

04 April 2023

ERGO INSURANCE PTE LTD
5 TEMASEK BOULEVARD
#04-01 SUNTEC TOWER FIVE
SINGAPORE 038985]

Our Reference: INS/TL/ZHR/0097/2023

Attn: Claim Manager
Motor Claims Department

Dear Sir,

Propose beyond economical repair for SNA3263S

Vehicle Make & Model : NOTE 1.2L E-POWER PREMIUM
Registration Number : SNA3263S
Policy Number : DMPG22006527
Engine Number : HR12285847K
Chassis Number : JN1FAAE13Z0900157
Mth / Year : 06/2021

The above mention vehicle was towed into our workshop on 31 Mac 2023 as a result of an accident.


The damage to the vehicle have been noticed to be extensive and would be considered as beyond economical repair.

In view of the comparatively high cost that will be involved to have the vehicle repaired to its road worthiness and the safety aspect, we would recommend that this vehicle be written off as total loss.

Estimated cost of repair is about \$75,000.00/-

Your early reply and confirmation would be appreciated.

Yours faithfully,


M. Zuhri
Motor Claims Department
Tan Chong Motor Sales Pte Ltd
Cc: Surveyor / Insured



Tan Chong 97445749
5/4/23 1130
Not Approve, Revert.
Ex: fba

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 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	01/04/2023 11:48 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	31/03/2023 18:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNA3263S
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH ZHI JUN , MARCUS
NRIC No	SXXXX688H
Email Address	marcus.gohzj@gmail.com
Mobile Phone No	(Phone) +65-96608435
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Note
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	1198

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMG22006527

DRIVER

Name of Driver	GOH ZHI JUN , MARCUS
NRIC No	SXXXX688H
Date Of Birth	16/03/1986
Occupation	Indoor

Date Of Driving Pass	18/12/2006
Driving experience	16 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96608435
Alt. Phone Number	-
Email Address	marcus.gohzj@gmail.com
Address	123 SIMEI ST 1 #01-414
Address complement	-
Postcode	520123
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	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 31 MARCH 2023 AT ABOUT 1820HRS I WAS DRIVING VEHICLE A SNA3263S ALONG PIE TOWARDS TUAS AND WANTED TO EXIT TO SIMEI ROAD WITH ONE PASSENGER. AS I WAS EXITING, I EXPERIENCED A SUDDEN BOUT OF CONSTANT AND HARD COUGH, CAUSING ME TO LOSE CONSCIOUSNESS FOR A MOMENT. THE NEXT MOMENT I REALISE I HAD HIT THE SIDE BARRIER OF THE ROAD. NO OTHER VEHICLES WERE INVOLVED. NO INJURIES SUSTAINED ON THE SPOT. ONLY ABRASIONS FOR MY SON AND ME. TRAFFIC POLICE ASSESS NO DAMAGE AND NO INVESTIGATION WILL BE CARRIED OUT. SUBSEQUENTLY, I WAS ASSISTED BY EMAS TO TOW CAR TO CARPARK AT 9006 TAMPINES.

AS PER POLICE REPORT No.G/20230401/7016

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number WALL
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category NA / Unknown
Name of Driver -
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident CONCRETE WALL
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person GOH ZHI JUN , MARCUS
Gender Male
Phone No (Phone) +65-96608435
Address 123 SIMEI ST 1 #01-414
Address Complement -
Post Code 520123
Approximate Age Years Old 37
Injuries Sustained ABRASION
4DAYS MC
SNA3263S
Injured person in which vehicle?
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person SON
Gender Male
Phone No -
Address 123 SIMEI ST 1 #01-414
Address Complement -
Post Code 520123
Approximate Age Years Old -
Injuries Sustained ABRASION
Injured person in which vehicle? SNA3263S
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorized Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful 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. The 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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.

FLASH ACCIDENT
REPORTING OFFICER

FRO BALAJI

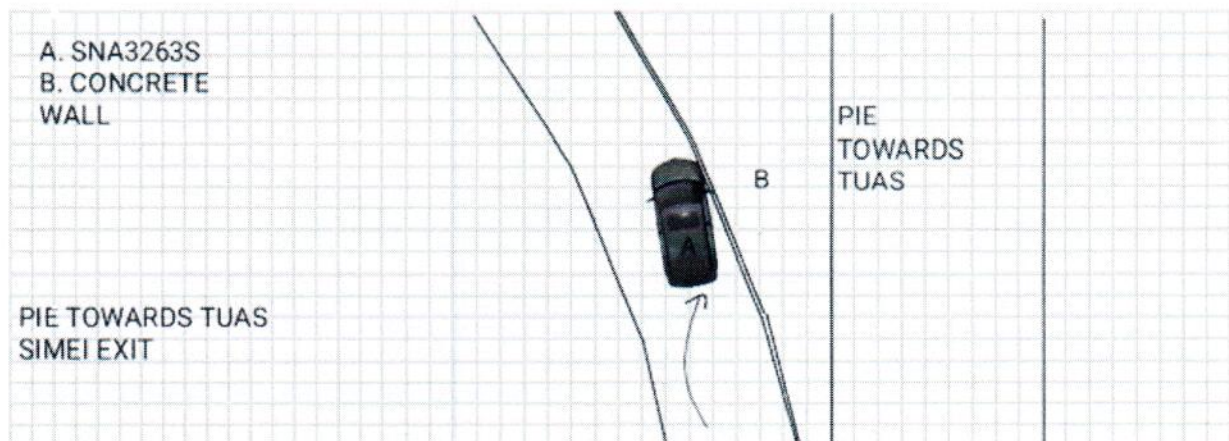
Policyholder's Signature / Date & Time

Sketch Plan

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

31 MARCH 2025HRS

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

ON 31 MARCH 2023 AT ABOUT 1820HRS I WAS DRIVING VEHICLE A SNA3263S ALONG PIE TOWARDS TUAS AND WANTED TO EXIT TO SIMEI ROAD WITH ONE PASSENGER. AS I WAS EXITING, I EXPERIENCED A SUDDEN BOUT OF CONSTANT AND HARD COUGH, CAUSING ME TO LOSE CONSCIOUSNESS FOR A MOMENT. THE NEXT MOMENT I REALISE I HAD HIT THE SIDE BARRIER OF THE ROAD. NO OTHER VEHICLES WERE INVOLVED. NO INJURIES SUSTAINED ON THE SPOT. ONLY ABRASIONS FOR MY SON AND ME. TRAFFIC POLICE ASSESS NO DAMAGE AND NO INVESTIGATION WILL BE CARRIED OUT. SUBSEQUENTLY, I WAS ASSISTED BY EMAS TO TOW CAR TO CARPARK AT 9006 TAMPINES.

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

31 MARCH 2023

FLASH ACCIDENT
REPORTING OFFICER

FRO BALAJI



Witnessed by Reporting Centre
Personnel























**SINGAPORE
POLICE FORCE**



G/20230401/7016

1 of 2

POLICE REPORT (NP299)

Report No. G/20230401/7016

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2440000

Date/Time Report Made 01/04/2023 10:38	Vide Report No.	Station Diary No.
Name Of Informant GOH ZHI JUN, MARCUS	Address 123 SIMEI STREET 1 #01-414 SINGAPORE 520123	
ID Type / ID No. NRIC NO / S8607688H	Contact No. Home/Office:	Mobile: 96608435
Nationality SINGAPORE CITIZEN	Email Address MARCUS GOHZJ@GMAIL.COM	
Occupation Other services managers	Sex Male	Age 37
Institution/School Name	Date of Birth 16/03/1986	Race Chinese
Date/Time Of Incident 31/03/2023 18:15 - 31/03/2023 18:20	Location Of Incident 123 SIMEI STREET 1 #01-414 SINGAPORE 520123	

Brief details.

On 31 March 2023, I was driving my car, one blue colored Nissan Note E-Power of registration number SNA3263S, exiting into Simei Road from PIE towards Tuas. Upon exiting, I suddenly lost control of the car and hit the concrete barricade along the road. My son (Goh Qiong Darius of NRIC: T1718172B) who was sitting at the rear left side was with me. Both of us were observed to not suffer injuries except for abrasions.

Traffic Police came and after assessing the situation, the Traffic Police informed me that as there was no damage to any public property and no other third party involved, Traffic Police will not be opening any

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: 01/04/2023 10:38
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20230401/7016

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230401/7016

investigation. He advised me to exchange contact with the contractor of the barricade in case the contractor would want to claim against me. I then proceeded to exchange the contact.

An ambulance subsequently came and both my son and I were assessed by the medic officers to suffer abrasions and would not necessarily need to be conveyed to hospital immediately. I then decided not to be conveyed to the hospital and was advised that I could consult a private clinic thereafter.

My car was subsequently towed away from the scene of accident and an insurance report had been lodged with my motor insurer, Ergo Insurance. I was advised by the insurer that I would need to lodge a police report for proper insurance claim procedure in the event that I was given at least 3 days of medical leave.

Hence, after seeing a doctor on 1 April 2023 at 0900hrs, I was given medication for my abrasions and muscle strain. I was then prescribed with a 4-day MC until 4 April 2023. Thereafter, I proceeded to lodge this Police report.

That is all.

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: 01/04/2023 10:38
Officer In-Charge Of Case:	Classification Of Case:



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: SJ0G2341000H Vehicle Registration No: SNA3263S

Name (as shown in NRIC): GOH ZHI JUN, MARCUS NRIC/FIN/Passport No: SXXXX688H

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

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 98608435

Email Address: _____

Date of Accident: 31/03/2023 Time of Accident: 18:20

Place of Accident: PIE, Singapore

Insurance Company: ERGO Insurance Pte. Ltd.

(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:

ATTACHED POLICE REPORT

Policyholder / Driver's Signature

Date: 01/04/2023

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date: 01.04.2023

CSAP/9AC Abbreviations Page