SS2X236O0003 / SME MOTOR PTE LTD ENTRY DATE & TIME: 24/06/2023 11:04 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (24/06/2023 11:04 (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.

- 4. The issue and acceptance of this is form by instrained 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 24/06/2023 11:04 (SGT) Reported by **Actual Driver** Date of Accident 22/06/2023 21:15 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information TWDS CHANGI BEDOK NORTH AVE 3 EXIT Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Honda

Vehicle Registration Number SMG8910E

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner FENG CHENG LEASING Company Reg No 53390671K Email Address LINATJANDRA@HOTMAIL.COM Mobile Phone No (Phone) +65-97574159 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model Fit 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 No - Claiming third party your vehicle? Vehicle Category Private car

Transmission Auto CC 1500

#### **INSURANCE COMPANY**

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00004852300

#### DRIVER

Name of Driver CHENG TZE HENG NRIC No S8263851B Date Of Birth 06/06/1982 Occupation Indoor

Date Of Driving Pass 09/11/2009 Driving experience 13 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-97574159 Alt. Phone Number Email Address LINATJANDRA@HOTMAIL.COM Address BLK 227A SUMANG LANE #05-252 Address complement Postcode 821227 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **OWNER** Does Driver Own Other Vehicles? Nο 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 Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name CHENG YI EN RENEE Gender PASSENGER 2 Name CHENG YUN ZHEN REBECCA Gender PASSENGER 3 Name LINA TJANRA Gender Female PASSENGER 4 Name YANTI Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Bedok South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002448999 Alt. Police Station Phone No (Fax) +65-62446558 Police Station Address 20 Chai Chee Drive Singapore 469045 Was notice of intended Prosecution given? No

If yes, against whom?

#### REFER TO POLICE REPORT: T/20230623/2073.

#### 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 SGE1845M Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver AW KIM GEOK NRIC No S1560482D 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)

## **INJURED PERSONS DETAILS**

#### **INJURED 1**

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat helts worn?	CHENG YI EN RENEE Female SMG8910E
Were seat belts worn? Was this injured conveyed to hospital by ambulance?	Yes No

#### INJURED 2

Name of injured person Gender Phone No Address	CHENG YUN ZHEN REBECCA Female -
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMG8910E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## INJURED 3

Name of injured person	LINA TJANRA
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Codo	

Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	- SMG8910E Yes No
INJURED 4	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	YANTI Female SMG8910E Yes No
INJURED 5	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### 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.
- 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.
- Any false reporting may be referred to the Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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' tawyers/taw 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.



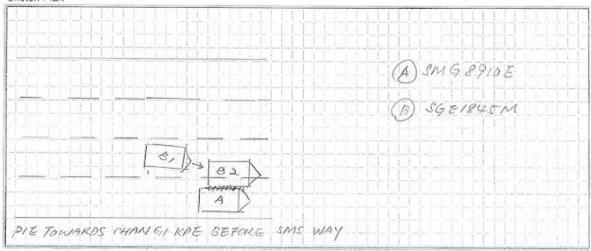
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel (Name as in NRIC(ID card)

## Sketch Plan



4

Describe Circumstance of the Accident									
RZFER	70	THE	POLICE	REPORT	REF	: +/-	00306	23/207	13
					0.6756.0000				
	Tilland								

Declaration

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



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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2



















T/20230623/2073

Police Station Of Origin: Bedok South NPP 2 of 4 Report No. T/20230623/2073

20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999

CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No						
No. of Pedestria	No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Passenger						2.9	
Name	CHENG YI EN RENEE		11	ID No.		T2010206Z	
Related Vehicle	SMG8910E (Car)		C	Contact No.		NIL	
Hospital/Clinic	INTEMEDICAL KOVAN			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	22/06/2023		Date Dischar			/2023	
No. of Days gran	ted Medical Leave (	07	Degree of In				
Passenger							
Name	CHENG YUN ZHEN REBECCA			ID No.		T1241663B	
Related Vehicle	SMG8910E (Car) ,			Contact No.		NIL	
Hospital/Clinic	INTEMEDICAL KOVAN			Class Driving icenc Expiry	9	Class: NIL Date of Expiry: NIL	
Date Treatment	22/06/2023		Date Dischar			/2023	
No. of Days grant	ed Medical Leave 0	)7		egree of Injury   Slight			
Driver			Name of the second	Con- of man	record and Marana		
Name	CHENG TZE HENG		10	ID No.		S8263851B	
Related Vehicle	SMG8910E (Car)			Contact No.		91259502	
Hospital/Clinic	RAFFLESMEDICAL			class Driving icenc xpiry	9	Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	23/06/2023	100000000000000000000000000000000000000	Date Dischar	-		/2023	
The second secon		)3	Degree of Inj				





Police Station Of Origin: Bedok South NPP 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999 3 of 4 Report No. T/20230623/2073

