



## 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 Submission ..... 26/12/2020 16:09 (SGT)  
Date of Accident ..... 25/12/2020 14:40 (SGT)  
Exact Location of Accident ..... Boon Lay Way, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLD7629C

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... ONG CHEN ZHOU  
NRIC No ..... SXXXX420C  
Email Address ..... ASHLEY9567@YAHOO.COM  
Mobile Phone No ..... (Phone) +65-96846485  
Alternative Phone No ..... +65-96846485

#### VEHICLE PARTICULARS

Manufacturer ..... Nissan  
Model ..... Sylphy  
Variant ..... -  
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 - Claiming third party  
Vehicle Category ..... Private car

#### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMPCSNW00052972001  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... TAN JIA YI SERENA  
NRIC No ..... SXXXX954D  
Date Of Birth ..... 29/08/1989  
Occupation ..... Indoor

|  |                             |
|--|-----------------------------|
| Date Of Driving Pass .....   | 28/11/2016                  |
| Driving experience .....   | 4 YEARS AND 1 MONTH         |
| Gender .....   | Female                      |
| Mobile Number .....  | (Phone) +65-91880646        |
| Alt. Phone Number .....  | -                           |
| Email Address .....  | ASHLEY9567@YAHOO.COM        |
| Address .....  | 29 JURONG WEST ST 41 #09-10 |
| Address complement .....   | -                           |
| Postcode .....   | 649411                      |
| Is the driver the policyholder? .....                              | No                          |
| If No, Relationship of the Driver with the Insured .....           | Spouse                      |
| Does Driver Own Other Vehicles? .....                              | No                          |
| 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 .....   | Collision - Cross Junction |
| Weather Conditions ..... | Clear                      |
| Road Surface .....       | Dry                        |

#### 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? .....  | Yes |
| Was any injured conveyed to hospital by ambulance? .....  | No  |
| Was any other material or property damaged? .....   | Yes |
| Number of Passengers (Including Driver) .....   | 2   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? ..... | No  |

#### PASSENGER 1

|              |               |
|--------------|---------------|
| Name .....   | ONG CHEN ZHOU |
| Gender ..... | Male          |

#### DETAILS OF POLICE ACTION

|   |                                  |
|---|----------------------------------|
| Was the accident reported to the police? .....  | Yes                              |
| Police Station Name .....                       | Traffic Police                   |
| Police Station Phone No .....                   | (Phone) +65-65470000             |
| Alt. Police Station Phone No .....              | (Fax) +65-65474900               |
| Police Station Address .....                    | 10 Ubi Avenue 3 Singapore 408865 |
| Was notice of intended Prosecution given? ..... | No                               |
| If yes, against whom? .....                     | -                                |

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201226/7014

#### 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 ..... | SHC7866L |
| Vehicle Manufacturer .....        | -        |
| Vehicle Model .....               | -        |
| Vehicle Variant .....             | -        |

|   |      |
|---|------|
| Vehicle Colour .....                          | -    |
| Vehicle Category .....                        | Taxi |
| 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) .....     | -    |

#### INJURED PERSONS DETAILS

##### INJURED 1

|   |               |
|---|---------------|
| Name of injured person .....                              | ONG CHEN ZHOU |
| Address .....   | -             |
| Address Complement .....                                  | -             |
| Post Code .....   | -             |
| Approximate Age Years Old .....                           | -             |
| Injuries Sustained .....                                  | BODY          |
| Injured person in which vehicle? .....                    | SLD7629C      |
| Were seat belts worn? .....                               | Yes           |
| Was this injured conveyed to hospital by ambulance? ..... | No            |

##### INJURED 2

|   |                   |
|---|-------------------|
| Name of injured person .....                              | TAN JIA YI SERENA |
| Address .....   | -                 |
| Address Complement .....                                  | -                 |
| Post Code .....   | -                 |
| Approximate Age Years Old .....                           | -                 |
| Injuries Sustained .....                                  | BODY              |
| Injured person in which vehicle? .....                    | SLD7629C          |
| Were seat belts worn? .....                               | Yes               |
| Was this injured conveyed to hospital by ambulance? ..... | No                |

### SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

(l) 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

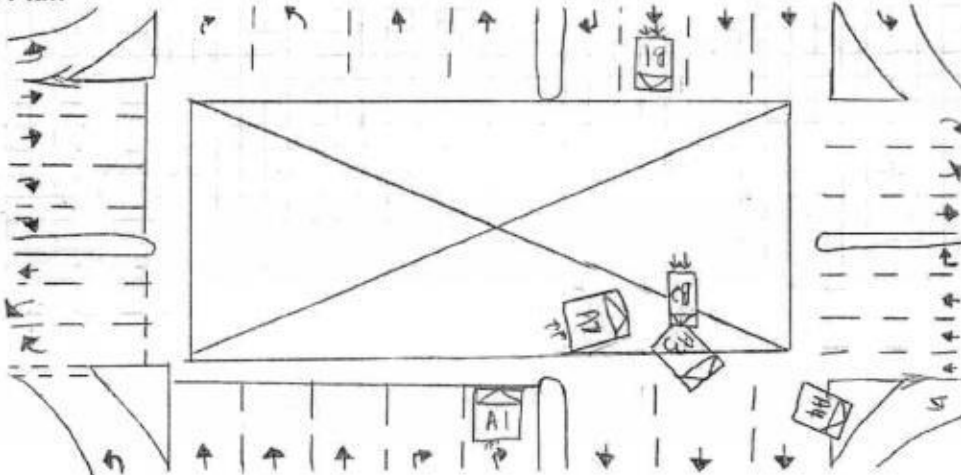
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), w hich may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel

### Sketch Plan





**Describe Circumstances of the Accident**

On the stated date & time, I, vehicle A (SD 7629C) was travelling at the stated location  
to the right  
at lane 1. As the traffic light turn green, I proceed to do a u-turn. Suddenly,  
I felt an impact from my rear left portion and causing me to surge forward and end up to the  
kerb. vehicle B (SHL 7666L) collided onto my rear left portion of my vehicle causing  
damages.

**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



Witnessed by Reporting Centre  
Personnel



**SINGAPORE  
POLICE FORCE**



T/20201226/7014

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

1 of 3

Report No. T/20201226/7014

**REPORT OF A TRAFFIC ACCIDENT**

|  |            |                              |  |                    |                            |
|--|------------|------------------------------|--|--------------------|----------------------------|
| Date/Time Report Made:<br>26/12/2020 13:28 |            | Vide Report No.:             |  | Station Diary No.: |                            |
| <b>Informant's Particulars</b>             |            |                              |  |                    |                            |
| Name of Informant:<br>TAN JIA YI, SERENA   |            |                              | Address:<br>29 JURONG WEST STREET 41 #09-10 SINGAPORE 649411 |                    |                            |
| ID Type / ID No.:<br>NRIC NO / S8931954D   |            |                              | Contact No.:<br>Home/Office: Mobile: 91880646                |                    |                            |
| Nationality:<br>SINGAPORE CITIZEN          |            |                              | Email:<br>ser.cz@hotmail.com                                 |                    |                            |
| Sex:<br>Female                             | Age:<br>31 | Date of Birth:<br>29/08/1989 | Type of Informant:<br>Driver                                 |                    |                            |
| Race:<br>Chinese                           |            |                              | Language:<br>English   |                    | Institution / School Name: |
| Occupation:<br>Primary School Teacher      |            |                              | Driving Licence Information:<br>Class: Date of Expiry:       |                    |                            |

|  |               |   |  |                                     |
|--|---------------|---|--|-------------------------------------|
| <b>General Information of the Accident</b>                   |               |   |  |                                     |
| Type of Accident:  | Injury Others | Drink Drive:<br>No                          | Date/Time of Accident:<br>25/12/2020 14:40 | Type of Location:<br>X-Junction     |
| Location:<br><br>BOON LAY WAY                                |               |   |  |                                     |
| Weather:<br>Clear  |               | Road Surface:<br>Dry                        |  | Road Speed Limit:                   |
| Traffic Flow:  |               | Traffic Control:<br>Traffic Light - Working |  | Traffic Volume:<br>Light            |
| Type of Collision:<br>Between Moving Vehicles - Head To Rear |               |   |  | Anyone conveyed by ambulance:<br>No |

|                                    |      |      |       |       |          |       |
|------------------------------------|------|------|-------|-------|----------|-------|
| <b>Details of Vehicle Involved</b> |      |      |       |       |          |       |
| Vehicle No.                        | Type | Make | Model | Color | Conditio | No of |
| SHC7866L                           | Car  |      |       |       |          | 0     |
| SLD7629C                           | Car  |      |       |       |          | 0     |

|                                   |                                |
|-----------------------------------|--------------------------------|
| <b>Details of Person Involved</b> |                                |
| Any Pedestrian Involved: No       |                                |
| No. of Pedestrians Injured: NIL   | Use of Pedestrian Crossing: NA |



**SINGAPORE  
POLICE FORCE**



T/20201226/7014

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

2 of 3

Report No. T/20201226/7014

**CONTINUATION OF REPORT**

|                                   |                    |  |                                   |                                   |
|-----------------------------------|--------------------|--|-----------------------------------|-----------------------------------|
| <b>Driver</b>                     |                    |  |                                   |                                   |
| Name                              | TAN JIA YI, SERENA |  | ID No.                            | S8931954D                         |
| Related Vehicle                   | SLD7629C (Car)     |  | Contact No.                       | 91880646                          |
| Hospital/Clinic                   | NIL                |  | Class of Driving Licence & Expiry | Class: NIL<br>Date of Expiry: NIL |
| Date                              | 26/12/2020         |  | Date                              | 26/12/2020                        |
| No. of Days granted Medical Leave | 03                 |  | Degree of                         | Slight                            |
| <b>Passenger</b>                  |                    |  |                                   |                                   |
| Name                              | ONG CHEN ZHOU      |  | ID No.                            | NIL                               |
| Related Vehicle                   | NIL                |  | Contact No.                       | NIL                               |
| Hospital/Clinic                   | NIL                |  | Class of Driving Licence & Expiry | Class: NIL<br>Date of Expiry: NIL |
| Date                              | 26/12/2020         |  | Date                              | 26/12/2020                        |
| No. of Days granted Medical Leave | 03                 |  | Degree of                         | Slight                            |

**Brief Details.**

ON 25/12/2020 AROUND 1440HRS, I WAS DRIVING VEHICLE BEARING NUMBER PLATE (SLD7629C) TRAVELLING AT BOON LAY WAY AT LANE 1. AS THE TRAFFIC LIGHT IS TURNING GREEN TO THE RIGHT, I PROCEED TO DO A U-TURN. SUDDENLY, I FELT AN IMPACT FROM MY REAR LEFT PORTION AND CAUSING ME TO SURGE FORWARD AND END UP TO THE KERB. VEHICLE BEARING NUMBER PLATE (SHC7866L) COLLIDED ONTO MY REAR LEFT PORTION OF MY VEHICLE CAUSING DAMAGES. ME AND MY PASSENGER THEN FELT UNWELL AND WENT TO CONSULT A DOCTOR AT UNIHEALTH 24-HR CLINIC, AND THE DOCTOR HAS GIVEN ME AND MY PASSENGER 3 DAYS MC.





**SINGAPORE  
POLICE FORCE**



T/20201226/7014

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

3 of 3

Report No. T/20201226/7014

**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 /  
BOON YEN KIAN  
Contact No.: 65476172

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:  
26/12/2020 13:28

Classification Of Case:

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S8931954D**  
Name: **TAN JIA YI, SERENA**

