

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	13/12/2021 14:39 (SGT)
Date of Accident	10/12/2021 18:40 (SGT)
Exact Location of Accident	11 Leedon Heights, Singapore 267955
Additional Location Information	D'LEEDON CONDO B1 TO B2 CARPARK SLOPE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU2895E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ONG CHIN HUI STEVEN JOSEPH
NRIC No	SXXXX696H
Email Address	jeromeoas@gmail.com
Mobile Phone No	(Phone) +65-96161325
Alternative Phone No	+65-97262507

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Scirocco
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	1390

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ21-007136
Cover Note Number	-

DRIVER

Name of Driver	ONG AH SHUN JEROM FRANCIS
NRIC No	TXXXX006H

Date Of Birth	29/04/2000
Occupation	Indoor
Date Of Driving Pass	03/12/2020
Driving experience	1 YEAR
Gender	Male
Mobile Number	(Phone) +65-97262507
Alt. Phone Number	-
Email Address	jeromeas@gmail.com
Address	12 GOLDHILL DRIVE
Address complement	-
Postcode	308961
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 - Head to Rear
Weather Conditions	AFTER RAIN
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 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	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT E/20211212/7012

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	SNC6324U
Vehicle Manufacturer	Toyota
Vehicle Model	Noah
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	ONG AH SHUN JEROM FRANCIS
Gender	Male
Phone No	(Phone) +65-97262507
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SKU2895E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' law yers/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' law yers/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), 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

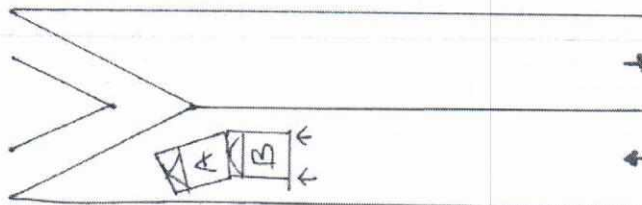
Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A: SKU 2895E

Vehicle B: SNC6324U

D'leedon Condo B1 to B2 Carpark Slope



Describe Circumstances of the Accident

Refer to police report. No. E 202112127012

Declaration

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

JWG

Date of Accident : 10/12/2021 Accident Time: 1840 (24-HR-FORMAT)
Accident Place : D'leedon Condo B1 to B2 Carpark Slope
Vehicle Reg. No (Car plate No.) : SKU 2895E Vehicle Make/Model: Volkswagen Scirocco
Insurance Company : EQ Policy No. DMPPH21-007136
Name of Registered Owner : Company / Individual Ong Chin Hui Steven Joseph
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S1595696H
Co Contact No: - Owner's Contact No: 9616 1325
DRIVER'S Name : Ong An Shun Jerome Francis DRIVER'S NRIC No: T0015006H
DRIVER'S Date of Birth : 29 April 2000 DRIVER'S License Pass Date 03 DEC 2020
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: -
DRIVER'S Address : 12 Goldhill Drive Singapore 308961
DRIVER'S Contact No / Alt. No. : 1) 97726 2507 2) -
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc) Student
Email Address : jeromeos@gmail.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): 01 Passenger Name: - 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: Ong An Shun Jerome Francis
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Injured Name: -

Other Party Driver's Particulars (if any)

Vehicle Reg No: SNC 6324U	Vehicle Reg No: _____
Vehicle Make/Model: Toyota Noah	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
ID No. DRIVER: _____	ID 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: _____
ID No. DRIVER: _____	ID No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____



**SINGAPORE
POLICE FORCE**



E/20211212/7012

1 of 1

POLICE REPORT (NP299)

Report No. E/20211212/7012

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 12/12/2021 15:37	Vide Report No.	Station Diary No.
Name Of Informant ONG AN SHUN JEROME FRANCIS	Address 12 GOLDHILL DRIVE SINGAPORE 308961	
ID Type / ID No. NRIC NO / T0015006H	Contact No. Home/Office:	Mobile: 97262507
Nationality SINGAPORE CITIZEN	Email Address JEROMEAS@GMAIL.COM	
Occupation Student	Sex Male	Age 21
Institution/School Name	Date of Birth 29/04/2000	Race Chinese
Date/Time Of Incident 10/12/2021 18:40	Location Of Incident 11 LEEDON HEIGHTS DLEEDON SINGAPORE 267955	

Brief details.

On the stated date and time I vehicle SKU2895E was stationary before the stop line of the stated venue. Suddenly vehicle SNC6324U who was coming down from the slope behind me hit onto my vehicle's rear portion.

The impact was great and it causes a sudden jerk and I hit my head against my headrest.

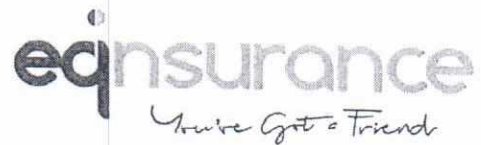
After a while I felt pain on my neck head and shoulders.

The next day I proceeded to Sin Min Clinic to seek treatment and I was given 4 days MC.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2021 15:37
Officer In-Charge Of Case:	Classification Of Case:

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR

Comprehensive Premier

Certificate No. : DMPHQ21-007136

Premier Plan - Any Workshop

Form: MX2

Excess:

Insured&Named Driver: S\$500.00(Section 1 - Own Damage)
Unnamed Driver: S\$1,000.00(Section 1 - Own Damage)
YEIDR: Additional S\$3,000.00
WindScreen: S\$100.00

1. Index Mark and Registration Number of Vehicles

SKU2896E

2. Name of Policyholder

ONG CHIN HUI STEVEN JOSEPH

3. Effective Date of the Commencement of Insurance for the purpose of the Act

25/09/2021

4. Date of Expiry of Insurance

24/09/2022

5. Person 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.

EQI Motor Accident
Hotline

6311 3211



* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

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

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

*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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Tokyo Century Leasing (Singapore) Pte Ltd

A000447/Gen Capital Insurance Agency Pte Ltd

Date of Issue : 24/09/2021 15:31

Authorised Signatory
EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.