



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

SEARCH RESULTS

Our Ref No: GR-19-058927
Date of Request: 15/04/2019

Your Ref No: 18180.2019.MA

K KRISHNA & PARTNERS
101 Cecil Street #24-03/04
Tong Eng Building
Singapore 069533

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 15/01/2019
Place of Accident: CLEMENCEAU AVE
Client Vehicle No: SLP9803P

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

REQ. VEHICLE	ACCIDENT LOCATION	ACCIDENT DATE
SDK6516J	CLEMENCEAU AVE	15/01/2019 17:30

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.

TAX INVOICE

Our Ref No: GR-19-058927

Date of Request: 15/04/2019

Your Ref No: 18180.2019.MA

K KRISHNA & PARTNERS
101 Cecil Street #24-03/04
Tong Eng Building
Singapore 069533

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 15/01/2019

Place of Accident: CLEMENCEAU AVE

Client Vehicle No: SLP9803P

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

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 Report	16/01/2019 16:56
Date Of Accident	15/01/2019 17:50
Exact Location Of Accident	CLEMENCEAU AVE TWDS ORCHARD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP9803P
Insured/Policyholder	
Name Of Registered Owner	ONG YUNZHENG(WANG YUNZHENG)
NRIC No	S8726155G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82982928
Alternative Phone No	OFFICE-82982928
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 3
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100510967-01
Cover Note Number	-
Driver	
Name of Driver	ONG YUNZHENG(WANG YUNZHENG)
NRIC No	S8726155G
Date Of Birth	27/08/1987
Occupation	INDOOR
Date Of Driving Pass	13/03/2015
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82982928
Fax Number	
Contact Number	OFFICE-82982928
EMail Address	NOEMAIL

Address	BLK 471B FERNVALE ST #06-113
Postcode	792471
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
as any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
as there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDK6516J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KANDA SAMY SOUNDARARAJAN
NRIC/Passport Number	S8062087Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

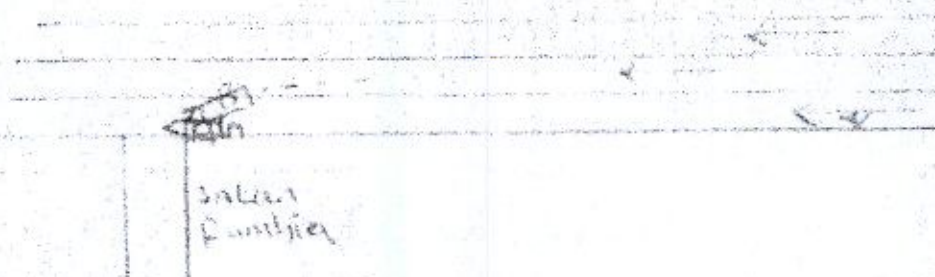
[Signature]

[Signature]

[Signature]

Accident Sketch Plan

A SLP 9503P
B SDR 6516J



On 15 January 19, at approximately 17:30 hrs, I was driving my vehicle SLP 9503P along Clontarf Avenue towards Enniscorthy. I was driving in the extreme left lane. As I was driving, a motorist informed me, I saw a vehicle SDR 6516J signalling left. I immediately released my accelerator expecting vehicle SDR 6516J to change lane and move on. However, to my shock, the vehicle started to slow down as it moved into my lane, and almost stopping between 2 lanes. By then the distance was too close for me to avoid this accident. Upon changing, the vehicle driver of SDR 6516J claimed that actually he moved to turn right into Salmon Family. I was totally not at fault in this accident as the vehicle SDR 6516J should not have changed lane in this manner, and also not to turn into Salmon Family. If he had changed lane in a normal manner, the accident would not have happened.

[Handwritten signatures]



Licence Number: **S8726155G**

Name:

**ONG YUNZHENG
(WANG YUNZHENG)**

Birth Date: **27 Aug 1987**

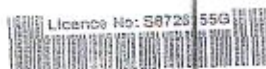
Issue Date: **13 Mar 2015**



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor Cars < 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg	13 Mar 2015

NP 428A



IDENTITY CARD NO. **S8726155G**



**ONG YUNZHENG
(WANG YUNZHENG)**

王云政

Race:

CHINESE

Date of birth:

27-08-1987

Country/Place of birth:

SINGAPORE

Sex:

M



NRIC No. **S8726155G**



Date of issue:

24-08-2018

Address:

**APT BLK 471B FERNVALE STREET
#06-113
SINGAPORE 792471**

6007456

Name of Policyholder : Ong Yunzheng (Wang Yunzheng)
Period of Insurance : 23 Jun 2018 To 22 Jun 2019
Engine No. : P520446486
Chassis No. : JM8BN22A8H0154500

Vehicle No. : SLP9803P
Policy No. : 2100510967-01
Endorsement No. :
Issued Date : 19 Jun 2018

ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV
Engine Capacity/Tonnage : 1,496.00 CC
Driver Restriction : NA

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2017
Insuring with COE/PAFF : Yes

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/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.
You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" ("IDEX") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 30 years old and above

Limitation as to use* :

only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial, testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ong Yunzheng (Wang Yunzheng) - \$600 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

is Eurokars Pte Ltd Add: 5 Ubi Close, Singapore 408605 63068999

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.


IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OCBC Bank Ltd

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503599190

ARF (AP) PTE LTD - MAZDA
7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
SINGAPORE 069111
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

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GST Registration No: M400017735

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TAX INVOICE

Our Ref No: GR-19-058935

Date of Request: 15/04/2019

Your Ref No: 18180.2019.MA

K KRISHNA & PARTNERS
101 Cecil Street #24-03/04
Tong Eng Building
Singapore 069533

Dear Sir/Madam,

Date of Accident: 15/01/2019

Vehicle No: SLP9803P

Place of Accident: CLEMENCEAU AVE TWDS ORCHARD

Involving Vehicle No: SDK6516J

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SDK6516J	CLEMENCEAU AVE TWDS ORCHARD	14.00	1	13.08
Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque

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.
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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 Report	18/01/2019 12:03
Date Of Accident	15/01/2019 17:30
Exact Location Of Accident	CLEMENCEAU AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDK6516J
Insured/Policyholder	
Name Of Registered Owner	KANDA SAMY SOUNDARARAJAN
Vehicle Particulars	
Manufacturer	MAZDA
Model	323
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5089314693-01
Cover Note Number	

Driver

Name of Driver	KANDA SAMY SOUNDARARAJAN
NRIC No	S8062087Z
Address	BLK 297 YISHUN STREET 20 #03-71

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

Circumstances of Accident

REFER 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

SLP9803P

Vehicle Make/Model/Colour

Name of Driver

ONG YUNZHENG

Insurance Company Name

SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodgment 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:

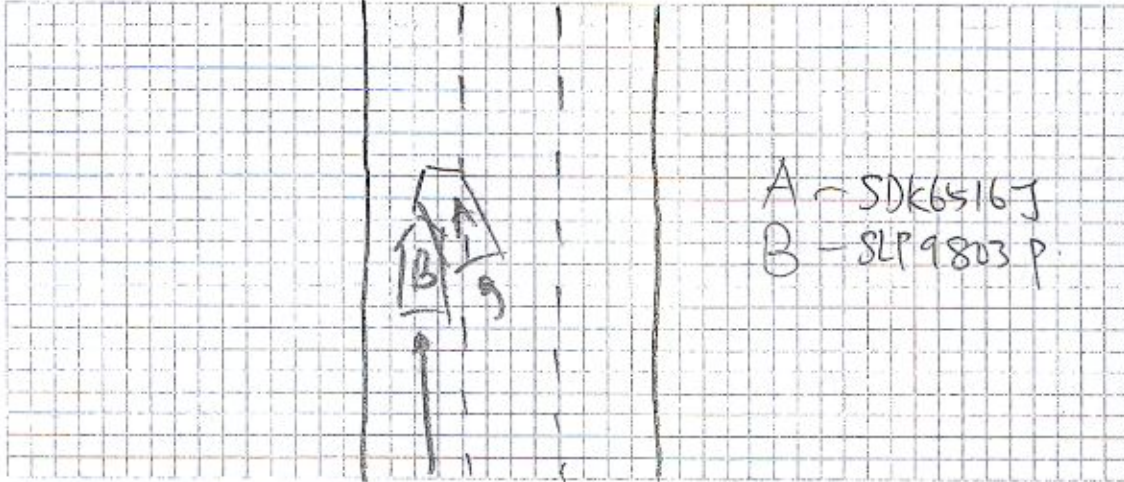
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am along Clemenceau Ave was in the middle lane & signal left wanted to change lane & seen no vehicle so move slowly suddenly vehicle B come from behind with fast speed hit my vehicle. we wanted settle privately but yesterday evening he told me he made report so I submitted report my side.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

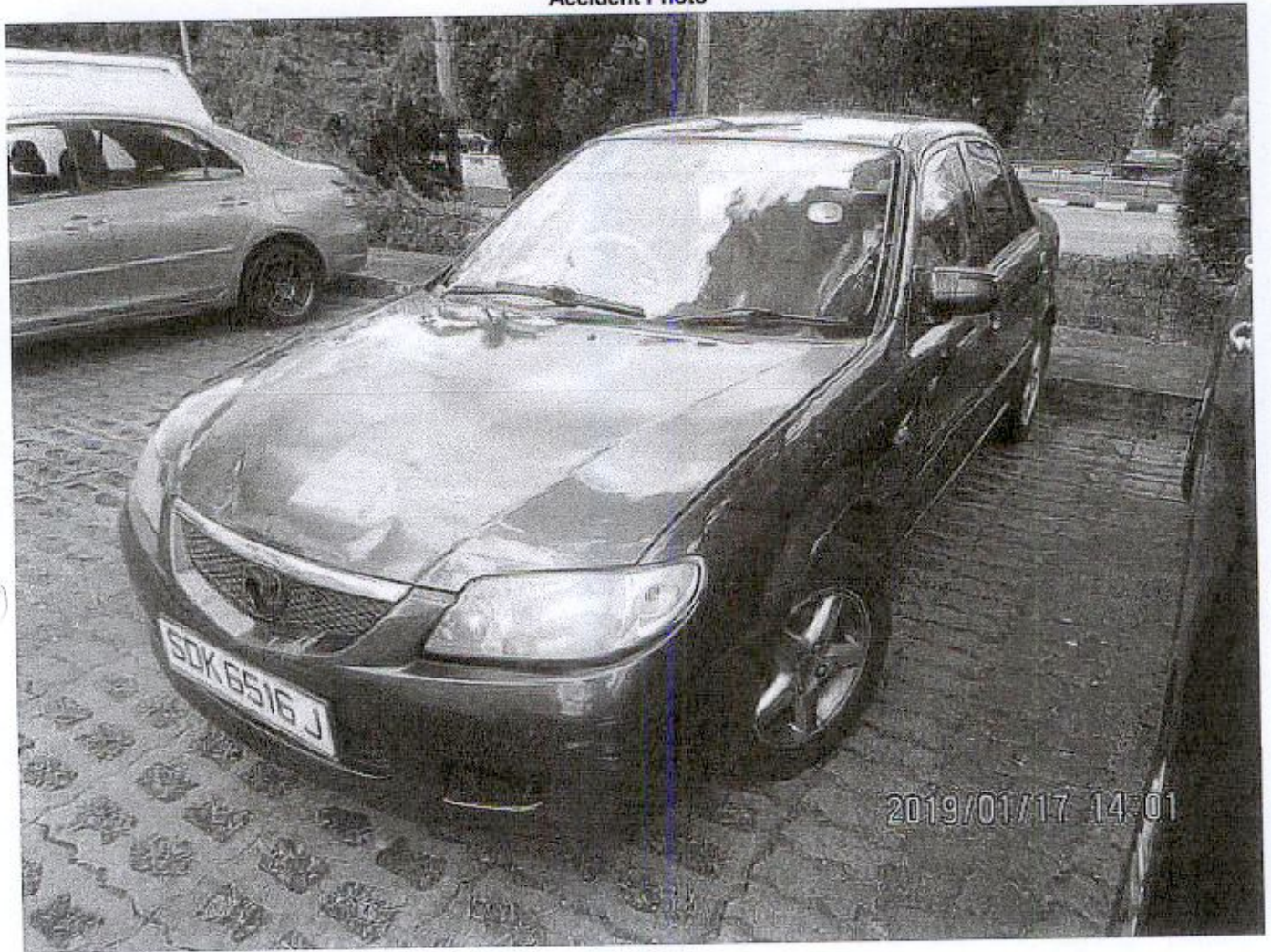
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

