

SINGAPORE ACCIDENT STATEMENT

Tick Hai Motor & Welding Services

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	23/03/2021 17:36 (SGT)
Date of Accident	22/03/2021 15:10 (SGT)
Exact Location of Accident	Hougang Ave 2, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR4450X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHENG FOONG LENG
NRIC No	SXXXX654F
Email Address	rustycheng02@gmail.com
Mobile Phone No	(Phone) +65-96530693
Alternative Phone No	+65-96530693

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
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
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5118455061
Cover Note Number	-

DRIVER

Name of Driver	CHENG FOONG LENG
NRIC No	SXXXX654F

Date Of Birth	23/07/1970
Occupation	Outdoor
Date Of Driving Pass	30/03/1992
Driving experience	29 YEARS
Gender	Female
Mobile Number	(Phone) +65-96530693
Alt. Phone Number	+65-96530693
Email Address	rustycheng02@gmail.com
Address	BLK 248 HOUGANG AVE 3 #12-428
Address complement	-
Postcode	530248
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Post
Police Station Address	Blk 357 Hougang Avenue 7 #01-805 Singapore 530357
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS EXITING TOWARDS HOUGANG AVE 2.I STOPPED BEHIND THE DOTTED WHITE LINE AS THRE IS ONCOMING VEHICLE ALONG HOUGANG AVE 2. SUDDENLY, VEHICLE B HIT ONTO THE REAR PORTION OF MY VEHICLE.

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	SLS4500E
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	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHENG FOONG LENG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLR4450X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

I authorise Tick Ma Motor's Welding Services to have a copy of my accident GIC report

Signature

Date

Witness

Witness Signature

Witness Name

1. I hereby authorise Tick Ma Motor's Welding Services to have a copy of my accident GIC report

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20. I hereby authorise Tick Ma Motor's Welding Services to have a copy of my accident GIC report

Signature
Name & Title

Signature
Name & Title

Signature
Name & Title



DETAILED DESCRIPTIONS OF THE ACCIDENT

I was exiting towards Hougang Ave 2. I stopped behind the dotted white line as there is oncoming vehicle along Hougang Ave 2. Suddenly, vehicle B hit onto the rear portion of my vehicle.

DECLARATION

I hereby declare that the information provided is true and correct.

[Signature]

Date: 2022/08/02

Signature of the other party

Signature of the other party



**SINGAPORE
POLICE FORCE**



T/20210323/2002

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No. T/20210323/2002

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2021 00:36		Vide Report No.:		Station Diary No.: 9	
Informant's Particulars					
Name of Informant: CHENG FOONG LENG			Address: APT BLK 248 HOUGANG AVENUE 3 #12-428 SINGAPORE 530248		
ID Type / ID No.: NRIC NO / S7024654F			Contact No.: Home/Office: Mobile: 96530693		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 50	Date of Birth: 23/07/1970	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Private Hire Driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/03/2021 15:10	Type of Location: slip road
Location: HOUGANG AVENUE 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Light
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
SLR4450X	Car	MITSUBISHI	LANCER EX 1.6 AT LED TAIL LAMP	Silver	Slightly Damaged	0
SLS4500E	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20210323/2002

2 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20210323/2002

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLR4450X	NTUC Income Insurance Co-Operative Limited	5118455061	16/08/2020	15/08/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHENG FOONG LENG		ID No. S7024654F
Related Vehicle	SLR4450X (Car)		Contact No. 96530693
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	03	Degree of Injury	Slight

Brief Details.

On 22/03/2021 at about 1510hrs, I was driving along Yio Chu Kang approaching the slip road when I came to a complete stop as there was on coming vehicle along Hougang avenue 2. Suddenly a Silver Hundai vehicle bearing registration plate number SLS4500E collided on to the rear of my vehicle.

I subsequently came out of my vehicle to make a check. Due to the impact, my vehicle suffered damages on the left rear as well as damages on the wheels. I then exchanged particulars with the driver of vehicle SLS4500E and my vehicle was then towed away.

Due to the impact I felt pain on the back of my neck. On 22/03/2021 at about 2325hrs I visited DA Clinic and was given 3 days MC from the 23/03/2021 till 25/03/2021.

My vehicle has in-vehicle camera and has recorded the accident footage.



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POLICE FORCE**



T/20210323/2002

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60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20210323/2002

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 2 QUADARRUNNISA BINTI MEERA
MOHIADEENN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN
Contact No.: 65476185

Signature Of Informant:

Date/Time:

23/03/2021 00:36

Classification Of Case:

Authentication Stamp

NP168



3N085