Birth Date: **29 Aug 1989**  
Issue Date: **28 Nov 2016**

 002633464D

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8931954D**

Name: **TAN JIA YI, SERENA**

Chinese: **陳佳儀**

Race: **CHINESE**

Date of Birth: **29-08-1989**

Country/Piece of Birth: **SINGAPORE**

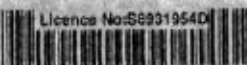
Sex: **F**

 S8931954D

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

**Class 3A** Motor cars without clutch pedals (Auto) with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight  $\leq 2500\text{kg}$

**EFFECTIVE DATE** 28 Nov 2016

 Licence No: S8931954D

NP 428A



**6491197**

**NRIC No. S8931954D**



**Date of Issue** 28-08-2020

**Address**  
29 JURONG WEST STREET 41  
#09-10  
SINGAPORE 649411

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8921420C



Name

ONG CHEN ZHOU  
(WANG-CHENGZHOU)

汪成洲

Race

CHINESE

Date of birth

22-06-1989

Country/Place of birth

SINGAPORE

Sex

M

S8921420C



6439762



NRIC No. S8921420C



Date of issue

20-06-2020

Address

29 JURONG WEST STREET 41  
#09-10  
SINGAPORE 649411



中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

R SN

AN0509A

Cov. Type:C

### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00052972001

Engine No.: HR16990298B

Cha. No.: MNT8B817Z0027410

1. Index Mark and Registration  
Number of Vehicle

SLD7629C

2. Name of Policy Holder

ONG CHEN ZHOU

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

28/06/2020

Named Drivers Ex Sect. I

S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

S\$3,000.00

Ex Sect. I - Age >= 26

S\$500.00

\* Age as at date of accident

EX ON WINDSCREEN .

S\$100.00

4. Date of Expiry of Insurance

27/06/2021

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 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:

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : HONG LEONG FINANCE LTD AS HP OWNER

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

**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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

NITA PTE LTD

Authorised Officer

Authorised Signatory

Date of Accident : 25/12/2020 Accident Time: 1440hrs (24-HR-FORMAT)  
Accident Place : Boon Lay Way  
Vehicle Reg. No (Car plate No.) : SLD 7629C Vehicle Make/Model: Nissan Sylphy  
Insurance Company : China Taiping Policy No. DMPLSNW0005293001  
Name of Registered Owner : Company / Individual Individual Ong Chen Zhou  
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S8921420C  
Co Contact No: - Owner's Contact No: 9684 6485

DRIVER'S Name : Tan Jia Yi, Serena DRIVER'S NRIC No: S8931954D

DRIVER'S Date of Birth : 29-08-1989 DRIVER'S License Pass Date 28 Nov 2016

Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_

DRIVER'S Address : 29 Jurong West Street 41 #09-10 Singapore 649411

DRIVER'S Contact No. / Alt No. : 1) 9188 0646 2) -

DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an office)

Email Address : ashley9567@yahoo.com

Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (including Driver): 02 Passenger Name: Ong Chen Zhou Gender: M/F

Was the accident reported to the police? YES \ NO Passenger Name: \_\_\_\_\_ Gender: M/F

Was there any video Captured by car camera: YES \ NO Any Injuries: YES \ NO Injured Name: Tan Jia Yi, Serena

Injured Name: Ong Chen Zhou

Exact purpose for which vehicle was being used at the time of accident: Private Use \ Work purpose

#### Other Party Driver's Particulars (if any)

Vehicle Reg No: SHC 7866 L

Vehicle Reg No: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_

Name DRIVER: \_\_\_\_\_

Name DRIVER: \_\_\_\_\_

IC No. DRIVER: \_\_\_\_\_

IC No. DRIVER: \_\_\_\_\_

DRIVER'S Contact & add: \_\_\_\_\_

DRIVER'S Contact & add: \_\_\_\_\_

#### Other Party Driver's Particulars (if any)

Vehicle Reg No: \_\_\_\_\_

Vehicle Reg No: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_

Name DRIVER: \_\_\_\_\_

Name DRIVER: \_\_\_\_\_

IC No. DRIVER: \_\_\_\_\_

IC No. DRIVER: \_\_\_\_\_

DRIVER'S Contact & add: \_\_\_\_\_

DRIVER'S Contact & add: \_\_\_\_\_