

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	19/06/2023 14:59 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/06/2023 13:53 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB9695J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YONG AH HENG
NRIC No	SXXXX908D
Email Address	ahhengy@gmail.com
Mobile Phone No	(Phone) +65-97118289
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Jetta
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 car
Transmission	Auto
CC	1390

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00273362201

DRIVER

Name of Driver	YONG AH HENG
NRIC No	SXXXX908D
Date Of Birth	12/01/1962
Occupation	Outdoor

Date Of Driving Pass	14/01/1982
Driving experience	41 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97118289
Alt. Phone Number	-
Email Address	ahhengy@gmail.com
Address	BLK 183B WOODLANDS ST 13 #17-623
Address complement	-
Postcode	732183
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
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	NA
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Panjang North Neighbourhood Police Post
Police Station Address	Blk 27 Marsiling Drive Singapore 730027
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	YP4250M
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1E

R SN

AN0478A

Cov. Type: C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMPCSNA00273362201	Engine No.: CAXE95083	Cha. No.: VWWZZ16ZFM001605
1. Index Mark and Registration Number of Vehicle	SNB9695J	AUTOSAFE	*****
2. Name of Policy Holder	YONG AH HENG		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	21/12/2022 (00:00:00)	Named Drivers Ex Sect. I	\$5500.00
4. Date of Expiry of Insurance	20/12/2023	Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	\$33,000.00
		Ex Sect. I - Age >= 26	\$5500.00
		* Age as at date of accident	
		EX ON WINDSCREEN	\$5100.00
5. Persons 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 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 enactment or regulation in that behalf from driving the Motor Vehicle.			
6. Limitations as to use:*			
Use for social, domestic 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/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (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 Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Agent Assistance (IH)
Hotline: 6287 7077

Issued By: Wang Chong Yu
Authorised Officer

Authorised Signatory

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

6389 6111

6222 1033

www.sg.cntaiping.com

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

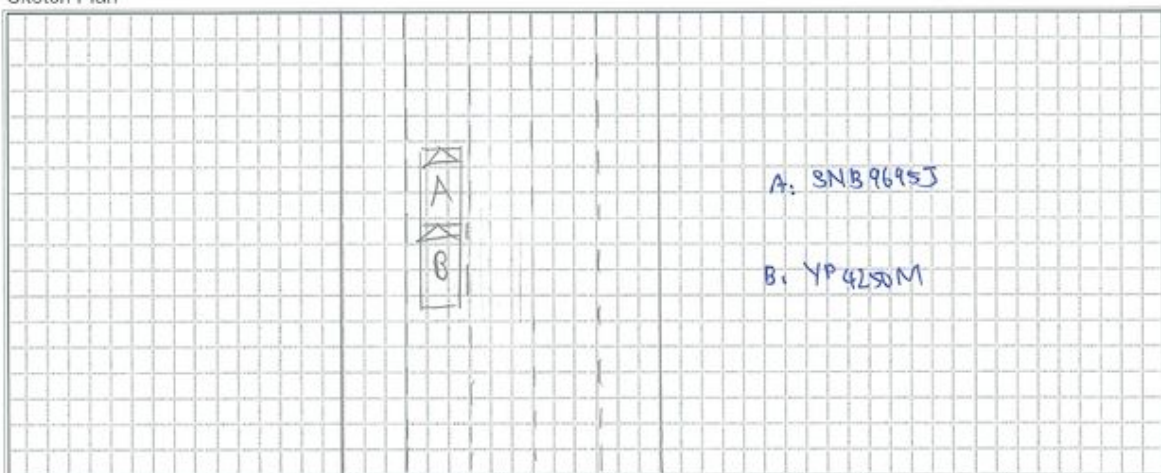
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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


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


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

Sketch Plan



The sketch plan is a grid with handwritten labels. On the left side, there are two boxes labeled 'A' and 'B'. To the right of these boxes, there are two lines of text: 'A: SNB9695J' and 'B: YP4250M'.

vJun2022

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**SINGAPORE
POLICE FORCE**



T/20230619/2042

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

1 of 3
Report No. T/20230619/2042

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/06/2023 12:40	Vide Report No.:	Station Diary No.: 11
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Informant's Particulars

Name of Informant: YONG AH HENG	Address: APT BLK 183B WOODLANDS STREET 13 #17-623 SINGAPORE 732183		
ID Type / ID No.: NRIC NO / S1532908D	Contact No.: Home/Office: Mobile: 97118289		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 61	Date of Birth: 12/01/1962	Type of Informant: Driver
Race: Chinese	Language:		
Occupation: Bus driver	Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/06/2023 13:35	Type of Location: Expressway
Location: PAN-ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SNB9695J	Car	VOLKSWAGO N	Jefta	White	Slightly Damaged	1
YP4250M	Lorry	HINO	XZU710R- HKFMS3	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNB9695J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNA0027336 2201	21/12/2022	20/12/2023



**SINGAPORE
POLICE FORCE**



T/20230619/2042

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

2 of 3

Report No. T/20230619/2042

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YONG AH HENG		ID No. S1532908D
Related Vehicle	SNB9695J (Car)		Contact No. 97118289
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

V1 : SNB9695J

V2 : YP4250M

On 18/06/2023 at 1335hrs, I was driving V1 at PIE Towards Woodlands near Eng Neo Ave Exit for about 40KM/HR as the traffic was heavy at the point of time, the road was slightly wet as the rain stopped earlier. There are 4 lanes in total and the 4th lane is closed as there are tree cutting on going. As i was travelling at the 3rd lane on V1, i observed that there was a car in front which slowly came to a stop which i did as well. Out of sudden, V2 collided slightly onto V1 at the rear. Both V1 and V2 came step out of their vehicle and took photo of the accident. V2's driver contact their boss HP : 87268660 and he handed over the phone to me. I was informed by the boss to claim insurance against them. Thereafter we drove in our separate way and i was told by my insurance to lodged a Police Report regarding this.

I would like to state that i did not ask for V2's particular as his boss agree to go via insurance claim.

There was no one injure at the point of time and no government property involve.

V1 sustain minor dented (Circle Shape and 1 line mark) at the rear of the vehicle below car plate.

V2 sustain a dented and cracks at the front middle and left bumper.



**SINGAPORE
POLICE FORCE**



T/20230619/2042

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

3 of 3

Report No. T/20230619/2042

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
L /
SGT 1 IVEN LIM CHANG HENG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT MUHAMMAD NOOR BIN
ABDUL RAHMAN
Contact No.: 65476219

Signature Of Informant:

Date/Time:
19/06/2023 12:40

Classification Of Case:

NP168



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: SC2H236J0002 Vehicle Registration No: SNB9695J
 Name (as shown in NRIC): YONG AH HENG NRIC/FIN/Passport No: S1532908D
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: BLK 183B WOODLANDS ST 13 #17-623 732183 Singapore ()
 Contact (Tel): 9711 8289 Mobile No.: _____
 Email Address: ahhengy@gmail.com
 Date of Accident: 18/06/2023 Time of Accident: 1353
 Place of Accident: PIE
 Insurance Company: CHINA TAIPING

(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:

TO ATTACH NEW SKETCH PLAN

Policyholder / Actual Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):
Date: