

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	20/12/2021 16:15 (SGT)
Date of Accident	17/12/2021 12:00 (SGT)
Exact Location of Accident	Telok Blangah Rd, Singapore
Additional Location Information	ALONG TELOK BLANGAH RD TOWARDS KEPPEL ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN3804A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHENG NAM SENG (ZHUANG NANSHENG)
NRIC No	SXXXX717J
Email Address	CHENGMEVIN168@GMAIL.COM
Mobile Phone No	(Phone) +65-98203031
Alternative Phone No	(Home) +65-98203031

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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 hire
Transmission	Auto
CC	1497

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5122580684
Cover Note Number	-

DRIVER

Name of Driver	CHENG NAM SENG (ZHUANG NANSHENG)
NRIC No	SXXXX717J

Date Of Birth	31/03/1974
Occupation	Outdoor
Date Of Driving Pass	09/12/1996
Driving experience	25 YEARS
Gender	Male
Mobile Number	(Phone) +65-98203031
Alt. Phone Number	(Home) +65-98203031
Email Address	CHENGMELVIN168@GMAIL.COM
Address	230 WESTWOOD AVENUE
Address complement	#08-28
Postcode	648359
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CHENG SI HUI
Gender	Female

PASSENGER 2

Name	OSCAR CHENG YONG REN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETH PLAN AND POLICE REPORT ATTACHED

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	SLX4360R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	RAYMOND SWEE
Contact Number	(Phone) +65-97847969
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SDV535K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ONG PANG KEOW
Contact Number	(Phone) +65-97847969
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	CHENG NAM SENG (ZHUANG NANSHENG)
Gender	Male
Phone No	(Phone) +65-98203031
Address	230 WESTWOOD AVENUE
Address Complement	#08-28
Post Code	648359
Approximate Age Years Old	47
Injuries Sustained	5 days mc
Injured person in which vehicle?	SMN3804A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	CHENG SI HUI
Gender	Female
Phone No	(Phone) +65-96842513
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	5 days mc
Injured person in which vehicle?	SMN3804A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	OSCAR CHENG YONG REN
Gender	Male
Phone No	(Phone) +65-98203031
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SMN3804A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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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 persons who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall 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/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 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.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

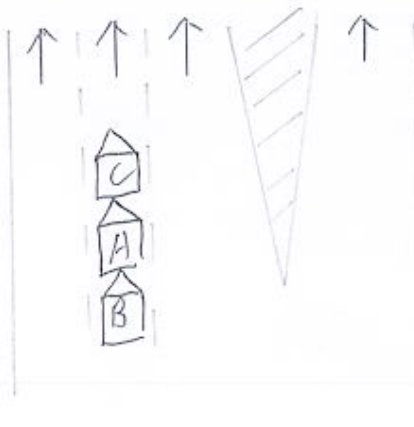
Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Company Personnel

Sketch Plan

Teluk Blangah
Road
towards
Keppel Rd



A - SMN 3804A
B - SLX 4360R
C - SDV 5351C

please refer to police report 7120211218 / 7010

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Co Personnel



















SINGAPORE POLICE FORCE



T/20211218/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20211218/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2021 10:53		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHENG NAM SENG			Address: 230 WESTWOOD AVENUE #08-28 SINGAPORE 648359		
ID Type / ID No.: NRIC NO / S7409717J			Contact No.: Home/Office: Mobile: 98203031		
Nationality: SINGAPORE CITIZEN			Email: CHENGMELVIN168@GMAIL.COM		
Sex: Male	Age: 47	Date of Birth: 31/03/1974	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PHV DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/12/2021 12:00	Type of Location: Straight Road
Location: TELOK BLANGAH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SDV535K	Car	TOYOTA	WISH	White	Slightly Damaged	0
SLX4360R	Car	KIA		Grey	Seriously Damaged	0
SMN3804A	Car	TOYOTA	PRIUS C CVT	Silver	Seriously Damaged	2



**SINGAPORE
POLICE FORCE**



T/20211218/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20211218/7010

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMN3804A	NTUC Income Insurance Co-Operative Limited	5122580684	16/06/2021	15/06/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver				
Name	ONG PANG KEOW	ID No.	NIL	
Related Vehicle	SDV535K (Car)	Contact No.	96816606	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	NIL	
Driver				
Name	RAYMOND SWEE	ID No.	NIL	
Related Vehicle	SLX4360R (Car)	Contact No.	97847969	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL	Date	NIL	
No. of Days granted Medical Leave	NIL	Degree of	NIL	
Passenger				
Name	CHENG SI HUI	ID No.	S78289271I	
Related Vehicle	SMN3804A (Car)	Contact No.	96842513	
Hospital/Clinic	DRS. KOO & CHOO MEDICAL CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL	
Date	18/12/2021	Date	18/12/2021	
No. of Days granted Medical Leave	05	Degree of	Slight	



**SINGAPORE
POLICE FORCE**



T/20211218/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20211218/7010

CONTINUATION OF REPORT

Driver			
Name	CHENG NAM SENG		ID No. S7409717J
Related Vehicle	SMN3804A (Car)		Contact No. 98203031
Hospital/Clinic	DRS. KOO & CHOO MEDICAL CLINIC PTE LTD		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	18/12/2021	Date	18/12/2021
No. of Days granted Medical Leave	05	Degree of	Slight
Passenger			
Name	OSCAR CHENG YONG REN		ID No. T1116837F
Related Vehicle	SMN3804A (Car)		Contact No. 98203031
Hospital/Clinic	DRS. KOO & CHOO MEDICAL CLINIC PTE LTD		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	18/12/2021	Date	18/12/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On 17/12/2021 at about 1200 Hrs,i was driving my vehicle SMN3804A along Telok Blangah Road towards Keppel Road with my wife and my son onboard.While i was traveling straight,in front of me a vehicle SDV535K brake and come to a stopped so i follow and come to a complete stopped.Suddenly i felt a great impact from behind and the impact surged my vehicle forward and collided onto the front vehicle rear portion.I alighted my vehicle and discover that a vehicle SLX4360R cannot stop on time and rear ended my vehicle rear portion and cause damage and dented to my vehicle rear section and my front portion also damage and dented.After the accident we exchange particular and take some scene photo and leave the scene.I,my wife and my son neck and back was in pain due to the impact of the accident and today when we wake up the pain more worse so we consult doctor and was given some medicine and medical leave.



**SINGAPORE
POLICE FORCE**



T/20211218/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20211218/7010

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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: 18/12/2021 10:53
Officer In Charge Of Case: TP / TPIB / BOON YEN KIAN Contact No.: 65476172	Classification Of Case:

NP168





Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: S122580684

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SMN3804A**
 Chassis Number : JTDKD3B3101570203
2. Name of Policyholder : CHENG NAM SENG (ZHUANG NANSHENG)
3. Effective Date of Insurance : 16 Jun 2021
4. Expiry Date of Insurance : 15 Jun 2022
5. Persons 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/her permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.
 This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHENG NAM SENG (ZHUANG NANSHENG)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : ASSURE (SINGAPORE) PTE. LTD. (00000615327)
 Date of Issue : 15 Jun 2021 16:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive