

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 25/03/2022 15:49 (SGT)
Date of Accident 25/03/2022 08:35 (SGT)
Exact Location of Accident ECP, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJM3988T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TONG PECK TING ROSE
NRIC No S1641271F
Email Address weephong.chua@constellar.co
Mobile Phone No (Phone) +65-93687878
Alternative Phone No +65-93687878

VEHICLE PARTICULARS

Manufacturer Audi
Model A7
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 2800

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2021-V0026816-MVA-R001
Cover Note Number -

DRIVER

Name of Driver CHUA WEE PHONG
NRIC No S1481709C

Date Of Birth	07/03/1961
Occupation	Indoor
Date Of Driving Pass	11/01/1985
Driving experience	37 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97638775
Alt. Phone Number	-
Email Address	weephong.chua@constellar.co
Address	54 KEW AVENUE
Address complement	-
Postcode	466341
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	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	5
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CHUA SHAE-LINN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220325/2047.

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	SMR2033T
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMA3426P
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 C
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE D
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SJJ4551D
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 E
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person CHUA SHAE-LINN
Gender Female
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SJM3988T
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person CHUA WEE PHONG
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SJM3988T
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

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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.

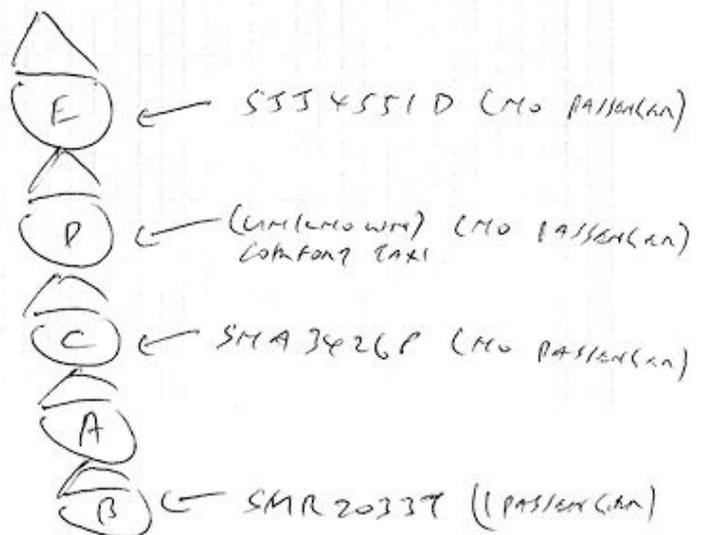
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

SMB

























**SINGAPORE
POLICE FORCE**



T/20220325/2047

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

1 of 5

Report No. T/20220325/2047

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/03/2022 12:23		Vide Report No.: G/20220325/0081		Station Diary No.: 35	
Informant's Particulars					
Name of Informant: CHUA WEE PHONG			Address: 54 KEW AVENUE SINGAPORE 466341		
ID Type / ID No.: NRIC NO / S1481709C			Contact No.: Home/Office: Mobile: 97638775		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 61	Date of Birth: 07/03/1961	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Management			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/03/2022 08:35	Type of Location: Straight Road
Location: EAST COAST PARKWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJJ4551D	Car				Slightly Damaged	0
SJM3988T	Car				Slightly Damaged	1
SMR2033T	Car				Slightly Damaged	1
SNA3426P	Car				Slightly Damaged	0

SIGNATURE



**SINGAPORE
POLICE FORCE**



T/20220325/2047

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

2 of 5

Report No. T/20220325/2047

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Ng She Boon	ID No.	S1193336Z
Related Vehicle	SJJ4551D (Car)	Contact No.	NIL
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	CHUA WEE PHONG	ID No.	S1481709C
Related Vehicle	SJM3988T (Car)	Contact No.	97638775
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
Passenger			
Name	Chua Shae-Linn	ID No.	T0036203J
Related Vehicle	SJM3988T (Car)	Contact No.	NIL
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	25/03/2022	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight


 SINGAPORE
POLICE FORCE

 SIGNATURE



**SINGAPORE
POLICE FORCE**



T/20220325/2047

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

3 of 5

Report No. T/20220325/2047

CONTINUATION OF REPORT

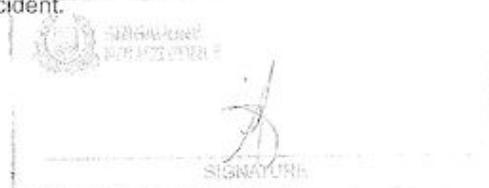
Driver			
Name	Syed Abdul Kadir Bin Syed Agiel Alsree	ID No.	S8142308C
Related Vehicle	SMR2033T (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Tan Ah Sing	ID No.	S7419235A
Related Vehicle	SNA3426P (Car)	Contact No.	NIL
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	Heng Aik Hong	ID No.	S7838454I
Related Vehicle	NIL	Contact No.	NIL
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

Brief Details.

On 25/03/2022 at about 0830hrs, I was driving (SJM3988T) along ECP (AYE) towards CTE at 10km mark. As I was driving, there was a car (SNA3426P) in front of me who did emergency brake to his car, and I proceeded to do an emergency brake as well. Subsequently, one car behind me (SMR2033T) bumped into the rear of my car. My car then bumped into the car in front of me, which caused a chain collision accident.

Total there are 5 cars involved in the said accident.

1st Car: SJJ4551D
2nd Car: -
3rd Car: SNA3426P
4th Car: SJM3988T





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T/20220325/2047

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4 of 5

Report No. T/20220325/2047

CONTINUATION OF REPORT

5th Car: SMR2033T

We then exchange particulars. Traffic Police then attended to the said incident (Vide G/20220325/0081). He then advised me to lodge a traffic accident report.

My daughter who was my passenger, was injured from the said accident. Ambulance then came to scene and conveyed her to Raffles Hospital.

I then came to Geylang NPC to lodge a traffic accident report.





**SINGAPORE
POLICE FORCE**



T/20220325/2047

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

5 of 5

Report No. T/20220325/2047

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: G / SGT 2 MUHAMMAD AFIQ BIN MOHAMED KHAIRANI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/03/2022 12:23
Officer In Charge Of Case: TP / GIT / STAFF SGT MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	Classification Of Case:
NP168 	



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SS1Y223P000B Vehicle Registration No: 3JM39887

Name (as shown in NRIC): CHUA NGA PHONG NRIC/FIN/Passport No: S1A61909C

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: 3A KEOW AVE Singapore (466391)

Contact (Tel): _____ Mobile No.: 97688995

Email Address: _____

Date of Accident: 25/03/22 Time of Accident: 0835

Place of Accident: BEST COAST PARKWAY

Insurance Company: QBE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- ADD INQUIRY

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

QBE Insurance (Singapore) Pte Ltd
 Part of QBE Insurance Group - Unique Entity No. 198401363C
 1 Wallich Street #35-01 Guoco Tower, Singapore 078861
 Tel: 65-6224 6633 Fax: 65-6533 3270
 GST Registration No.: M200644018
 www.qbe.com.sg



Page 1 of 1

Date of issue 14/09/2021

CERTIFICATE OF INSURANCE

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

Certificate No. 2021-V0026816-MVA-R001 Account Name **INSUREDPLUS INSURANCE AGENCY** MCI Type **MX1**

1. Index Mark and Registration Number of Vehicle or Chassis No: **SJM3988T**
2. Name of Policyholder **TONG PECK TING ROSE**
3. Effective date of Commencement of Insurance for the purposes of the Regulations. **01/12/2021**
4. Date of Expiry **19/09/2022**

5. Persons or Classes of persons entitled to drive.*

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.

(b) Any 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 the order of a Court of Law or by reason of any enactment or regulation in that behalf from the driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use.*

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

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

7. Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk 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 provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of
QBE Insurance (Singapore) Pte Ltd

Authorized Signature