CONTINUATION OF REPORT

Passenger					CHILDREN CONTROL OF THE CONTROL OF T
Name	LINA TJANDRA				S8075842A
Related Vehicle	SMG8910E (Car)			ct No.	97574159
Hospital/Clinic	RAFFLESMEDICAL			of g ce & Date	Class: NIL Date of Expiry: NIL
Date Treatment	23/06/2023	charge 23/06/2023		/2023	
No. of Days gran	ted Medical Leave 03	Degree of	Injury	Slight	
Passenger					
Name	YANTI		ID No.		G1299314K
Related Vehicle	SMG8910E (Car)	187	Conta	ct No.	97574159
Hospital/Clinic	INTEMEDICAL KOVAN		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	22/06/2023	Date Disc	harge	22/06	/2023
No. of Days grant	ed Medical Leave 07	Degree of		Slight	

## Brief Details.

I am driving on the 1st lane when suddenly a car swerved into our lane from the 3rd lane. As a result the said car's right side, driver door hit onto our front left bumper. I immediately pressed on the brake and my car's airbag was also deployed. After the incident, I got out from our car to check if any of my passengers were injured and also to see the damage to the car. I would like to state that my car do not have an in-car CCTV. Fortunately, the vehicle behind us had provided us the footage of the accident. My passengers and me suffered bodily pain and bruises but none had any cuts.



T/20230623/2073

Police Station Of Origin: Bedok South NPP 20 Chai Chee Drive SINGAPORE 469045 Tel No: 1800-2448999 4 of 4 Report No. T/20230623/2073

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SI MOHAMED RIDZAL BIN
ABDUL RAHIM

Signature Of Informant:

Date/Time:
23/06/2023 16:56

Officer In Charge Of Case:
TP / AEIT /
SR STAFF SGT LEE GUANG HUI
Contact No.: 65476204

Signature Of Informant:

Classification Of Case:

Classification Of Case:



## 中国太平保险 (新加坡) 有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Motor Private Car

CERTIFICATE OF INSURANCE Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1900 Road Transport Act, 1987 (Metayota) Motor Vehicles (Third-Party Risks) Rules, 1999 (Metaysia)

AN0509A Cov. Type:C

MX4F

CERTIFICATE No.

DMPCSNW00004852300

Engine No.: LEB1439090 Cha. No.:GP51332619

Index Mark and Registration Number of Vehicle

SMG8910E

2. Name of Policy Holder

FENG CHENG LEASING

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, (00:00:00) Ordinance or Enactment

02/01/2023

Named Drivers Ex Sect. I\*

\$\$500.00

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

01/01/2024

Ex: Sect. 1 - Age <= 25 Ex Sect. 1 - Age >= 26

\$\$3,000.00 \$\$500.00

\* Age as at date of accident

EX ON WINDSCREEN.

\$\$100.00

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

Any person who is driving on the Policyholder's order or with their 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 order of a Court of Law or by reason of any anactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitetions as to user\*

Use for social, demestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Third) will be doubted. One time Valvier of Excess for the first \$8500 will apply to the insured and Named Drivers in the event of Own Damage Claim at our Authorized Workshope for each Policy Year.

HIRE PURCHASE CO.: SPEEDO CAPITAL PTE LTD

"Limitations randered inoparative by Section 8 of the Notor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1967 (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 Motor Vehicles (Third-Party Rists and Companisation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Places see reverse

For CHIMA TAIPING INSURANCE (SINGAFORE) PTE, LTD.

Authorised Signatory

Issued By: NITA PTE LTD Authorised Officer

@6222 1033

@www.sg.cntaiping.com

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 3 Anson Road #16-00 Springleaf Tower Singapore 079909

#### ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)



Whilst every endeavor is made to ensure that information provided is updated and correct, ACRA disclaims any liability for any damage or loss that may be caused as a result of any error of omission.

## **Business Profile (Business) of FENG CHENG LEASING** (53390671K)

Date: 24 Jun 2023

Secondary Activity

Secondary User-Described

Activity

Particulars of Authorised Representative(s) 1

Name

Identification

Nationality/ Citizenship

Date of

Appointment

Source of Address

Number Address

## Existing Sole-Proprietor(s) / Partner(s)

Name Identification Number Address		Nationality <sup>2</sup> / Place of origin <sup>3</sup>	Position	Date of Appointment	Source of Address	
CHENG TZE HENG	\$8263851B	MALAYSIAN	OWNER	02 DEC 2018	ACRA	

227A SUMANG LANE #05-252 THE VERANDAH @ MATILDA SINGAPORE (821227)

Verify Document Instantly

Check if this document is issued by ACRA.

https://www.acratrustbar.gov.sg/v erify/vHBvUKX8PE



Page 2 of 4

Authorised Representative was formerly known as Manager before 03 Jan 2016 for business firms

<sup>2</sup> Includes nationality and citizenship

<sup>3</sup> Includes place of incorporation, place of origin and place of registration