SC1A216F0002 / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD
ENTRY DATE & TIME: 15/06/2021 18:03 (SGT)
SUBMITTED BY: TAN SHIEH YUEN
VERSION: 1 (15/06/2021 18:03 (SGT))

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 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	15/06/2021 18:03 (SGT)
Date of Accident	14/06/2021 18:30 (SGT)
Exact Location of Accident	Hougang Ave 3, Singapore
Additional Location Information	HOUGANG AVE 3 NEAR CHAO YING KONG TEMPLE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH5788G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG ZHI QIN
NRIC No	SXXXX755I
Email Address	ZHIQIN_85@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97304366
Alternative Phone No	+65-94773274

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900079463-01
Cover Note Number	-

DRIVER

Name of Driver	NG JIA JIA
NRIC No	SXXXX625H

Date Of Birth	24/05/1986
Occupation	Indoor
Date Of Driving Pass	22/11/2008
Driving experience	12 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-94773274
Alt. Phone Number	-
Email Address	JIAJIA.NG@OUTLOOK.SG
Address	BLK 663A PUNGGOL DRIVE #08-260
Address complement	-
Postcode	821663
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 - U-Turn
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Paya Lebar Neighbourhood Police Post
Police Station Address	Blk 114 Hougang Avenue 1 #01-1270 Singapore 530114
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

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	SJM3061S
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	RUFUS
Contact Number	(Phone) +65-97982100

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	CAR 1
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJR1331A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ROGER KWOK
Contact Number	(Phone) +65-81213313
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	CAR 2
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKG8398H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SHIRLYN
Contact Number	(Phone) +65-85113768
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	CAR 3
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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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. 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 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' 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

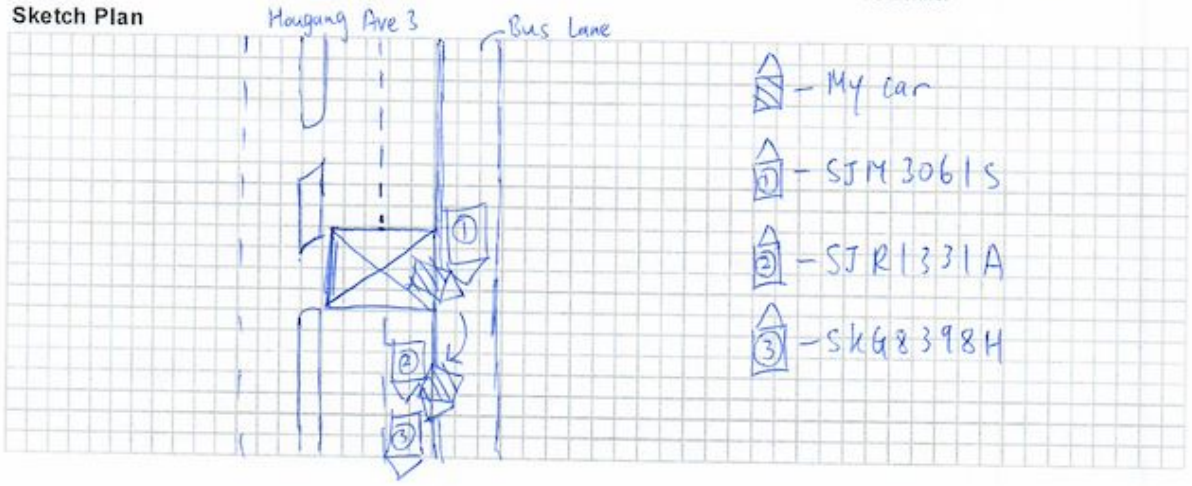
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

15 June 15.10pm — Policyholder's Signature / Date & Time

15/6/22 15.10pm — Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 14/06/2021 at about 1830hrs, I was at the u-turn lane along Hougang Ave 3 and intending to u-turn before turning into Blk 247 Hougang carpark.
I deemed the traffic was clear as the cars had stopped at the traffic light, and there was a yellow box as such I initiated a u-turn. I was slowly inching out and did not see any on coming car. But suddenly I saw V1 SSM 3061 at the bus lane approaching forward and I could not stop on time. Thereafter, both of our vehicles collided at the same time while on the move.
My vehicle inched towards the right & front & collided onto right vehicle. V2 SJP 8314 & slightly on the rear of V3 SKG 8348 M.

We all came down to make a check, exchanged particulars & police was also at the scene. At the end, all vehicles were able to move except V1 type punctured. All parties informed that they were not injured at that point of time.

I wish to inform that V1 suffered damages ~~out~~ on the right front / side & punctured type. V2 suffered damages on left side. V3 suffered slight damages on the rear.

Declaration

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

15 June 15.10pm
Policyholder's Signature / Date & Time

15.10pm 15 June
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

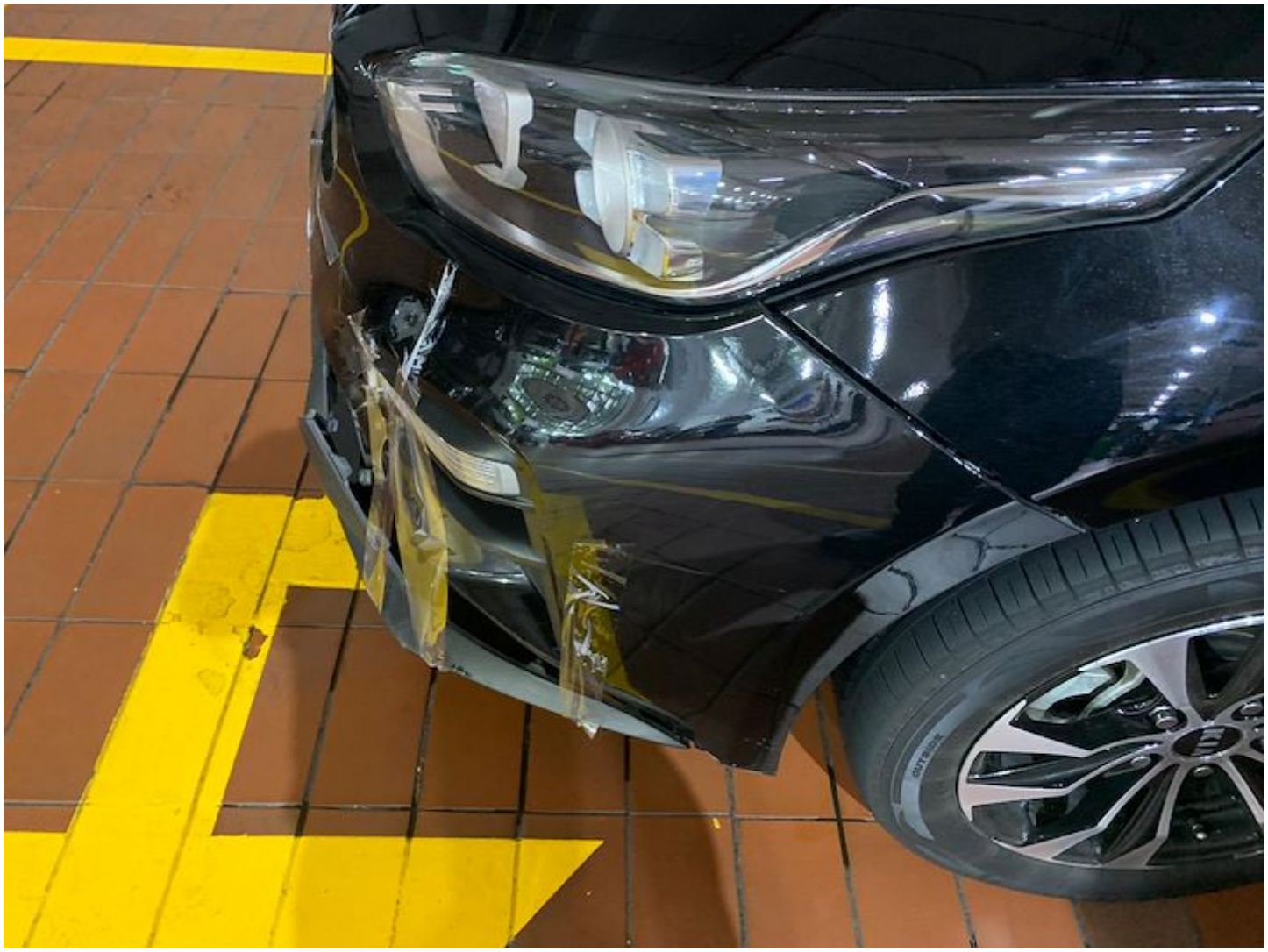
IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5



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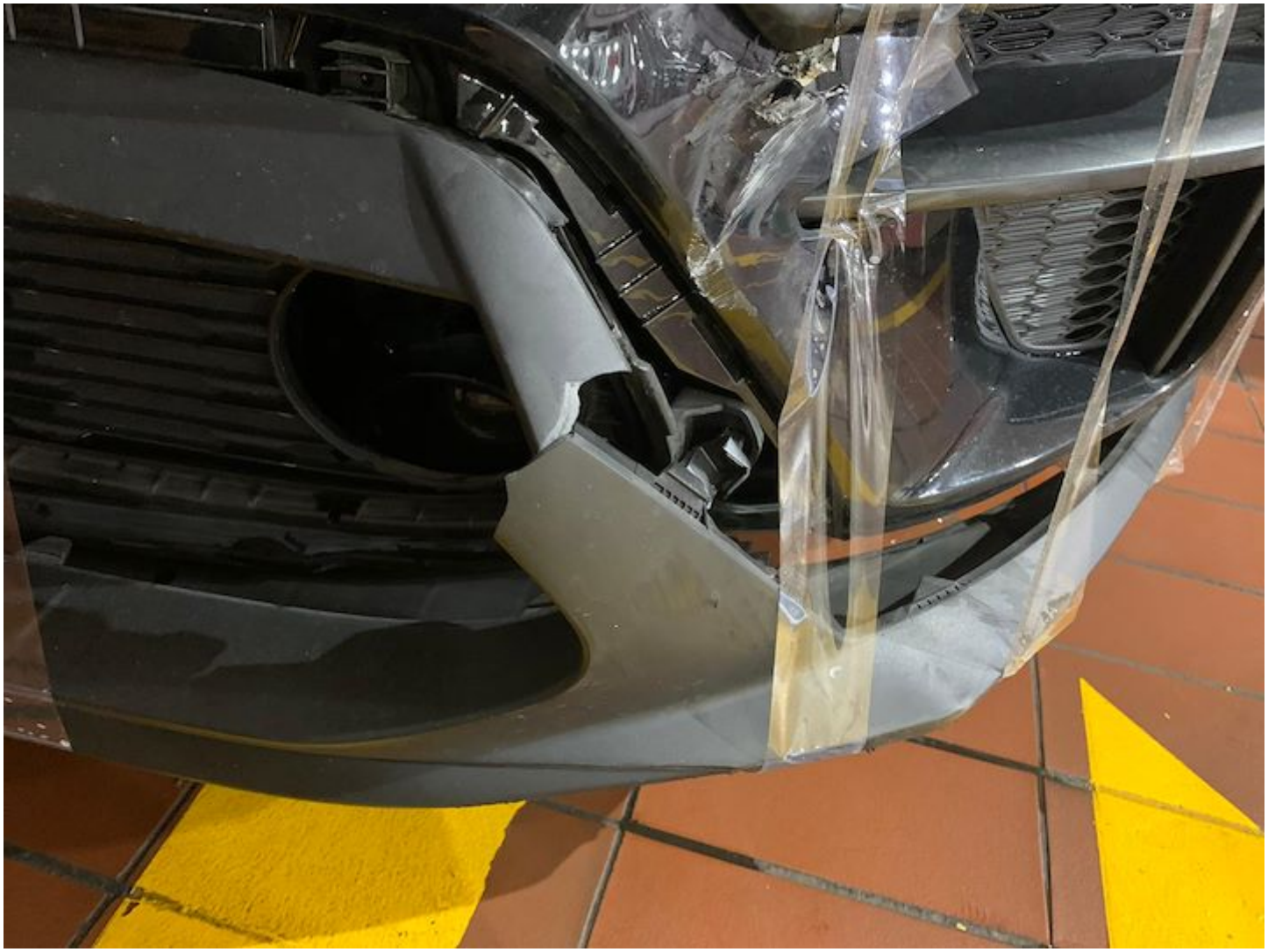

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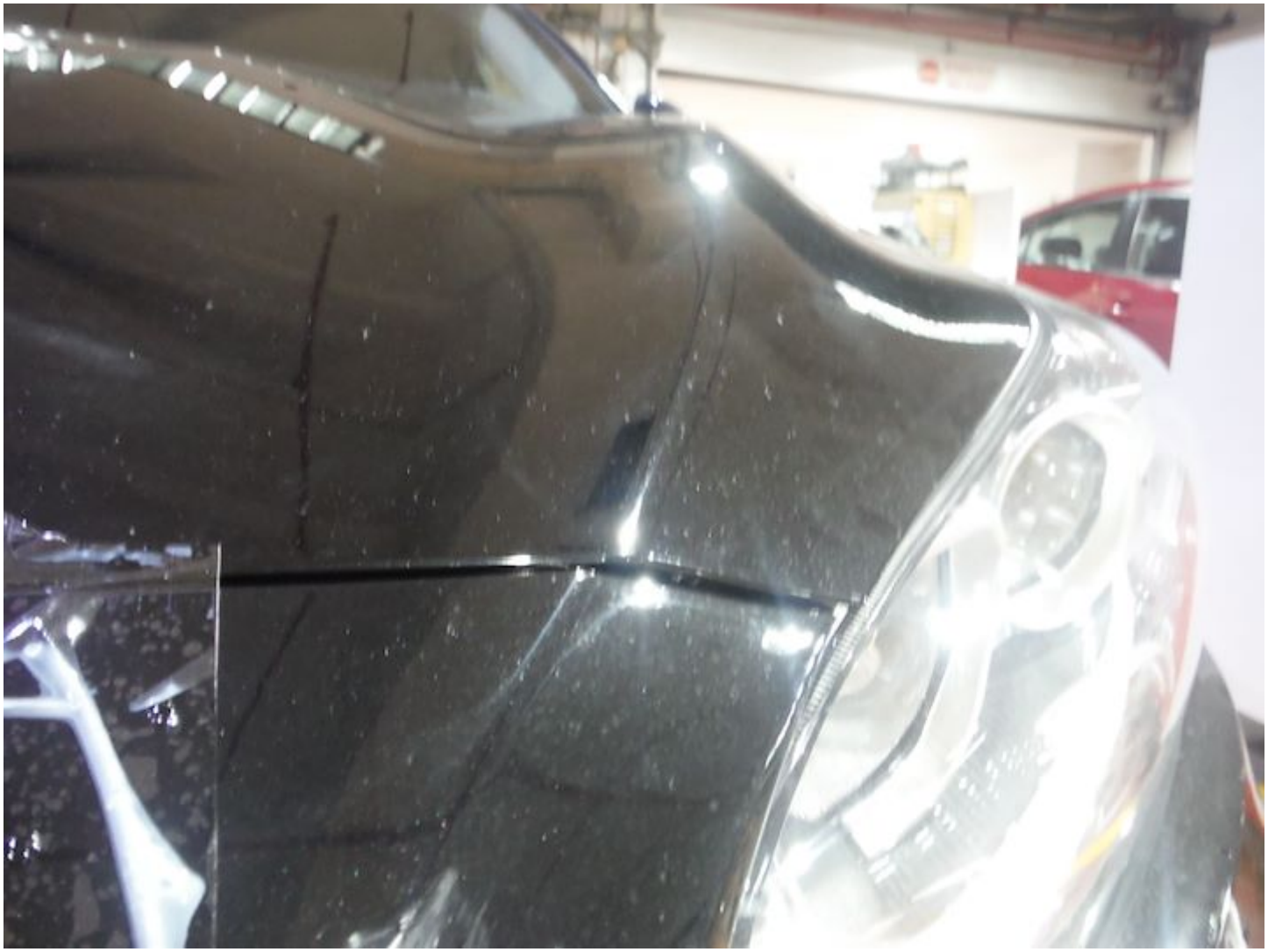

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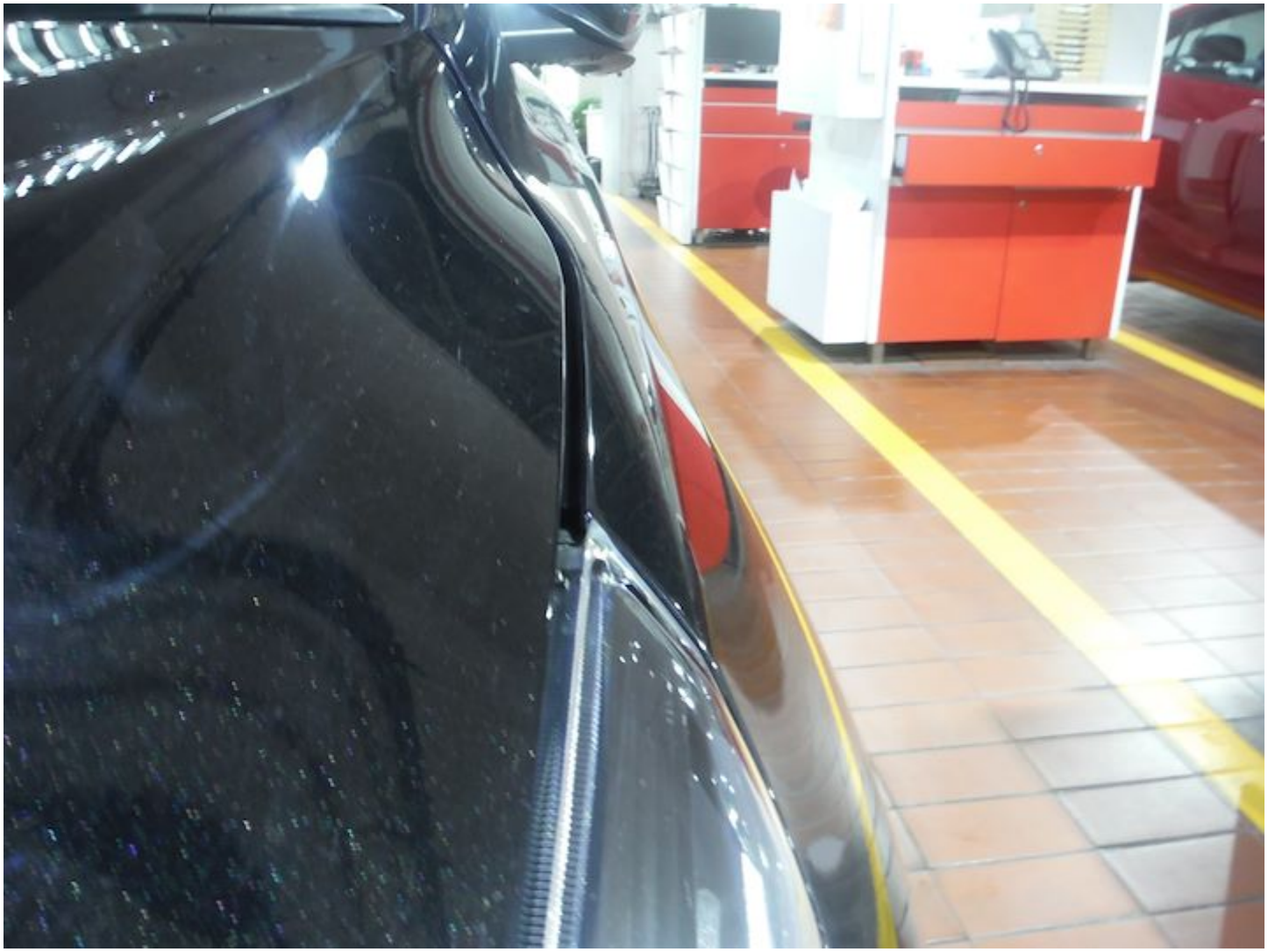

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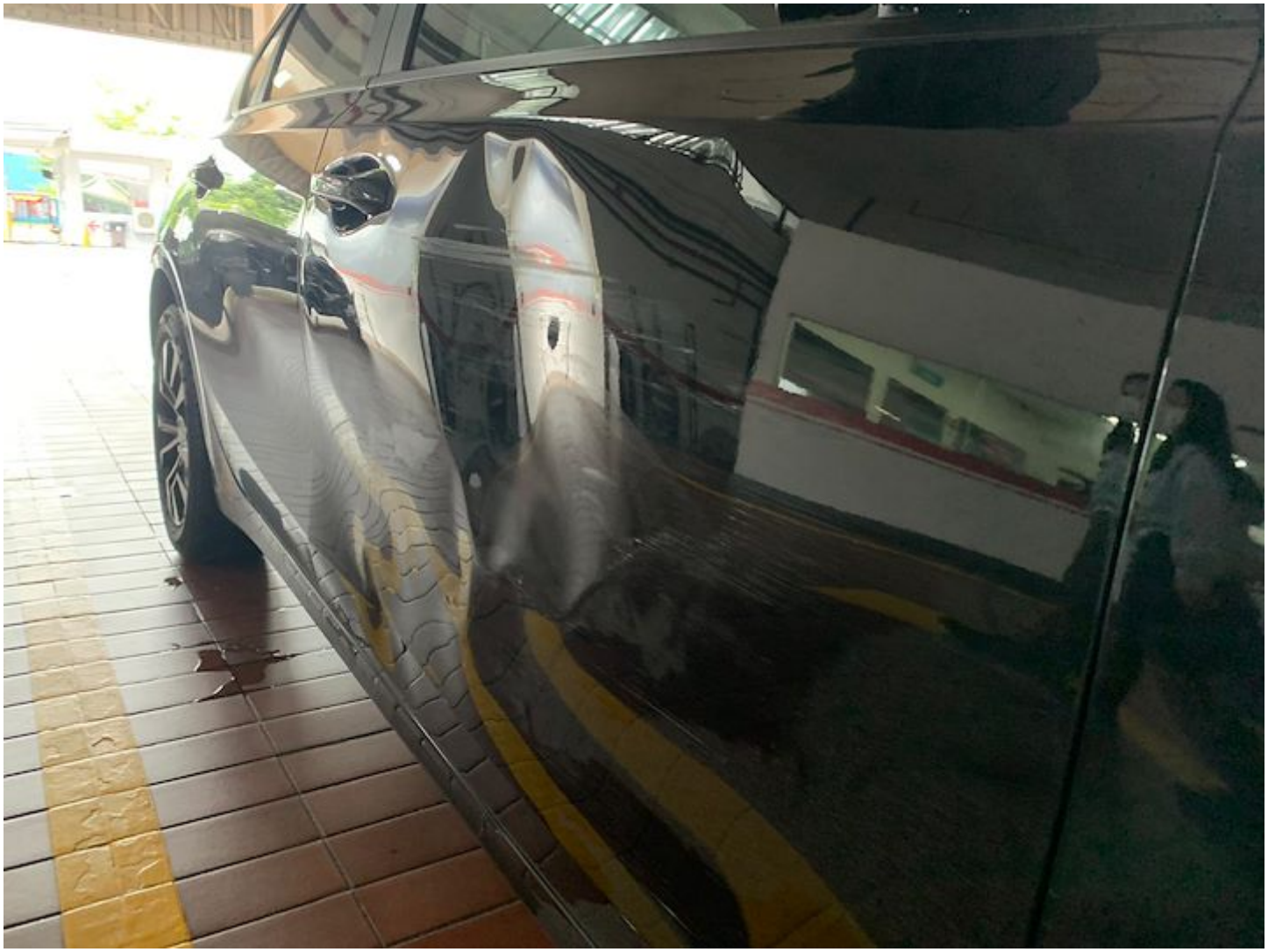

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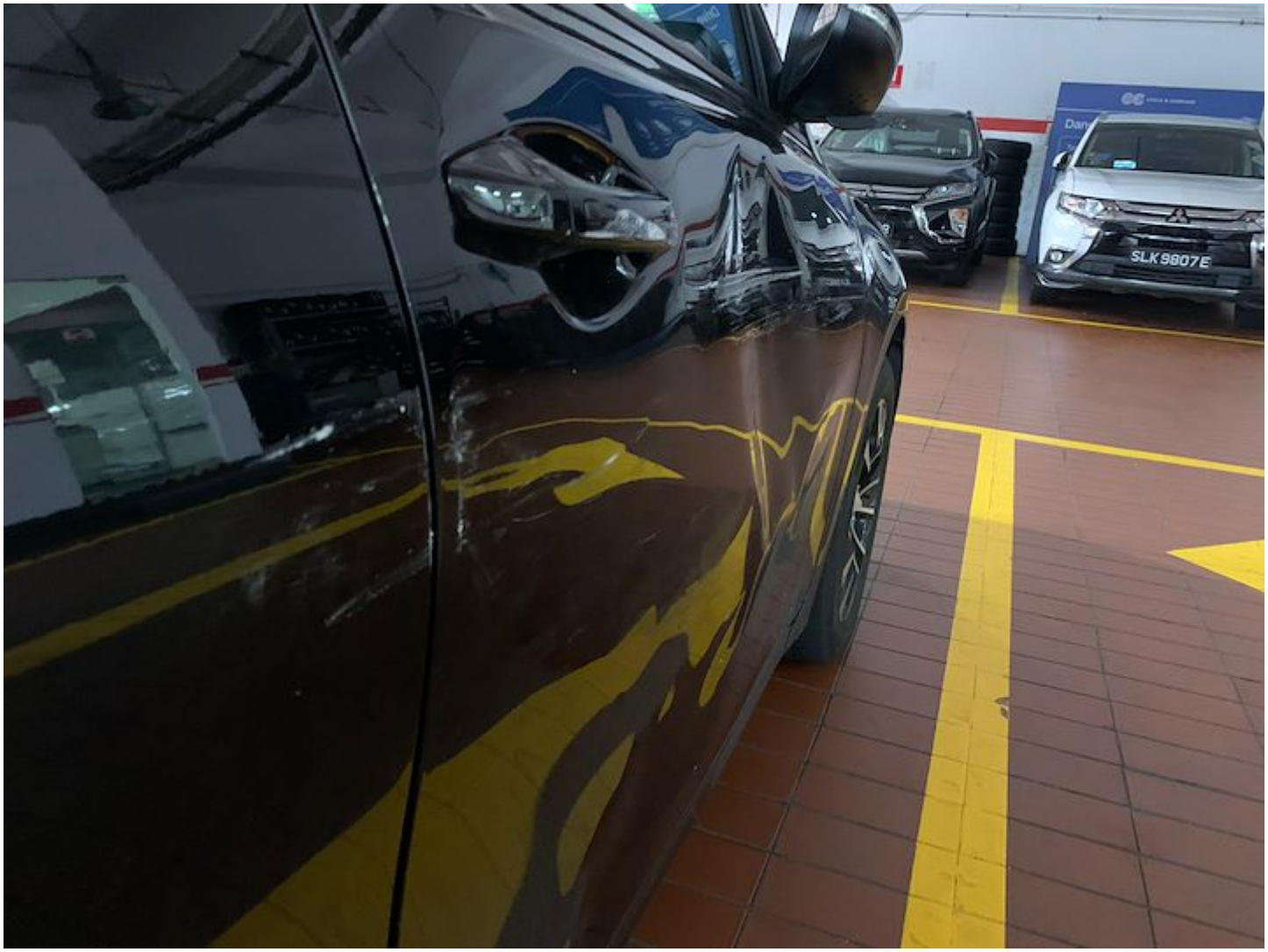

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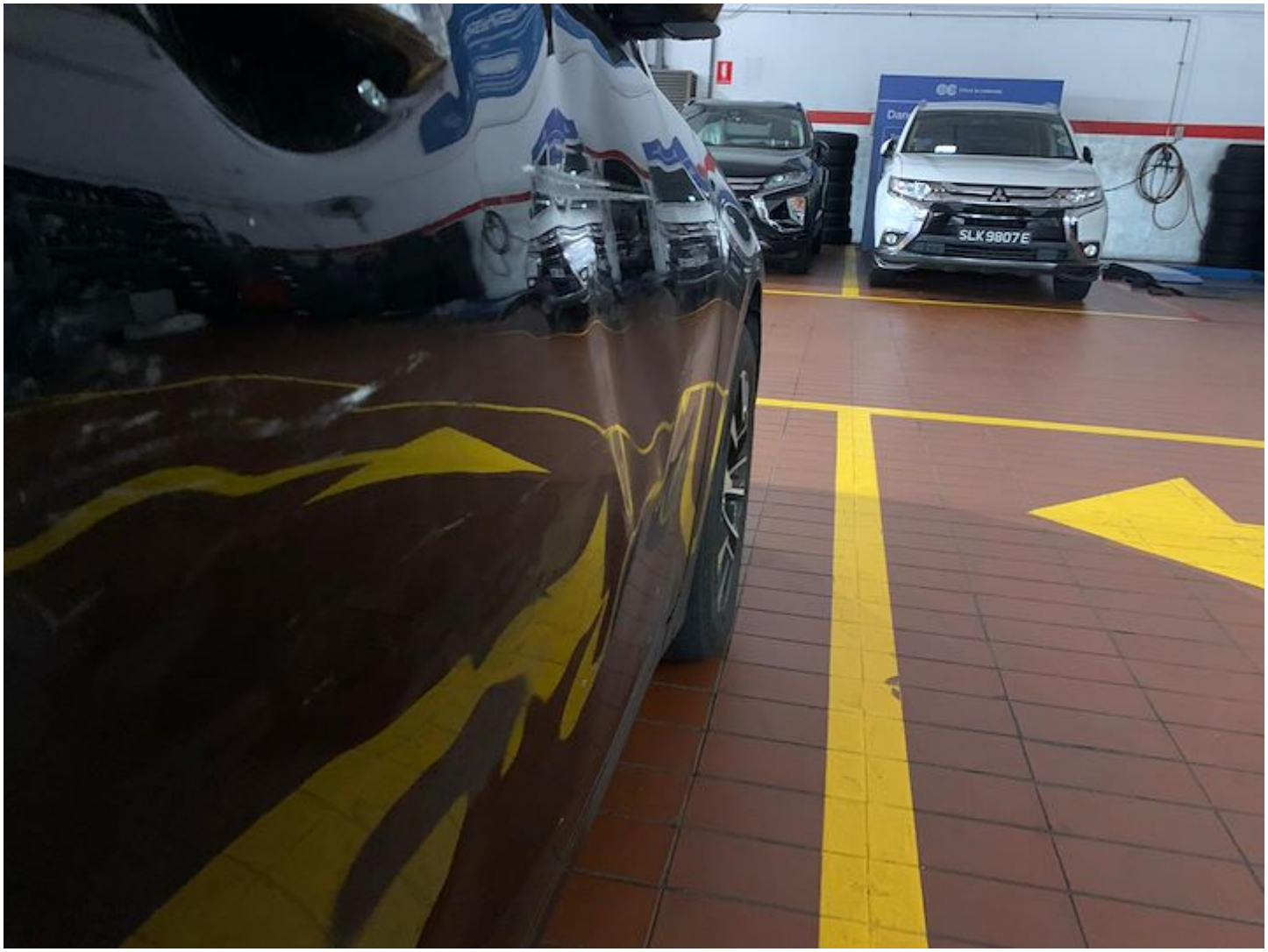

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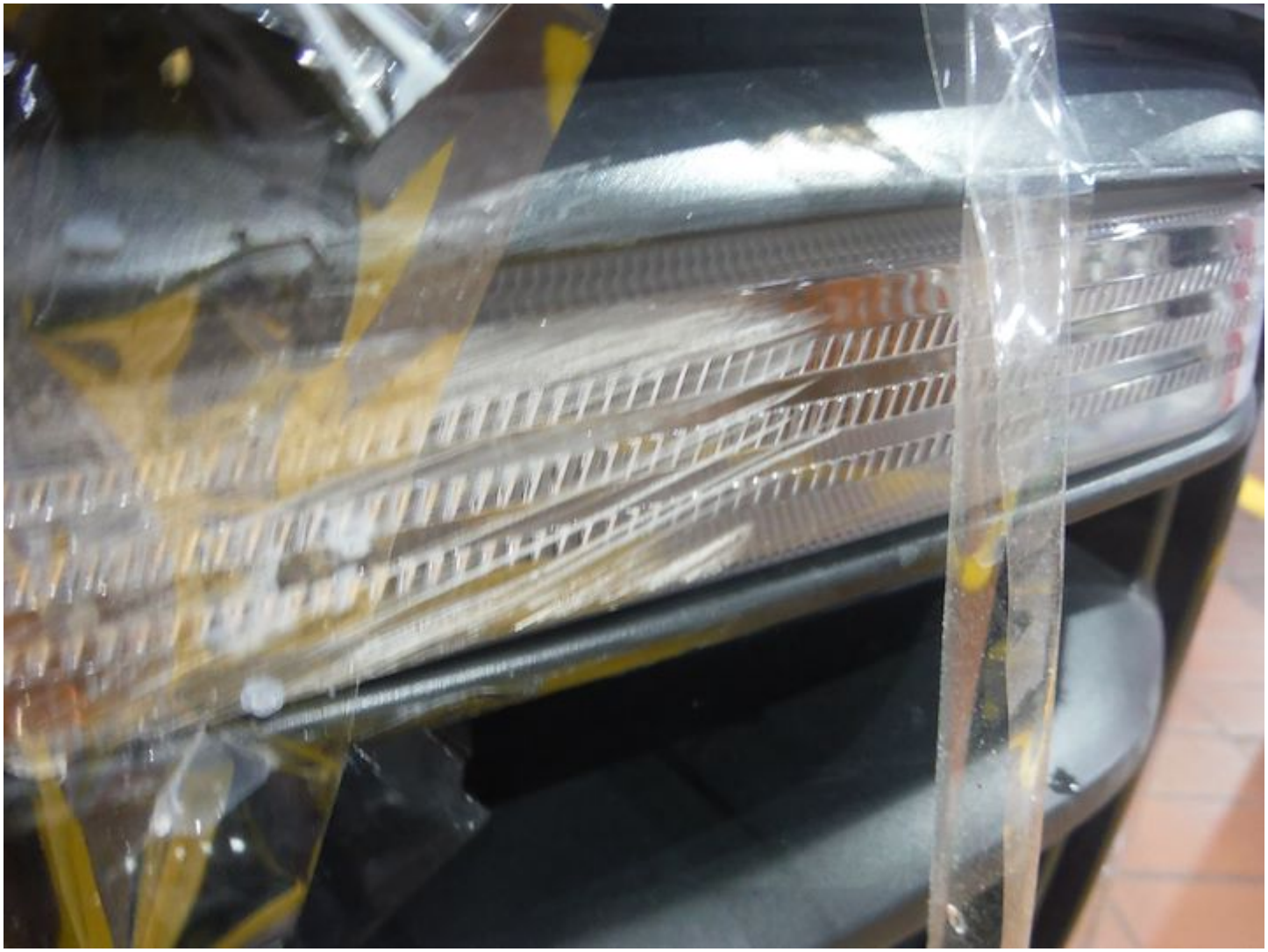

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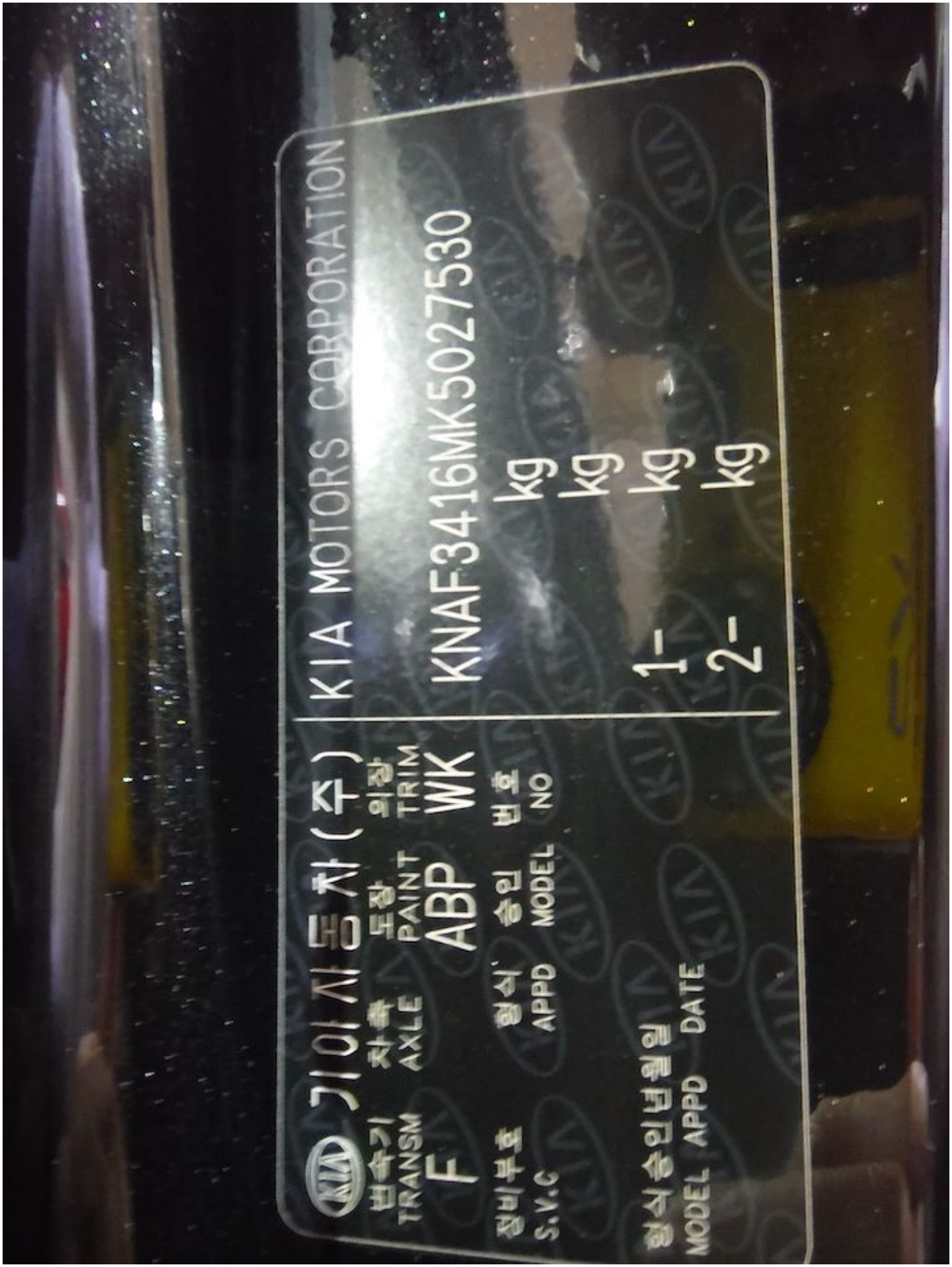
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기아자동차(주)
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의장 TRIM
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IMAGES #56

IMAGES #57

SINGAPORE POLICE FORCE

T/20210614/2118

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20210614/2118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
14/06/2021 21:52		41

Informant's Particulars

Name of Informant: NG JIA JIA			Address: APT BLK 663A PUNGGOL DRIVE #08-260 SINGAPORE 821663	
ID Type / ID No.: NRIC NO / S8614625H			Contact No.: Home/Office: Mobile: 94773274	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 35	Date of Birth: 24/05/1986	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: LOGISTIC EXECUTIVE			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/06/2021 18:30	Type of Location: Straight Road
Location: HOUGANG AVENUE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJM3061S	Car				Slightly Damaged	1
SJR1331A	Car				Slightly Damaged	3
SKG8398H	Car				Slightly Damaged	3
SMH5788G	Car				Slightly Damaged	0

SINGAPORE POLICE FORCE

T/20210614/2118

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20210614/2118

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	RUFUS	ID No.	NIL
Related Vehicle	SJM3061S (Car)	Contact No.	97982100
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
Driver			
Name	ROGER	ID No.	NIL
Related Vehicle	SJR1331A (Car)	Contact No.	81213313
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
Driver			
Name	SHIRLYN	ID No.	NIL
Related Vehicle	SKG8398H (Car)	Contact No.	85113768
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

SINGAPORE POLICE FORCE

T/20210614/2118

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20210614/2118

CONTINUATION OF REPORT

Driver			
Name	NG JIA JIA	ID No.	S8614625H
Related Vehicle	SMH5788G (Car)	Contact No.	94773274
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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 14/06/2021 at about 1830hrs, I was at the U-turn lane along Hougang Avenue 3 and intending to U-turn before turning into Block 247 Hougang carpark. I deemed the traffic was clear as the cars had stopped at the traffic light, and there was also a yellow box as such I initiated a U-turn Suddenly, I saw V1 - SJM3061S at the bus lane approaching forward and I could not stop on time. Thereafter, both of our vehicles collided on the same time while on the move. My vehicle inched forward and collided onto the right side of V2 - SJR1331A, and slightly on the rear of V3 - SKG8398H.

We all came down to make a check, exchanged particulars and police was also at scene. At the end, all vehicles were able to move except V1 tire had punctured. All parties informed that they were not injured at that point of time.

I wish to inform that V1 suffered damages on the right front bumper and puncture tyre, V2 suffered damages on the left side, V3 suffered damages slight damages on the rear. I wish to inform that I have in-vehicle camera however yet to check on it.

SINGAPORE POLICE FORCE

T/20210614/2118

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20210614/2118

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 LOW KAI TAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/06/2021 21:52
Officer In Charge Of Case: TP / GIT / Staff Sgt SUFIYAN BIN KHAIRI Contact No.: 65476390	Classification Of Case:
Authentication Stamp NP168	SN 065 Signature: Singapore Police Force