SS2X228T0002 / SME MOTOR PTE LTD ENTRY DATE & TIME: 29/08/2022 13:30 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (29/08/2022 13:30 (SGT))



# 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 Actual Driver
  3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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 Reported by Date of Accident ract Location of Accident Additional Location Information Country/State of Loss

29/08/2022 13:30 (SGT) Both 28/08/2022 01:00 (SGT) Clemenceau Ave, Singapore JUNCTION RIVER VALLEY TWDS CTE Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SLE7803K

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No **Email Address** 

Mobile Phone No

Alternative Phone No

Nο

SEAH MONG HENG

SXXXX422B

SEAHMONGHENG@GMAIL.COM

(Phone) +65-96778357

VEHICLE PARTICULARS

Manufacturer Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Hyundai Elantra

Private hire

No - Claiming third party

Private car Auto 1600

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

NTUC Income Insurance Co-operative Ltd 5123531096-01

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

SEAH MONG HENG SXXXX422B 30/07/1961 Outdoor



Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

Translator's name Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

PASSENGER 1

Name

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No. Alt. Police Station Phone No.

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20220829/7004.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

23/01/1981

41 YEARS AND 7 MONTHS

(Phone) +65-96778357

SEAHMONGHENG@GMAIL.COM 119A UPPER PAYA LEBAR RD

534835 Yes

Nο

Collision - Head to Rear

Dry

No

Yes

No

Yes

2

No

AMIT KHAN

Traffic Police

(Phone) +65-65470000

10 Ubi Avenue 3 Singapore 408865

(Fax) +65-65474900

Male

Yes

No

2

Clear

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Yes

Vehicle Registration Number SMT9028C

Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour -

Vehicle CategoryPrivate carName of DriverCHIN VOON HAUNRIC NoSXXXX689E

Nature Of Damage -

Details of property damaged in accident VEHICLE B

No. Of Passenger (Including Driver)

# **INJURED PERSONS DETAILS**

INJURED 1

Name of injured person SEAH MONG HENG

Gender Male
hone No Address Address Complement Post Code Approximate Age Years Old -

Injuries Sustained Injured person in which vehicle?

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

No

## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Physici repairs correctly the detain of the according speed up the plants process
- 2. The Form word he completed by the Policyholder and/or the Authorised Driver
- 3 selfont atom stak ded most times truthful and accurate as possible. Any within movement executation or exhibited no of material tests may allow inscrept companies to repudiate policy flability.
- 4. The land endocoptain 6 of this Sorm by proceeds companies in our arrangement policy follows on transport of the measurement of the solution of the solut
- 5. Any false reporting may be referred to the Police for investigation.
- 6. For liquid will be farwaged by the sessions of the ISIA Reports Managed and Cepture statished by the Godern resource of Association of Nagapore (6: Association)).
- 7. Suitce Dispress of the conduct to the inspect cyclatherety, content to the earliest plant as report at the centre and to appeal on the report between these parameters.
- Consent under the Personal Data Protection Act (PDPA)

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- 4. We insert only weakship and the breed a insertant (Association of Singuistics (GIA)) may be performed to defect to end the allocation and the personal detappersonal information not only the closed and any artificipal content of the ded by mentioper extend to the other information in and disclose and transfer and Personal Information in and disclose and transfer and Personal Information to us insured simple these matrices and transfer and transfer and extended and the accordance to us insured who have matrices and the closed of the accordance to a several with the accordance of the accordance o
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- (6) all modestif who have against sen conjugatively in the procedure of the countries favoyers/law terms, using payment we to colors, use of stops and/or process my Petagoni procedure for every or more of the supple Paragona, and
- ict the Personal Intermetate may/cer be distilled as any of the Insurers society GAN to the Citico burty service employers or dentification, their sweets flaw forms), which may be sited existing of Segrapore, for the course of the above Parpares.
- (d) In Remonstration will also be edited and and tycomparations actors for the durp on at base opterfor avertagistic and management in present and at fature dame.
- ion in the information so collected under (iii) above may be sourced advisored:
  - ii to all invorces ane/or any otrics third parties that assist in evaluating, investigating, tentrolling or managing haddcutarators. Two inforcement and government agencies to reasonably rapping for the purposes stated, or
  - er for complete with requirements shoet any regulations, was or court orders

Pencymone - 5 gratery Sets & Texas . Da voc s Sephatoss Thidrages at and the grading standers

Reporting Centre Presponses's Simulture Name Igain (645-56)

Date 8.1 mp
I hereby authorise SME Motor Pte Ltd to send my
Accident report to my workshop
via email / fax
Signature:

SKETCH PLAN	CIEMOTECON AVENUE	r fiver vall	ry Read towards cre
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Note Please note that you	r insurer may have 14 days time frame	· for you to submit	an Own Damage Claim under
	oficy. Please check your policy for mo		ar orri saraige ciani orde
DECLARATION  All or clay the to regard, part of the control of the			
Policybolows Signature Date & Terrin	Shiver's Signature Of development for each reliable in	Regionles Mannes	, Centre Personni ès Symotae

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Open & Time





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 4 Report No. 1/20220829.7084

REPORT	DE A TRAFFIO	CACCIDENT			
Date/Time Report Made: 29/08/2022 09:45			Vide Report No.:	Station Diary No	
Informa	nt's Partici	ulars			
	f Informant: 10NG HEN		Address: 119A UPPER PAYA LE	BAR ROAD SINGAPORE 534835	
ID Type / ID No.: NRIC NO / S1494422B			Contact No.: Home/Office: Mobile: 96778357		
National SINGAR	lity. PORE CITIZ	EN	Email: seahmongheng@gmail.	.com	
Sex:         Age:         Date of Birth:           Male         61         30/07/1961			Type of Informant: Driver		
Race: Chinese		Language: English	Institution / School Name:		
Occupa PRIVAT	tion. E HIRER		Driving Licence Informa Class:	ition: Date of Expiry:	

Type of	Injury Others	Drink Drive:	Date/Time of Accident:	Type of Locatio
Accident:	00.0.0	No.	28/08/2022 01:00	X Gariottori
Location:				
		NVER VALLEY ROAD TO	3411400012	
Weather:	engle := Negrassa	Road Surface:		Road Speed Limit:
Weather: Clear	типисти такжа такжа (у — — такуун) (жана барайтан атакжа такжа	1		Road Speed Limit:
		Road Surface:		Road Speed Limit: Traffic Volume:
Clear Traffic Flow: Type of Collin		Road Surface: Dry Traffic Control:		THE STATE OF THE S

Details of Ve	ehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLE7803K	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT	Silver		1
SMT9028C	Car				edinantition and established III. Omine for equilibrough images (in many	0

Details of Ve	hicle Insurance		agyan yang and NSB (CE) and and an analysis and an analysis and an analysis (NSB and An	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No. 65470000 2 of 4 Report No. T/20220829/7004

#### CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLE7803K	NTUC Income Insurance Co-Operative	5123531096	06/09/2021	05/09/2022
	Limited	1	ŧ	To see all to

Details of Perso	n Involved			
Any Pedestrian Ir	rvolved: No			
No. of Pedestrian	is Injured: NIL	Use of Pe	destrian Cros	ssing: NA
Passenger				
Name	AMIT KHAN		ID No.	NL
Related Vehicle	SLE7803K (Car)		Contact No	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL	\$
No. of Days gran	ted Medical Leave   NIL	Degree o	NIL	CONTRACTOR
Driver				***
Name	SEAH MONG HENG		ID No.	S1494422B
Related Vehicle	SLE7803K (Car)		Contact No	96778357
Hospital/Clinic	CARE MEDICAL CLINIC		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	29/08/2022	Date	NIL	
No. of Days gran	ted Medical Leave 05	Degree o	f Ser	ious

## Brief Details.

ON 28/08/2022 AT ABOUT 0100 HOURS AT BEFORE JUNCTION OF CLEMENCEAU AVENUE O RIVER VALLEY ROAD TOWARDS CTE. I WAS TRAVELLING ON THE EXTREME RIGHT LANE OF CLEMENCEAU AVENUE TOWARDS RIVER VALLEY ROAD AND MY FRONT VEHICLE SLOW DOWN AND CAME TO A COMPLETE STOP DUE TO RED TRAFFIC LIGHT, HENCE I FOLLOW SUIT. MOMENTS LATER, SUDDENLY I HEARD A LOUD BANG AND WHEN I ALIGHT, I REALISE IT WAS VEHICLE (B) WHO HIT ONTO THE REAR PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE, I HAVE 1 PASSENGER ONBOARD MY VEHICLE AND I WENT TO CONSULT A DOCTOR AND WAS GIVEN 05 DAYS MC FOR MY INJURY.

- (A) SLE7803K
- (B) SMT9028C

### POLICE REPORT #3



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



3 of 4

Report No. 1/20220829/7084

CONTINUATION OF REPORT



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



4 of 4 Report No. T/20/220829/7004

CONTINUATION OF REPORT

Sketch	Plan
Onoton	1 104111

Informant is not able to provide sketch

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 29/08/2022 09:45
Classification Of Case: