICE ACTION** 

Was the accident reported to the police? Yes Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address

01/01/00040000

Was notice of intended Prosecution given?

If yes, against whom?

Bedok Division Headquarters (Phone) +65-18002440000

(Fax) +65-64443009

30 Bedok North Road Singapore 469676

No

CIRCUMSTANCES OF ACCIDENT

See attached police report no: G/20201128/7033. My car was stationary due to red traffic light. (Bedok North Road). A car coming from behind cannot stop in time and collided onto my car rear portion causing damage and no person injured.

(D)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Was there any audio recorded?

Yes Yes No

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Category Private car

Name of Driver Contact Number -

Address

Address complement -

Postcode -

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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:

2.54pm

Driver's Signature (If driver is not the policyholder)

28th Nov 2020

Reporting Centre Personnel's Signature Name:

NRIC/FIN No

SKETCH PLAN

ZA B

A SMP 3467D B SKZ 7662B

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car was stationary due to red traffic !	ight.
My car was stationary due to red traffic ! (Bedok North Road) - A car coming to from	behind
cannot stop in time and collided onto my	car
cannot stop in time and collided onto my rear portion causing damage and no person	injured.
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# DECLARATION

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

Policyholder's Signature Date & Time:-

2.24 bw 7050

Driver's Signature

(If driver is not the policyholder)

Date & Time:

ococron 485 maps.c Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:





1 of 2

# POLICE REPORT (NP299)

Police Station Of Origin Bedok Division HQ 30 Bedok North Road SINGAPORE 469676 Tel No:1800-2440000 Report No. G/20201128/7033

Date/Time Report Made 28/11/2020 16:14	Vide Report No.		Station Diary No.	
Name Of Informant ANG WOO BOON	Address 126 BEDOK NORTH STREET 2 #08-74 SINGAPORE 460126			
ID Type / ID No. NRIC NO / S7640069E	Contact No. Home/Office: Mobile: 94570976		o ph	
Nationality SINGAPORE CITIZEN	Email Address hongyw@yahoo.com			
Occupation  Management executive	Sex Male	Age 43	Date of Birth 02/12/1976	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 26/11/2020 16:40 - 26/11/2020 16:45	Location Of Incident BEDOK NORTH ROAD			
Brief details.				

My car was stationary due to red traffic light (Bedok North Road). A car coming from behind cannot stop in time and collide onto my car rear portion causing damage and no person injuried.

The driver did not provide his particulars. We have videos from our car rear camera.

Signature Of Informant:
The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 28/11/2020 16:14
Classification Of Case:





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20201128/7033

ID Type	NRIC NO	ID No	S0656296E
Gender	Male	Age	69
Race	Chinese	Language	Chinese
Occupation	Retiree	Address	126 Bedok north stb2 #8-74 SINGAPORE 460126
Mobile No	93836831	Relation To	Father

Signature Of Officer Recording The Report:

Not applicable

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

Date/Time:
28/11/2020 16:14

Officer In-Charge Of Case:

Classification Of Case:

Authentication Stamp