

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	17/05/2022 18:24 (SGT)
Date of Accident	14/05/2022 22:01 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP RD OF LOWER DELTA TWDS KAMPUNG BAHRU RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE1340T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG JIL LIAN
NRIC No	SXXXX261G
Email Address	KEVWONG@SINGNET.COM.SG
Mobile Phone No	(Phone) +65-98352355
Alternative Phone No	(Home) +65-98352355

VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	Swift
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1400

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5108695740-02
Cover Note Number	-

DRIVER

Name of Driver	WONG HONG NENG
NRIC No	SXXXX669E

Date Of Birth	12/12/1968
Occupation	Outdoor
Date Of Driving Pass	24/01/2019
Driving experience	3 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81821000
Alt. Phone Number	-
Email Address	KEVWONG@SINGNET.COM.SG
Address	BLK 643 PUNGGOL CENTRAL #11-324
Address complement	-
Postcode	820643
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 - Head to Rear
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?	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	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	With Owner.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5038Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	WONG HONG NENG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	REFER BY POLICE REPORT
Injured person in which vehicle?	SLE1340T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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

A: SLE 1340T
B: JHC 5038Z

Describe Circumstances of the Accident

Please refer to the police report (F/20220515/7035).

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

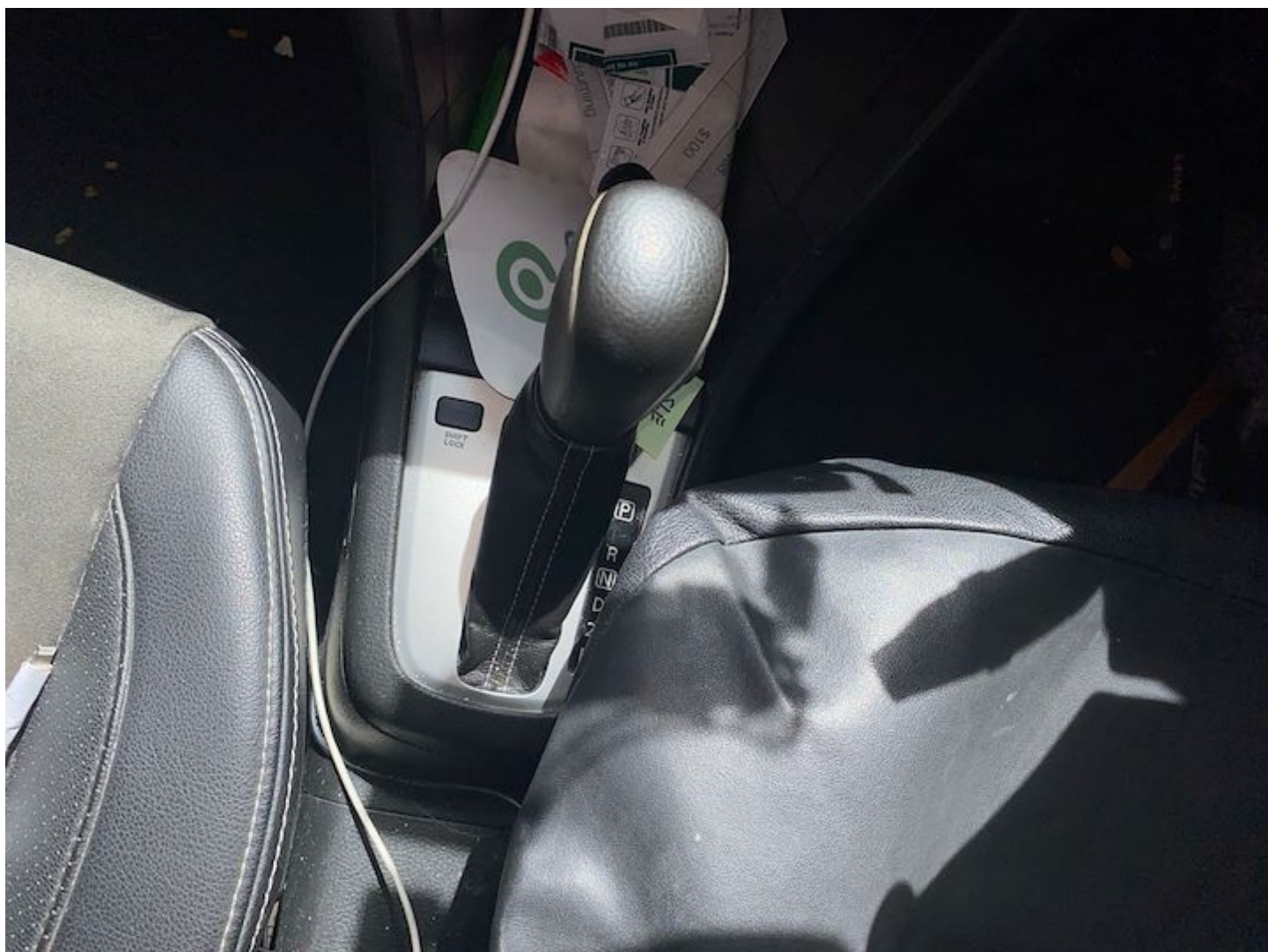
Witnessed by Reporting Centre
Personnel





















**SINGAPORE
POLICE FORCE**



F/20220515/7035

1 of 2

POLICE REPORT (NP299)

Report No. F/20220515/7035

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-2180000

Date/Time Report Made 15/05/2022 19:24	Vide Report No.	Station Diary No.
Name Of Informant WONG HONG NENG	Address 643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643	
ID Type / ID No. NRIC NO / S6846669E	Contact No. Home/Office:	Mobile: 81821000
Nationality SINGAPORE CITIZEN	Email Address KEVWONG@SINGNET.COM.SG	
Occupation Taxi driver	Sex Male	Age 53
	Date of Birth 12/12/1968	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 14/05/2022 22:00 - 14/05/2022 22:05	Location Of Incident 643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643	

Brief details.

Driving from lower delta towards kampung bahru road. Slowed down to a stop at zebra crossing when trans cab taxi (SHC5038Z) crashed into the back of my car (SLE1340T) around 10:04pm.
Exchange driver details and confirm to claim insurance.

At time of accident, I did not feel any issue but the next day, felt slight pain and tightness on shoulder and neck, so I went to Sengkang A&E for checkup. And was given pain killers and 3 days MC

Subjects Involved

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: 15/05/2022 19:24
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



F/20220515/7035

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220515/7035

Victim			
Person Name	WONG HONG NENG		
ID Type	NRIC NO	ID No	S6846669E
Gender	Male	Age	53
Race	Chinese	Language	English
Occupation	Taxi driver	Address	643 PUNGGOL CENTRAL #11-324 SINGAPORE 820643
Mobile No	81821000	Is Informant A Victim?	Yes
Person Name	WONG HONG NENG (Informant)		

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:
15/05/2022 19:24

Classification Of Case:

