

## 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 .....	28/06/2023 10:32 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	27/06/2023 10:30 (SGT)
Exact Location of Accident .....	TPE, Singapore
Additional Location Information .....	ON TPE TOWARDS CHANGI
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMN4837Z
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	ONG THEAN SHENG KENNETH (WANG TIANSHENG)
NRIC No .....	S7915954I
Email Address .....	KENNETH_ONGTS@YAHOO.COM.SG
Mobile Phone No .....	(Phone) +65-97856144
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Kia
Model .....	Cerato
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 .....	1591

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	1900122252

#### DRIVER

Name of Driver .....	ONG BEAN SENG @ ONG PIN CHEONG
NRIC No .....	S2717687I
Date Of Birth .....	07/08/1943
Occupation .....	Indoor

Date Of Driving Pass .....	10/11/1965
Driving experience .....	57 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97856144
Alt. Phone Number .....	-
Email Address .....	KENNETH_ONGTS@YAHOO.COM.SG
Address .....	BLK 555 WOODLANDS DRIVE 53 #02-25
Address complement .....	-
Postcode .....	730555
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Parent
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 .....	Chain Collision
Weather Conditions .....	Raining
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	3
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	Yes
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 .....	LOH GUAT ENG
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Woodlands Division Headquarters
Police Station Phone No .....	(Phone) +65-18004660000
Police Station Address .....	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACHMENT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	SD CARD WITH TRAFFIC POLICE

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBK8666U
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SHB4473L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
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) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	ONG BEAN SENG @ ONG PIN CHEONG
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BACK & NECK PAIN
Injured person in which vehicle? .....	SMN4837Z
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

##### INJURED 2

Name of injured person .....	LOH GUAT ENG
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BACK & NECK PAIN
Injured person in which vehicle? .....	SMN4837Z
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

# **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 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. 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 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 :

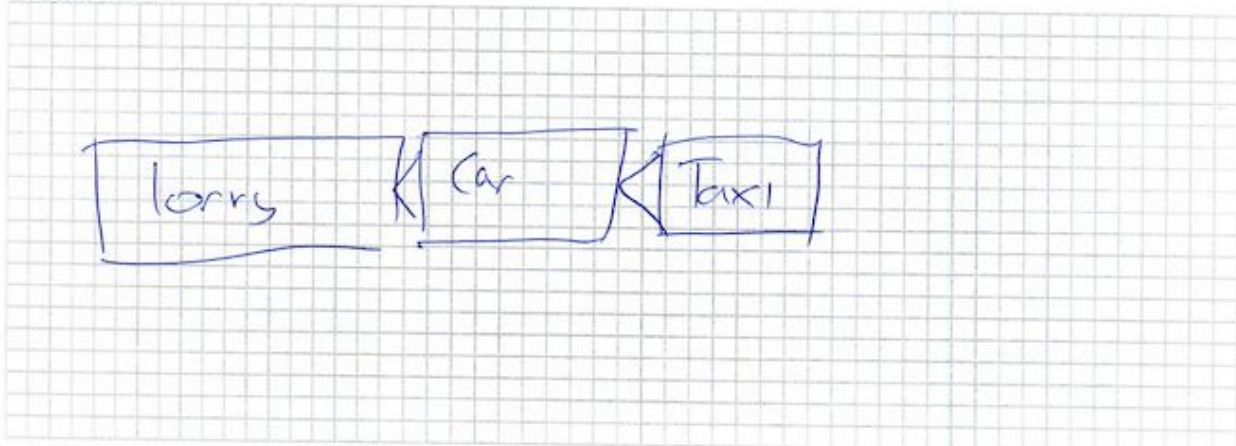
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

*[Signature]*  
 Policyholder's Signature / Date & Time  
 28/6/23  
 9.10am

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

*[Signature]*  
 Witnessed by Reporting Centre Personnel

## **Sketch Plan**





## Describe Circumstances of the Accident

It was raining and we were driving on the TPE. Traffic was slow and we were driving ~~behind~~ behind a lorry (GBK 8666 U) in the second lane.


Suddenly a blue comfort taxi crashed into my rear. The impact propelled my vehicle forward and crash into the lorry in front.

This was on 27 June 2023 around 1030 am.

## Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date &  
Time 28/6/23  
9:10 am.

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

  
Witnessed by Reporting Centre  
Personnel













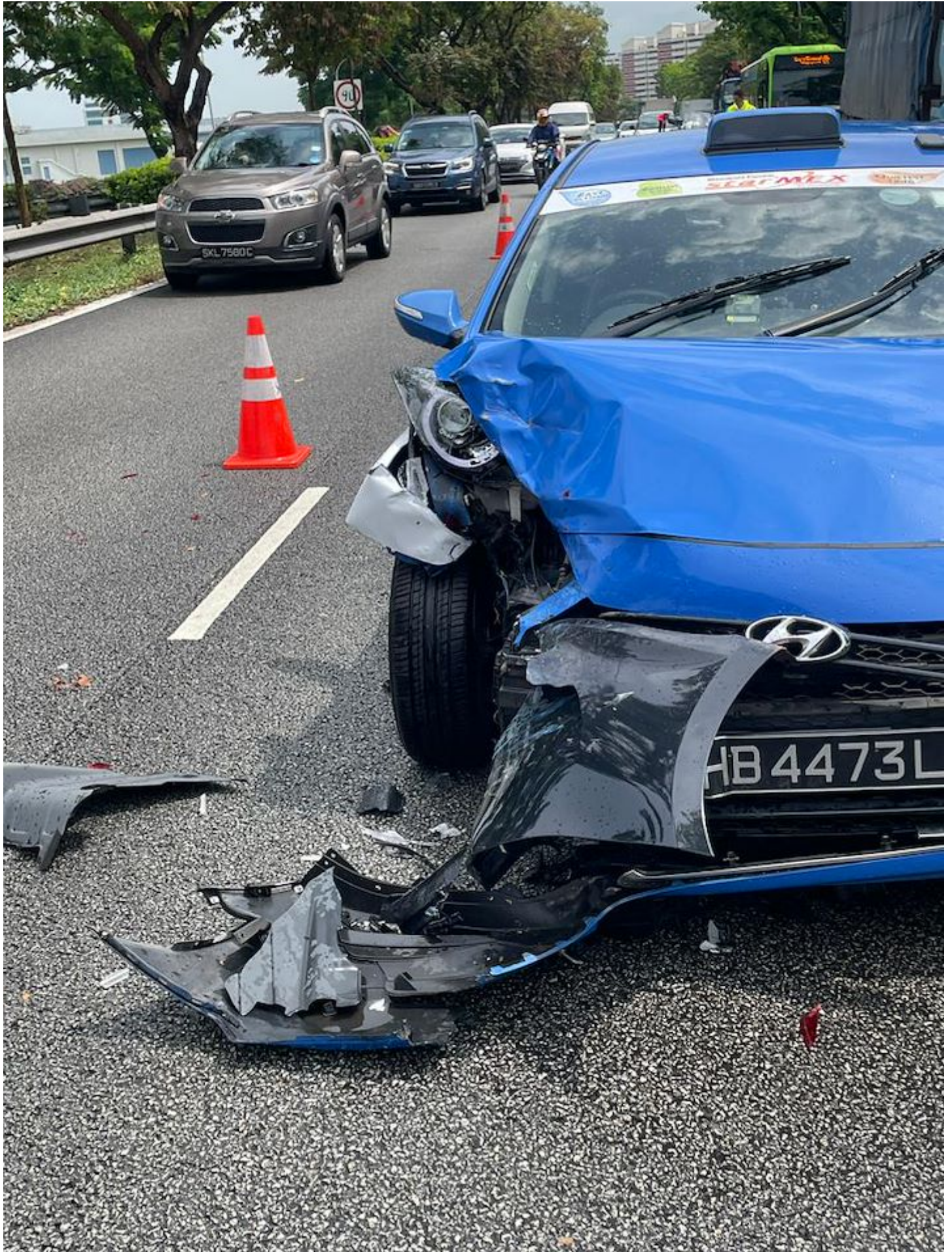




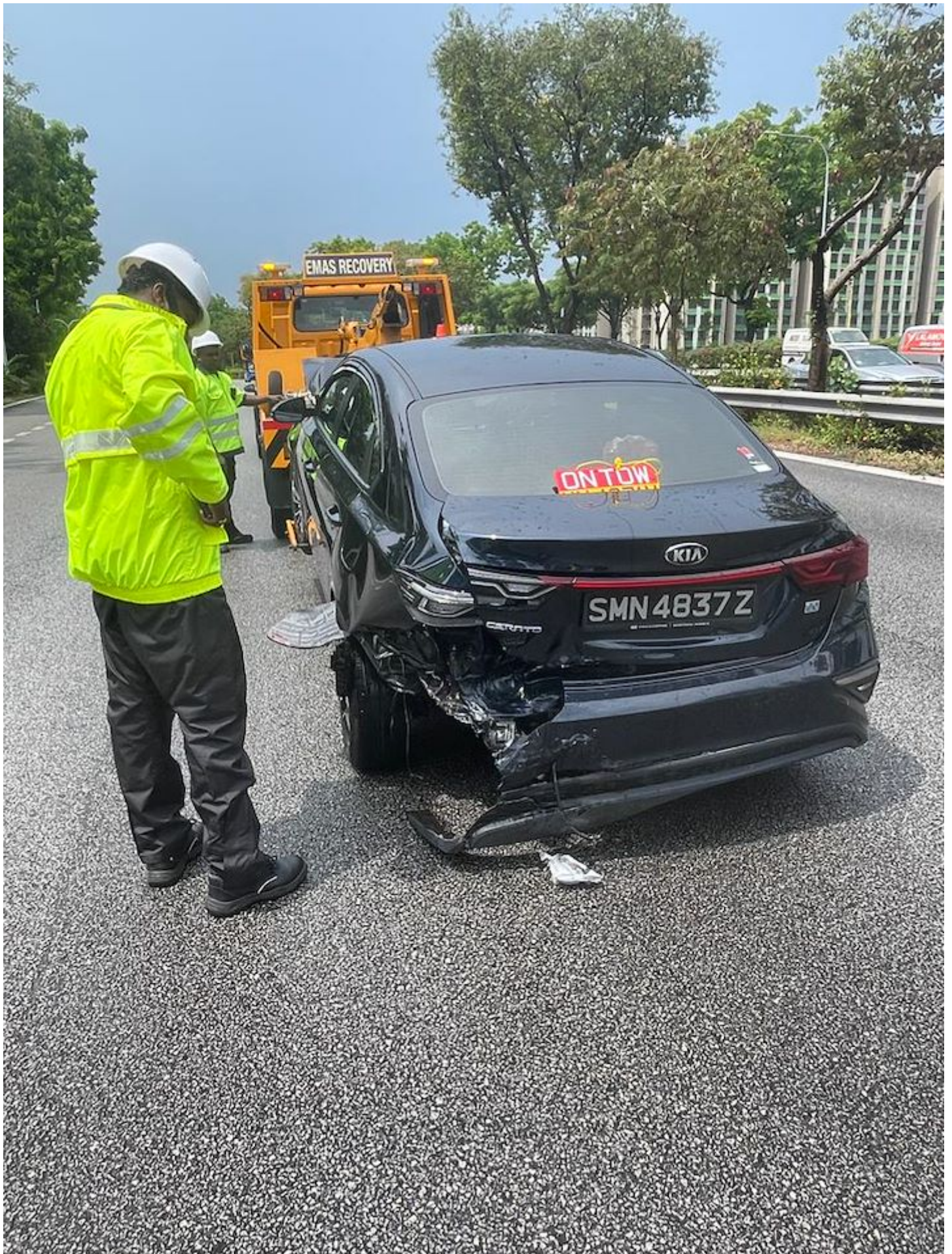








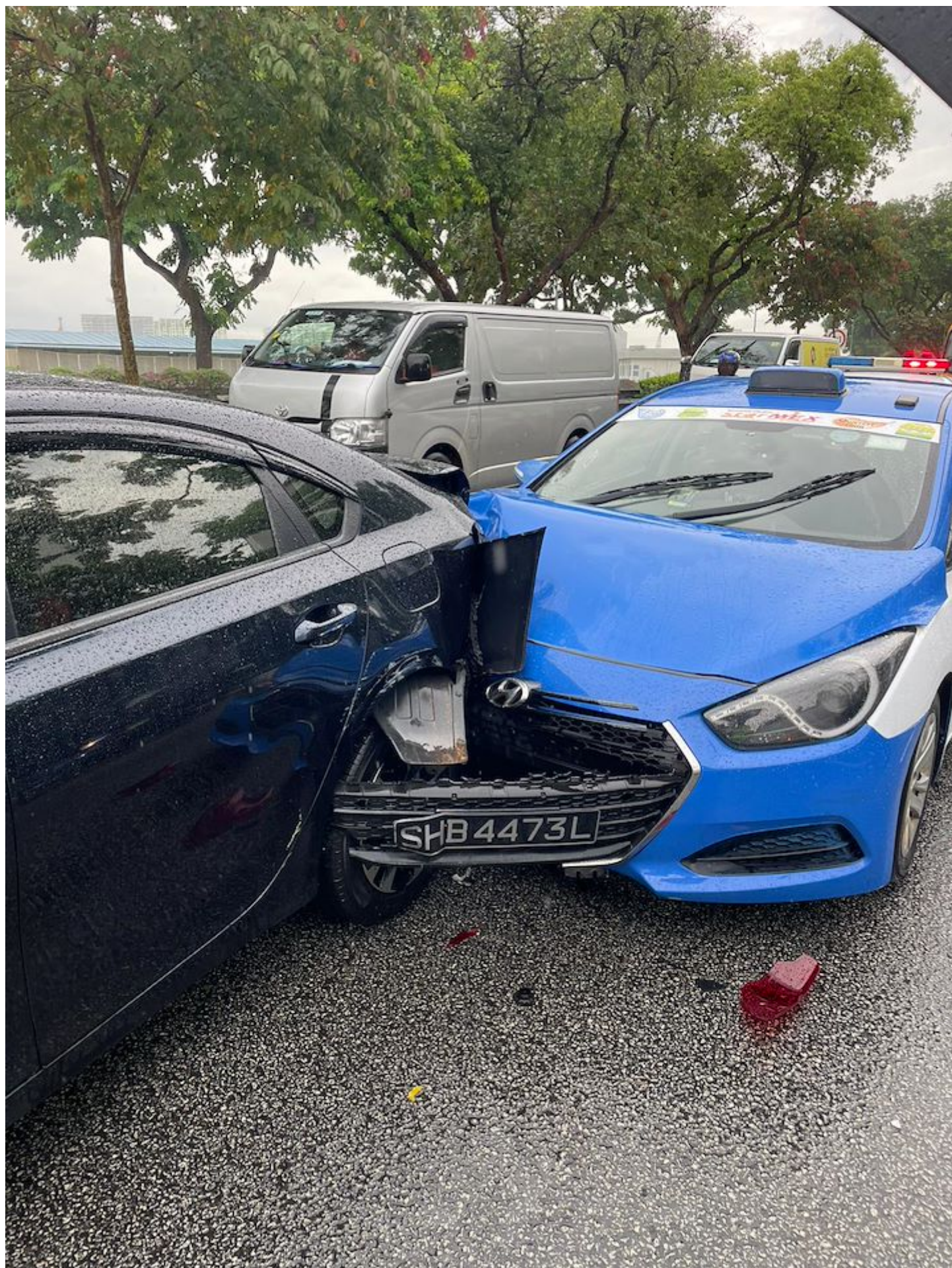








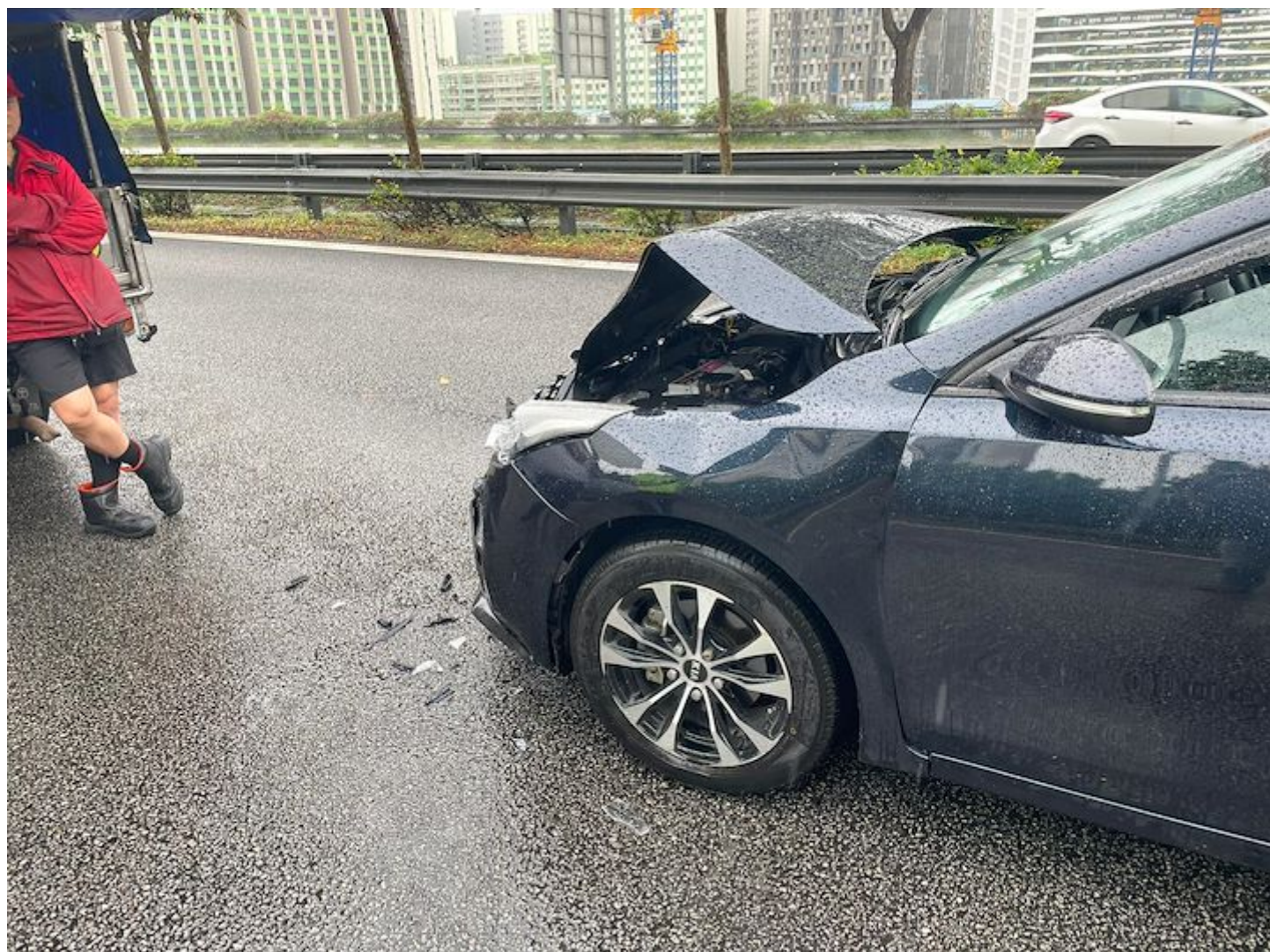






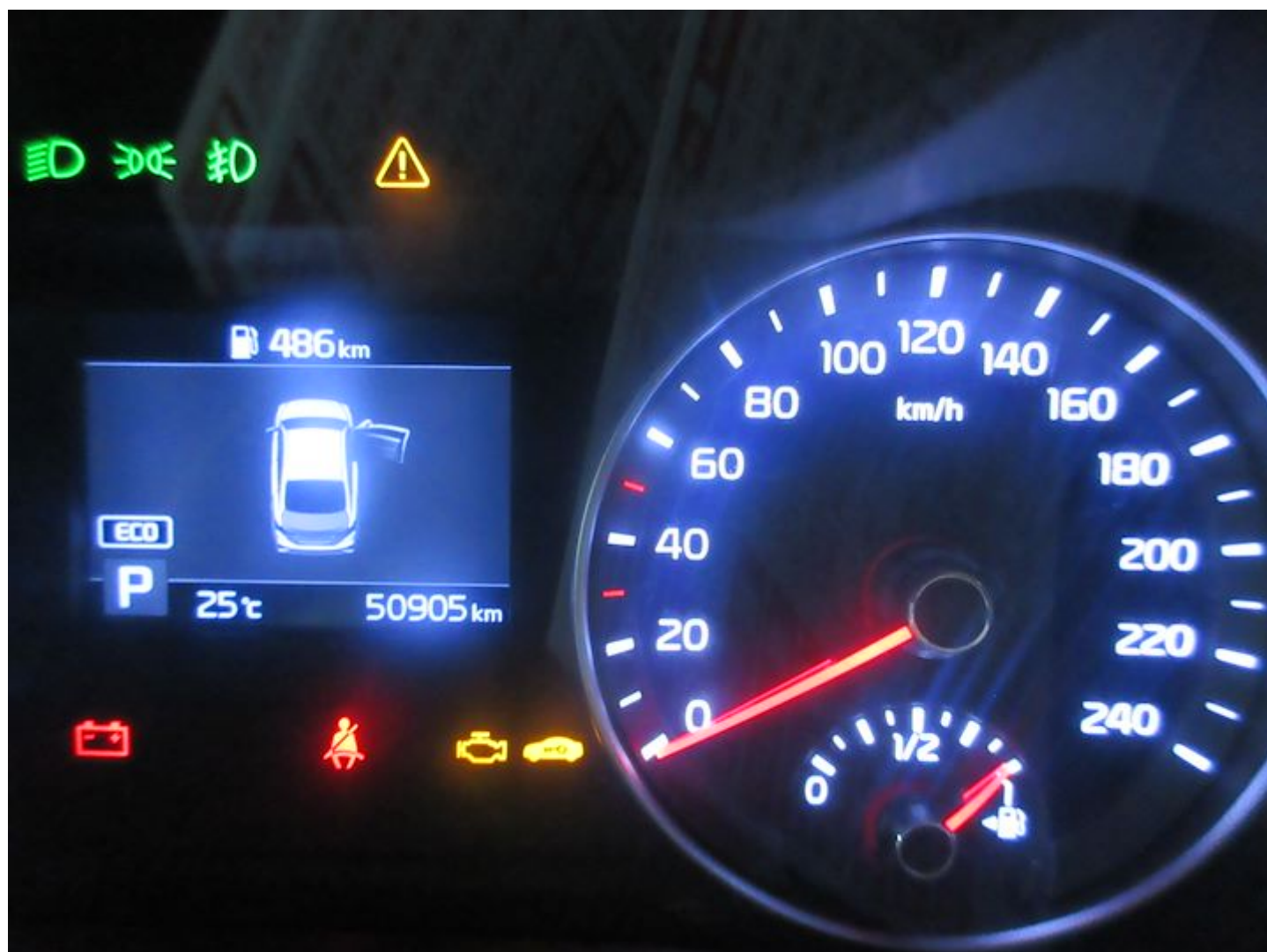








































































**SINGAPORE  
POLICE FORCE**



L/20230628/7007

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**POLICE REPORT (NP299)**

Report No. L/20230628/7007

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

Date/Time Report Made 28/06/2023 02:33	Vide Report No.	Station Diary No.
Name Of Informant ONG BEAN SENG	Address 555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555	
ID Type / ID No. NRIC NO / S27176871	Contact No. Home/Office: Mobile: 97856144	
Nationality MALAYSIAN	Email Address kenneth ongts@yahoo.com.sg	
Occupation Retiree	Sex Male	Age 79
Institution/School Name	Date of Birth 07/08/1943	Race Chinese
Date/Time Of Incident 27/06/2023 10:30 - 27/06/2023 10:30	Location Of Incident 555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555	

**Brief details.**

On 27 June 2023, I, Ong Bean Seng, S27176871 was driving on TPE towards Changi. In the passenger seat is my wife, Loh Guat Eng (S2508125J). The vehicle is registered in my son's name (Ong Thean Sheng Kenneth, S7915954I). I am the named driver in the insurance policy

It was rainy and the traffic was slow. I was driving slowly behind a lorry (Veh no. GBK8666U, Chinese Driver) in the second lane and I was keeping to the lane. Suddenly, a Blue Comfort Taxi (veh no.

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: 28/06/2023 02:33
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



L/20230628/7007

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230628/7007

SHB4473L, Malay Driver) rammed into my rear. The impact was so great that it propelled my car forward and it crashed into the lorry in front of me. The time of the accident was approximately 10.30am.

The accident had severely damaged my vehicle, specifically around the boot (especially on the left side) and the bonnet as i was sandwiched between the two vehicles. The front passenger door is unable to open fully as there is damage around the area too. The vehicle had since been towed to the workshop by my Insurer (AIG) for assessment. The traffic police had removed my in-car camera to view the records. The report number for the accident provided by the IO (Yong Kang) is E/20230627/0063. His contact is 65476202.

After the accident, I had chest and neck pain. I was particularly worried as i had a surgery previously in my cervical spine and there are metal implants in my neck. My wife has dementia and was emotionally distraught and I was unable to calm her down. We were conveyed by ambulance to Changi General Hospital for treatment. We had Xray performed on us, but no scan was done on the head. The doctor advised that we suffered from whiplash and that the pain will probably worsen the next day. Painkillers were prescribed. While we were discharged on the same day, we were given instruction to monitor for signs of head trauma. My wife continued to extremely upset at home as she has difficulties processing this accident.

I have spoken to the IO later in the evening. I was advise that the inital report taken by the traffic police states that I had informed him that i had cut into the lane. This is false and not true. I did not make this statement during the initial interview. The damage to my bonnet is also not consistent with the damage caused if i am the one who cut into the lane.

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: 28/06/2023 02:33
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



L/20230628/7007

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230628/7007

The IO had advise that he had called to clarify specifically on this point as it did not tally with the video recording, which shows that i was not the one at fault. The taxi driver was the culprit who created this accident.

I am making this police report for record and to make claims against my Insurer and Comfort Taxi for damage to my vehicle and all medical expenses.

Subjects Involved			
Victim			
Person Name	ONG BEAN SENG		
ID Type	NRIC NO	ID No	S2717687I
Gender	Male	Age	79
Race	Chinese	Language	English
Occupation	Retiree	Address	555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555
Mobile No	97856144	Is Informant A Victim?	Yes
Person Name	Loh Guat Eng		
ID Type	NRIC NO	ID No	S2508125J
Gender	Female	Age	80
Race	Chinese	Language	Chinese
Occupation	Retiree	Address	555 Woodland Drive 53 #02-25 SINGAPORE 730555

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: 28/06/2023 02:33
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20230628/7007

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230628/7007

Mobile No	96658428	Relation To Informant	Wife
Person Name	ONG BEAN SENG (Informant)		

