

# 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 ..... 28/10/2021 13:24 (SGT)  
Date of Accident ..... 26/10/2021 10:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... CLEMENTI AVE 6 TOWARDS AYE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SJP2134G

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... ONG KOK ANN  
NRIC No ..... S1396937Z  
Email Address ..... JEFFREY@SOLIDPLM.COM  
Mobile Phone No ..... (Phone) +65-91899191  
Alternative Phone No ..... +65-91899191

### VEHICLE PARTICULARS

Manufacturer ..... Hyundai  
Model ..... Avante  
Variant ..... HYUNDAI / HD AVANTE 1.6 A  
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 - Reporting only  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1591

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... No  
Policy Number ..... D19MPC0001405\_02  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... ONG JIAJUN, GERALD  
NRIC No ..... S9048158D

Date Of Birth .....	10/12/1990
Occupation .....	Indoor
Date Of Driving Pass .....	18/02/2013
Driving experience .....	8 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96609269
Alt. Phone Number .....	-
Email Address .....	DLAREGGNO@GMAIL.COM
Address .....	APT BLK 513D YISHUN ST51
Address complement .....	13-337
Postcode .....	764513
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 - Change/cross lane
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle 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 .....	Hong Kah South Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18005648999
Alt. Police Station Phone No .....	(Fax) +65-66655797
Police Station Address .....	Blk 510 Jurong West Street 52 #01-90 Singapore 640510
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN

#### 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 .....	SKS4370A
Vehicle Manufacturer .....	Mazda
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	Black
Vehicle Category .....	Private car

Name of Driver .....	YEO LAY SEE
NRIC No .....	S1284958C
Contact Number .....	(Phone) +65-96485745
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**

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**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")

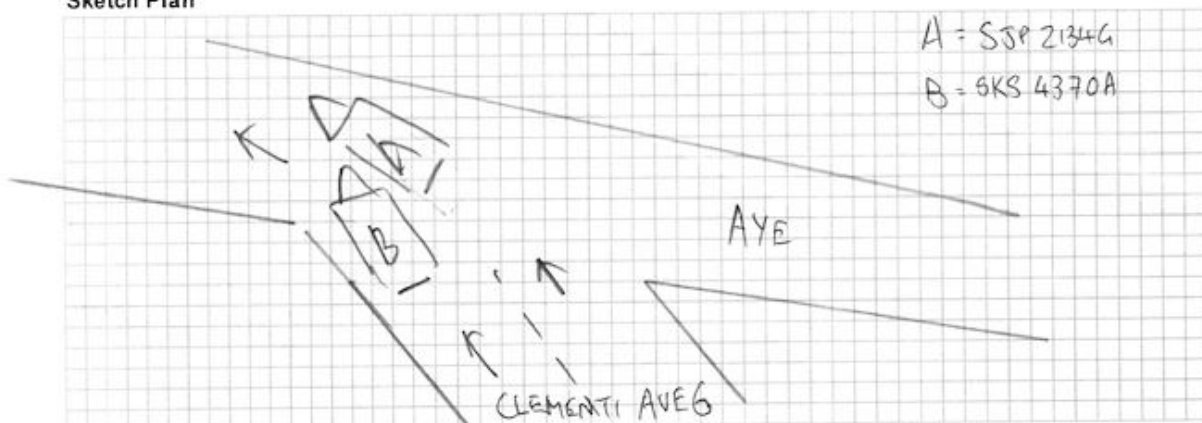
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

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

Turning out of outer filter lane from CLEMENTI AVE 6 to AYE. While turning after checking that there was no oncoming vehicle, half way through turning out a horn was heard could see a on coming vehicle coming very fast. Accelerated to get of faster was hit by the car in inner lane while trying to avoid the on coming car.

## 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

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Case No.: FC/P 111/2017

In the Matter of Probate and Administration Act (Chapter 251)

Document No.: FC/PRG  
641/2017

And

In the Estate of ONG TENG DIT  
(NRIC No. S1011804B), deceased.

GRANT OF PROBATE

Probate of the Last Will and Testament (a copy of which is annexed) of ONG TENG DIT (NRIC No. S1011804B) late of 206, Toa Payoh North, # 01-1205, Singapore 310206, deceased who died on 05-April-2013 at 206, Toa Payoh North, #01-1205, Singapore 310206, is granted by this Court to ONG KOK ANN (NRIC No. S1396937Z), ONG KOK CHEE (NRIC No. S1507430B) and ONG KOK LEEN (NRIC No. S1651990A) as the three executors named in the said Will.

Dated: 06-February-2017



CHIA WEE KIAT  
REGISTRAR  
FAMILY JUSTICE COURTS  
SINGAPORE

Date of Issue: 10-February-2017



CHIA WEE KIAT  
REGISTRAR  
FAMILY JUSTICE COURTS  
SINGAPORE























Jurong West NPC  
700 Corporation Road  
Singapore 649818  
Tel: 62689999 Fax: 62672438

## Traffic Police



Traffic Police Department  
Charge Office  
10 Ubi Avenue 3  
Singapore 408865

## Annex D

## NOTICE OF REPORTING

Informant Name : ONG JIAJUN, GERALD  
Identity Card No : S9048158D  
Age / Sex : 31 years / MALE  
Address : B/513D YISHUN STREET 51 #13-337 S(764513)  
Nationality and Race : SINGAPOREAN, CHINESE  
Occupation : HOUSING OFFICER  
Telephone No : 96609269

This is to confirm that the above informant, driver of vehicle registration number, SJP2134G, has reported to the Police a non-injury traffic accident which occurred on the 26/10/2021 at about 1000hrs along the acceleration road of Clementi Ave 6 to AYE towards Tuas, involving the following vehicle/s:

V1 : SJP2134G

V2 : SKS4370A

I am lodging this report for insurance claim purposes. There was no one injured and no police or ambulance attended to me. No government property was damaged as well. I have been told that no investigations will be conducted by police and I acknowledge.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Issuing Officer : SGT (2) Faizul  
Date / Time : 26/10/2021 @ 1315 hrs  
Station Diary No : #05  
Police Post : Hong Kah South NPP

Signature of Informant :

Signature of Issuing Officer :

HONG KAH SOUTH NPP  
Blk 510 Jurong West St 51  
Singapore 640510  
Tel : 6564 8999 Fax : 6665 5797