cat 441/42 - SketchPlanForma_V3

Accident Photo



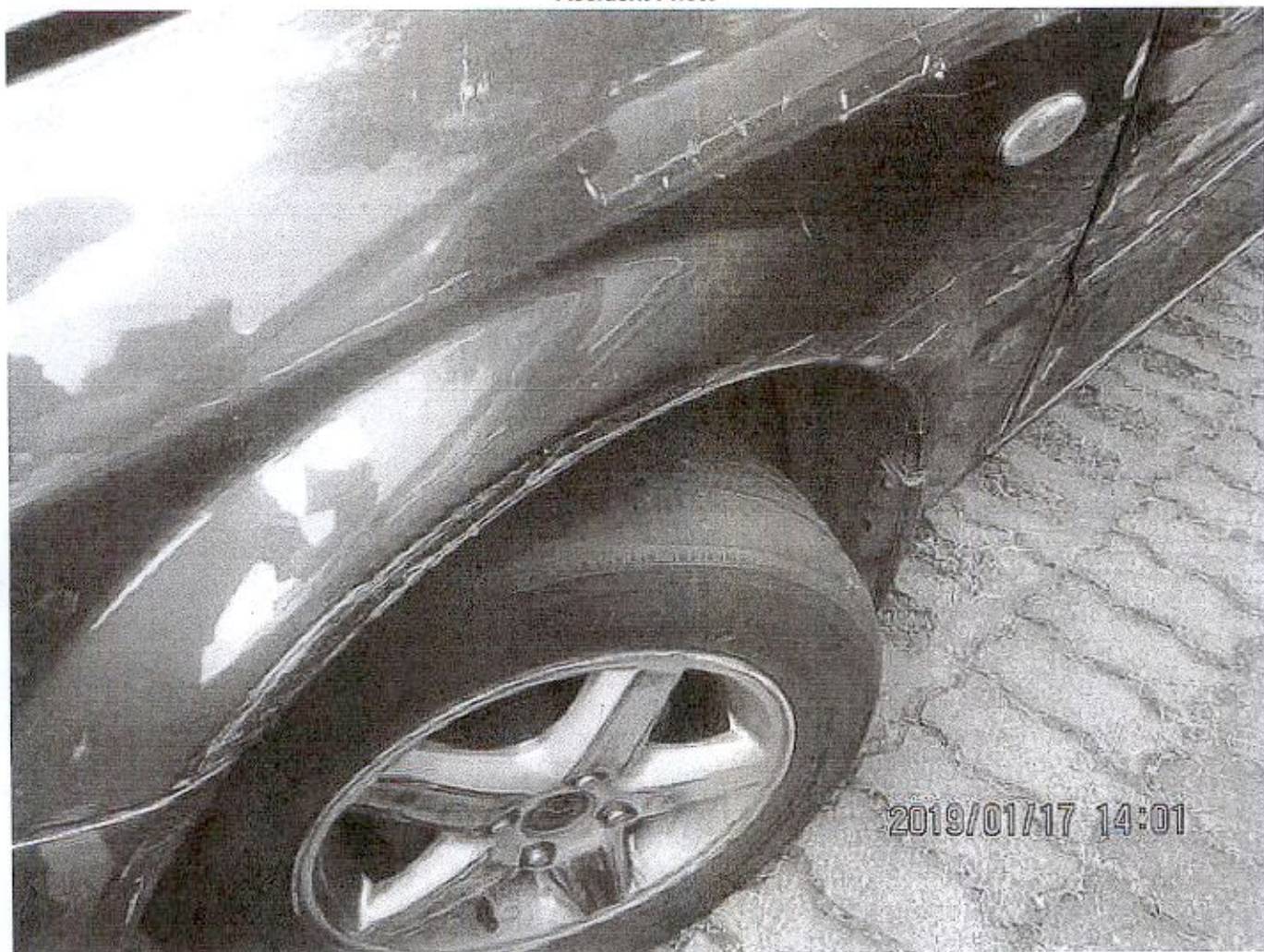
Accident Photo



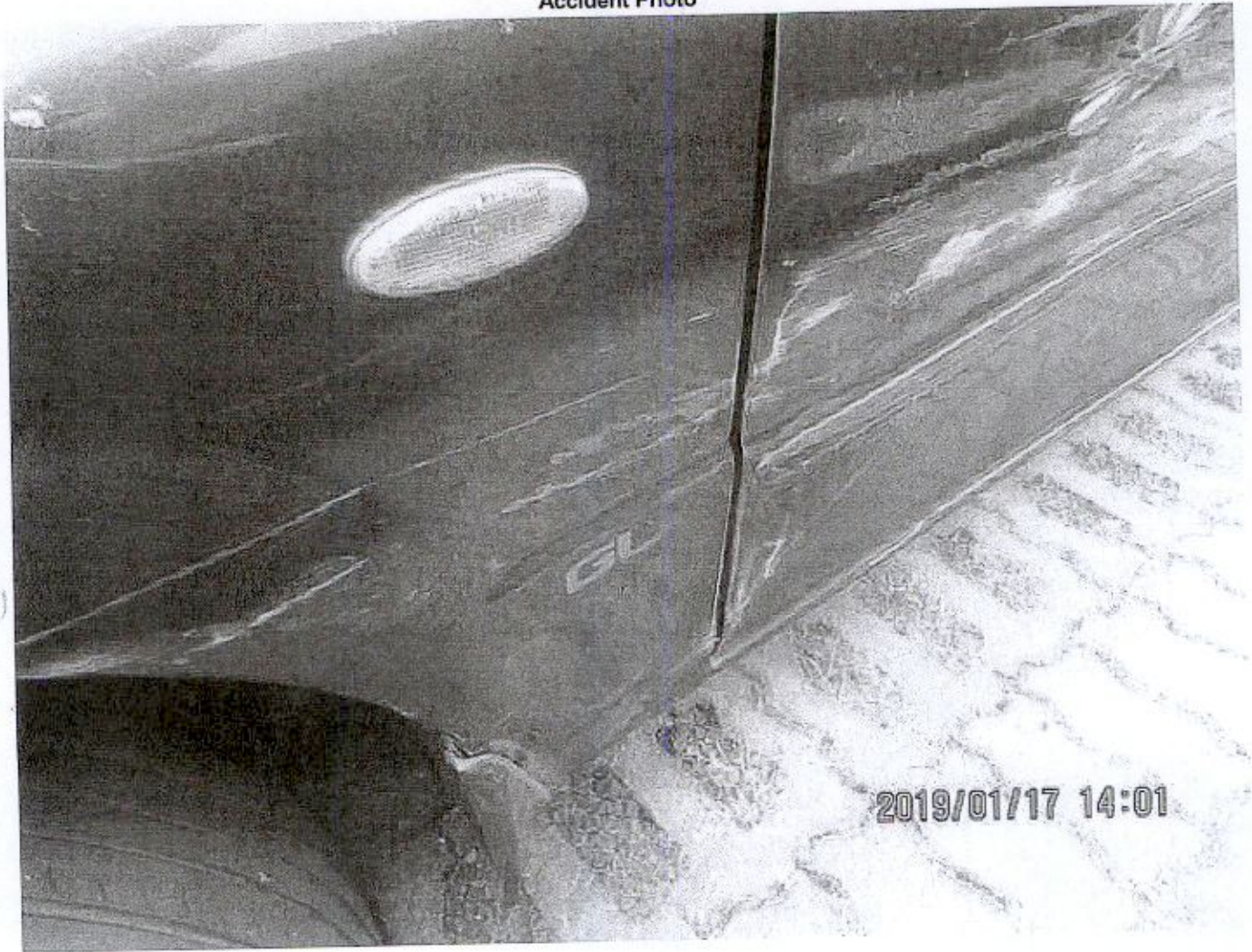
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Enquire Vehicle & Owner Information (Vehicle No. SDK6516J As At 15 Feb 2019 / 17:50:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident
Law Firm Case No.: 18180.2019.MA

Current Owner Details

Owner ID Type: Singapore NRIC
Owner ID: S8062087Z
Owner Name: KANDA SAMY SOUNDARARAJAN
Registered Address Type: HDB / HUDC
Registered Block/House No.: 297
Registered Street Name: YISHUN STREET 20
Registered Unit No.: # 03 - 71
Registered Building Name: -
Registered Postal Code: 760297
Current Vehicle Details

Vehicle No.: SDK6516J
Make Description/Model: MAZDA / 323 S M ABS
Insurance Company Name: NTUC INCOME INS CO-OP LTD



Thank you

Krishnamoorthi S/o Kolanthaveloo has successfully logged out.

Your last login date and time was 15 Apr 2019, 15:51:09.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No.]]	Asset Type	Asset ID	Asset Owner ID	Transaction Type	Transaction Amount(\$\$)	Log Date/Time
1	Vehicle	SDK6516J	-	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	15 Apr 2019 / 15: