

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 12/07/2023 17:47 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 12/07/2023 07:45 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG KPE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

No - Claiming third party

Private car

Vehicle Registration Number SLQ7843G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHONG WEE TAT (ZHUANG WEIDA) NRIC No. S8312009F Email Address mk3_winston@yahoo.com Mobile Phone No (Phone) +65-93383756

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Hyundai Model Elantra

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?

Vehicle Category Transmission

Auto 1591

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.

Policy Number / Cover Note Number CN51013449

DRIVER

Name of Driver CHONG WEE TAT (ZHUANG WEIDA) NRIC No S8312009F

Date Of Birth 19/04/1983 Occupation Indoor

Date Of Driving Pass 01/11/2010 Driving experience 12 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-93383756 Alt. Phone Number Email Address mk3 winston@yahoo.com Address APT BLK 601D PUNGGOL CENTRAL Address complement # 15-636 Postcode 824601 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 Chain Collision 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? No 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? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name LIU XIU HUI Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Punggol Neighbourhood Police Centre Police Station Phone No (Phone) +65-18006049999 Alt. Police Station Phone No (Fax) +65-64468015 Police Station Address Blk 21A Tebing Lane Singapore 828837 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED POLICE REPORT-T/20230712/2020 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKC1146K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	IKHWAN
Contact Number	(Phone) +65-81579579
Address	<u>-</u>
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 SNA86 Vehicle Manufacturer - Vehicle Model -	61T
Vehicle Variant	
Vehicle Colour -	
Vehicle Category Private	car
Name of Driver LOY K0	3
Contact Number (Phone	+65-96943873
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 3

Vehicle Registration Number	SMW4661R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEONG CS
NRIC No	S8328014Z
Contact Number	(Phone) +65-93652047
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 4

Vehicle Registration Number	SKV2927S
Vehicle Manufacturer	-
Vehicle Model	_
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	VINCENT
Contact Number	(Phone) +65-96687137
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 5

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour	SLB6828L - -
Vehicle Category	- Private car
Name of Driver	EUGENE NG
Contact Number	
	(Phone) +65-90095880
	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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)

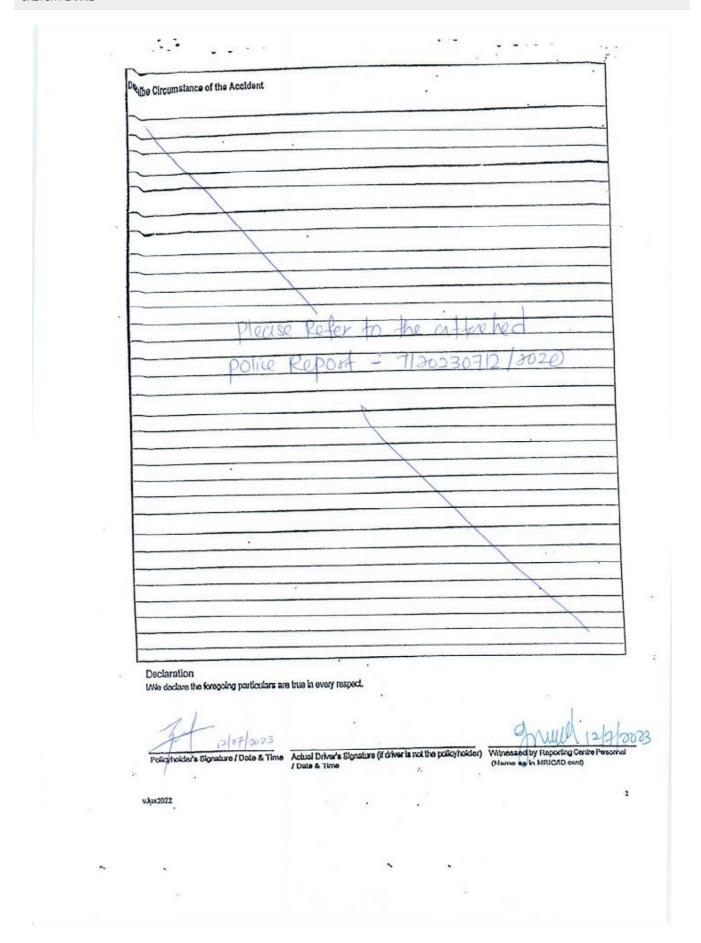
funderstand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General hisurance 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 hisurers' 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;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

olicyholder's Signature / Date : ime ketch Plan	Driver's 8 & Time	Alana	er is not the policyholder)	/ Date Witnessed by Reporting Centre Personnel
				A SLQ 18436
				B 3KC 1146 K
			B	E- SNA 8661T -
				11 5 SMW 4 66 1K
			D D	F= SLB (828L







Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

1 of 5 Report No. T/20230712/2020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/07/2023 09:03		Made:	Vide Report No.:	Station Diary No.: 24		
Informa	nt's Partic	ulars	A STATE OF THE PARTY OF THE PAR	Con Pro- 12 de la Constantina del Constantina de la Constantina del Constantina de la Constantina de l		
	f Informant: WEE TAT		Address: APT BLK 601D PUNGGOL 824601	CENTRAL #15-636 SINGAPORE		
	Type / ID No.: RIC NO / S8312009F		Contact No.: Home/Office: Mobile: 93383756			
National SINGAP	ity: ORE CITIZ	'EN	Email:			
Sex: Age: Date of Birth: Male 40 19/04/1983			Type of Informant: Driver			
Race: Chinese			Language:			
Occupation: SENIOR ENGINEER		R	Driving Licence Information Class: 2B,3	n: Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 12/07/2023 07:45	Type of Location
Location: KALLANG PA Weather: Clear	YA LEBAR EXPRES	Road Surface:		
Traffic Flow: Traffic Co			T.	T45 - V-1
		Not Controlled		Traffic Volume: Heavy

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKC1146K	Car				Slightly Damaged	0
SKV2927S	Car				Slightly Damaged	0
SLB6828L	Car				Slightly Damaged	0
SLQ7843G	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT	Blue	Seriously Damaged	1





Police Station Of Origin: Punggol N.P.G 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

2 of 5 Report No. T/20230712/2020

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMW4661R	Car				Slightly Damaged	0
SNA8661T	Car				Slightly Damaged	0

Details of Vehicle Insurance					
Vehide No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLQ7843G	MSIG INSURANCE (SINGAPORE) PTE. LTD.	300634562	24/07/2022	23/07/2023	

Details of Perso	n Involved		100000000000000000000000000000000000000	OF BEEN	MARKET SERVICE	
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver	White Control of the	Se la	SHI HE WAS A		MICE OF	AND THE RESERVE
Name	IKHWAN			ID No.		NIL
Related Vehicle	SKC1146K (Car)		Contact No.		81579579	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc		Date Disch	narge	NIL	
No. of Days gran	ted Medical Leave NIL		Degree of			
Driver			SECONDARY S	NEW YORK		BOX NO CHILDREN
Name	VINCENT			ID No.		NIL
Related Vehicle	SKV2927S (Car)			Contact No.		96687137
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Da		Date Disch	te Discharge NIL		
No. of Days granted Medical Leave NIL		VIL	Degree of Injury NIL			





Police Station Of Origin:

Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

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CONTINUATION OF REPORT

Driver			HE THE SHIRE	V (design)	3.1-1854		
Name	EUGENE NG		ID No.		NIL		
Related Vehicle	SLB6828L (Car)			Contact No.		90095880	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc						
No. of Days gran				of Injury NIL			
Driver			77 Z 3 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3	ZO SEIDS	\$45008E	MARCHA TERROR STORES	
Name	CHONG WEE TAT		ID No.		S8312009F		
Related Vehicle	SLQ7843G (Car)		Contact No.		93383756		
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 2B,3 Date of Expiry: NIL	
Date Treatment	NIL Date Dis			narge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of				
Passenger	BARRISTA -	C.S. CEPUS		(DESTIN	10.183	BURNES OF STREET	
Name	LIU XIU HUI			ID No.		S8328014Z	
Related Vehicle	SLQ7843G (Car)			Contact No.		93652047	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Dis		Date Disch		NIL		
	E GTO EPTO		Degree of		NIL		
Driver	THE CHANGE STREET	SEE STANFO	HI RELIGIOUS		SEE SA		
Name	LEONG CS			ID No.		NIL	
Related Vehicle	SMW4661R (Car)		Contact No.		NIL		
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc						
Date Treatment					e of Injury NIL		



T/20230712/2020

Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

4 of 5 Report No. T/20230712/2020

CONTINUATION OF REPORT

Driver	APPENDIX APPEND		SALES THE COLUMN	W. W. W.	A CONTRACTOR	Artine Marian Control of the Control
Name	LOYKC			ID No.		NIL
Related Vehicle	SNA8661T (Car)			Contact No.		96943873
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Dis		harge	NIL		
No. of Days granted Medical Leave NIL				NIL		

Brief Details

On the above-mentioned date and time, I was driving my vehicle (plate number: SLQ7843G) along KPE. My wife, Ms Liu Xiu Hui was sitting in the passenger seat, and I was on the first lane of the expressway.

At one point, the vehicle in front of me had come to a stop so I followed suit.

However, we suddenly felt an impact from the back as the vehicle behind us (SKC1146K) collided into the rear of our vehicle.

Subsequently, we felt a second impact shortly after the first one.

We realized that another vehicle had also collided into the rear of another vehicle, adding onto our first accident.

There were 6 cars in total that was involved in the car accident.

As a result, my vehicle sustained serious damages at the rear.

No ambulance or police attended the incident and we were advised by a LTA officer to move off from the scene.

I wish to state that my wife and I have not observed any injuries as of now, but we will be monitoring our condition and visit a doctor if necessary.





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CONTINUATION OF REPORT

Signature of Officer Recording The F /	Report:
SGT 2 Tan Ting Wei Colette @Dania	p
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case:	
Officer In Charge Of Case: TP / GIA / SSI TAY CHUN KEEN	
TP / GIA /	

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