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: 28/06/2023 02:33
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



L/20230628/7008

1 of 3

**POLICE REPORT (NP299)**

Report No. L/20230628/7008

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

Date/Time Report Made 28/06/2023 02:47	Vide Report No.	Station Diary No.
Name Of Informant ONG THEAN SHENG KENNETH	Address 555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555	
ID Type / ID No. NRIC NO / S7915954I	Contact No. Home/Office:	Mobile: 97856144
Nationality SINGAPORE CITIZEN	Email Address KENNETH ONGTS@YAHOO.COM.SG	
Occupation Management executive	Sex Male	Age 44
Institution/School Name	Date of Birth 05/06/1979	Race Chinese
Date/Time Of Incident 27/06/2023 10:30 - 27/06/2023 10:30	Location Of Incident 555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555	

**Brief details.**

On 27 June 2023, my Father, Ong Bean Seng, S2717687I was driving on TPE towards Changi. In the passenger seat is my mother, Loh Guat Eng (S2508125J). The vehicle is registered in my name (Ong Thean Sheng Kenneth, S7915954I). My father is the named driver in the insurance policy

It was rainy and the traffic was slow. my father was driving slowly behind a lorry (Veh no. GBK8666U, Chinese Driver) in the second lane and he was keeping to the lane. Suddenly, a Blue Comfort Taxi (veh

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Signature Of Interpreter: Not applicable	Date/Time: 28/06/2023 02:47
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20230628/7008

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230628/7008

no. SHB4473L, Malay Driver) rammed into the rear of my vehicle. The impact was so great that it propelled my car forward and it crashed into the lorry. The time of the accident was approximately 10.30am.

The accident had severely damaged my vehicle, specifically around the boot (especially on the left side) and the bonnet as it was sandwiched between the two vehicles. The front passenger door is unable to open fully as there is damage around the area too. The vehicle had since been towed to the workshop by my Insurer (AIG) for assessment. The traffic police had removed my in-car camera to view the records. The report number for the accident provided by the IO (Yong Kang) is E/20230627/0063. His contact is 65476202.

After the accident, my father had chest and neck pain. He was particularly worried as he had a surgery previously in his cervical spine and there are metal implants in his neck. My mother has dementia and was emotionally distraught and my father was unable to calm her down. They were conveyed by ambulance to Changi General Hospital for treatment. They had Xray performed on them, but no scan was done on the head. The doctor advised that they suffered from whiplash and that the pain will probably worsen the next day. Painkillers were prescribed. While they were discharged on the same day, they were given instruction to monitor for signs of head trauma. My mother continued to extremely upset at home as she has difficulties processing this accident.

I have spoken to the IO later in the evening. I was advise that the initial report taken by the traffic police states that my father had informed him that he had cut into the lane. This is false and not true. My father did not make this statement during the initial interview. The damage to my bonnet is also not consistent

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Signature Of Interpreter: Not applicable	Date/Time: 28/06/2023 02:47
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



L/20230628/7008

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230628/7008

with the damage caused if my father the one who cut into the lane.

The IO had advise that he had called to clarify specifically on this point as it did not tally with the video recording, which shows that my father was not the one at fault. The taxi driver was the culprit who created this accident.

I am making this police report for record and to make claims against my Insurer and Comfort Taxi for damage to my vehicle and all medical expenses.

A case had also been lodged under my father name too, Report Number: L/20230628/7007

Subjects Involved			
Victim			
Person Name	ONG THEAN SHENG KENNETH		
ID Type	NRIC NO	ID No	S7915954I
Gender	Male	Age	44
Race	Chinese	Language	English
Occupation	Management executive	Address	555 WOODLANDS DRIVE 53 #02-25 SINGAPORE 730555
Mobile No	97856144	Is Informant A Victim?	Yes
Person Name	ONG THEAN SHENG KENNETH (Informant)		

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: 28/06/2023 02:47
Officer In-Charge Of Case:	Classification Of Case: