

# 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 ..... 11/01/2021 18:15 (SGT)  
Date of Accident ..... 09/01/2021 21:45 (SGT)  
Exact Location of Accident ..... Pasir Ris Dr 8, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLV3502R

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... CYNTHIA THAM SUET NEE (CYNTHIA TAN XUENI)  
NRIC No ..... SXXXX550C  
Email Address ..... spencer.ng@yahoo.com  
Mobile Phone No ..... (Phone) +65-93223727  
Alternative Phone No ..... +--

### VEHICLE PARTICULARS

Manufacturer ..... Citroen  
Model ..... C4  
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 ..... AIG  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 2070176538  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... NG HAN YONG, SPENCER  
NRIC No ..... SXXXX711A  
Date Of Birth ..... 29/04/1975  
Occupation ..... Indoor

Date Of Driving Pass .....	16/03/1996
Driving experience .....	24 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97999780
Alt. Phone Number .....	-
Email Address .....	spencer.ng@yahoo.com
Address .....	BLK 301C ANCHORVALE DRIVE
Address complement .....	#09-35
Postcode .....	543301
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 - Head to Rear
Weather Conditions .....	drizzling
Road Surface .....	Wet

#### 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) .....	6
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	CYNTHIA THAM SUET NEE (CYNTHIA TAN XUENI)
Gender .....	Female

#### PASSENGER 2

Name .....	BILOY JHO-AN VILLAESTER
Gender .....	Female

#### PASSENGER 3

Name .....	NG TZE HOWE, LUCIUS
Gender .....	Male

#### PASSENGER 4

Name .....	NG TZE YE, JETHRO
Gender .....	Male

#### PASSENGER 5

Name .....	NIGEL THAM GUO JIE
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Sengkang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18003438999
Alt. Police Station Phone No .....	(Fax) +65-63438939
Police Station Address .....	2 Sengkang Square #01-02
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

ATTACHMENT(S)

Are accident photos available for attachment? ..... Yes  
 Was there any video captured by Car Camera? ..... Yes  
 Was there any audio recorded? ..... No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... SFB8288C  
 Vehicle Manufacturer ..... -  
 Vehicle Model ..... -  
 Vehicle Variant ..... -  
 Vehicle Colour ..... -  
 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) ..... -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ..... NG TZE HOWE, LUCIUS  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... BODY  
 Injured person in which vehicle? ..... SLV3502R  
 Were seat belts worn? ..... Yes  
 Was this injured conveyed to hospital by ambulance? ..... No

INJURED 2

Name of injured person ..... NIGEL THAM GUO JIE  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... BODY  
 Injured person in which vehicle? ..... SLV3502R  
 Were seat belts worn? ..... No  
 Was this injured conveyed to hospital by ambulance? ..... No





## Declaration

Policyholder's Signature / Date &  
Time

are true in every respect.

by Reporting Cent

























**SINGAPORE  
POLICE FORCE**



T/20210110/2025

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

1 of 3

Report No. T/20210110/2025

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/01/2021 14:42	Vide Report No.: G/20210109/0241	Station Diary No.: 48
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**Informant's Particulars**

Name of Informant: NG HAN YONG, SPENCER			Address: APT BLK 301C ANCHORVALE DRIVE #09-35 SINGAPORE 543301		
ID Type / ID No.: NRIC NO / S7512711A			Contact No.: Home/Office: Mobile: 97999780		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 29/04/1975	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/01/2021 21:45	Type of Location: Flyover
Location:  PASIR RIS DRIVE 8				
Lamp Post Number: 50F				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFB8288C	Car					0
SLV3502R	Car					5

**Details of Person Involved**

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



**SINGAPORE  
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T/20210110/2025

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

2 of 3

Report No. T/20210110/2025

**CONTINUATION OF REPORT**

Driver			
Name	NG HAN YONG, SPENCER	ID No.	S7512711A
Related Vehicle	SLV3502R (Car)	Contact No.	97999780
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 09/01/2021 at about 9.45pm, I was driving my vehicle SLV3502R along Pasir Ris flyover and was waiting for the traffic light to turn green along Pasir Ris Drive 8 near lamp post 50F. The traffic light turned green shortly and I was about to move off however my vehicle was still stationary when I felt an impact coming from the rear of my vehicle and I realized that another vehicle had collided onto the rear of my vehicle.

Both drivers came out of our respective vehicles and I called for the Police however the other driver tried to ask for a private settlement but I told him to wait for the Police to arrive.

Traffic Police came down to the scene ref G/20210109/0241 and TP took my SD card and the acknowledgement slip was issued to me.

The other driver was brought away by TP for drink driving.



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T/20210110/2025

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2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

3 of 3

Report No. T/20210110/2025

**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:

F /

Sgt 3 TAN WEI XIANG ROY

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

10/01/2021 14:42

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD FARHAN BIN SAIRI

Contact No.: 65476224

Classification Of Case:

Authentication Stamp

NP168



SIGNATURE