VERSION: 1 (12/08/2024 09:30 (SGT))



### 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 5. Intermitted in provided midst be as it dufficing and accurate as possible. Any white misteries estimation of witholding of material facts may allow insurance companies to reputing 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 First Submission 12/08/2024 09:30 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 08/08/2024 17:40 (SGT) Exact Location of Accident Yishun Ave 5, Singapore Additional Location Information **CARPARK** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Honda

Vehicle Registration Number SDU1155Y

### INSURED/POLICYHOLDER

Is company? Nο Name Of Registered Owner TAN HOCK LEONG NRIC No SXXXX886G Email Address HLTAN2103@GMAIL.COM Mobile Phone No (Phone) +65-96600970 Alternative Phone No

## VEHICLE PARTICULARS

Manufacturer

Model CITY 1.5 SV CVT Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1497 Vehicle Fuel Petrol First Regisration Date 29/06/2016 MRHGM6660GP000532 Effective Date/Time of Ownership 16/07/2023 07:07 (SGT)

### INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited Policy Number / Cover Note Number V5025939

### DRIVER



Name of Driver NRIC No Date Of Birth Occupation Driving Pass Date Driving License Pass Class Driving License Validity Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	TAN HOCK LEONG SXXXX886G 21/03/1972 Indoor 07/08/1990 3 Valid 34 YEARS Male (Phone) +65-96600970 - HLTAN2103@GMAIL.COM BLK 799 YISHUN RING ROAD 12-3420 SINGAPORE 760799 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collided into Property DRIZZLING Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement	
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
PLS REFER TO THE SKETCH PLAN BY DRIVER	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes WITH TRAFFIC POLICE

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	QX3278T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Government
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)	_

#### 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.
- 5. 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 (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 refevant government agency/authority (such as the pulsee), 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, maylare permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

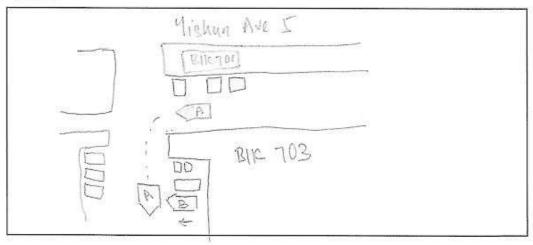
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting (EDE) ersonnel (Name as in NRIC/Na card)

### Sketch Plan



Pate of Accident : 8934 Time :_	S.40pm Location:	4ishun Ave 5 Carpur
ly Vehicle A : SDu 11 SS Y Vehicl	eB: @४३५१ Vel	nicle C t
Turning left from C around 5.40 pm. K left exting carpar	Parpark road between the by R lots.	veen BIK 701 2703 QX32787 from
Claim OD/TP at Ah Lim Motor Comments: Please forward a copy of my efite accid		Reporting Only
My Workshop: TLS Motor		
Workshop Email Address :  Note : Please take note that your insurer hap policy. Kindly check with your own in	ave a 14 days timeframe for you to s	ubmit own damage claim under your ow
Declaration We declare the foregoing particulars are true in every		
		(3) Jacobs

vJun2022

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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240809/7056

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/08/2024 21:09		de:	Vide Report No.: L/20240809/0112	Station Diary No.:		
Informan	's Particular	S				
Name of Informant: Tan Hock leong			Address: 799 Yishun ring road #12-3420 SINGAPORE 760799			
ID Type / ID No.: NRIC NO / S7208886G Nationality: SINGAPORE CITIZEN		iG	Contact No.: Home/Office: Mobile: 96600970			
		N	Email: hltan2103@gmail.com			
Sex: Male	Age: 52	Date of Birth; 21/03/1972	Type of Informant: Driver			
Race: Chinese		-1	Language: English			
Occupation: Electrical engineering technician		technician	Driving Licence Information: Class:	Date of Expiry;		

General Information	of the Accident			
Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 09/08/2024 17:40	Type of Location: Car Park
Location: YISHUN AVENUE	5	1		
Weather: Drizzling		Road Surface: Wet		Marine Marine
Traffic Flow: Two Way		Traffic Control: Not Controlled	Tra Ligi	ffic Volume: nt
Type of Collision: Between Moving V	ehicles - Head To Sid	ie		one conveyed by oulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
QX3278T	Motor car					0
SDU 1155 Y	Motor car	HONDA	City	Grey	Slightly Damaged	0

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SDU 1155 Y	GREAT EASTERN GENERAL INSURANCE LIMITED	V5025939	28/06/2024	27/06/2025



T/20240809/7056

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20240809/7056

## CONTINUATION OF REPORT

Any Pedestrian In	volved: No		771.1		
No. of Pedestrians Injured; NIL		Use of Pedestrian Crossing: NA			g: NA
Driver			- VIII-1	ab-way	111111111111111111111111111111111111111
Name	Tan Hock leong		ID No	Ø.	S7208886G
Related Vehicle	QX3278T (Motor car)		Conta	ct No.	96600970
Hospital/Clinic	NIL		Class Drivin Licens Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	L
No. of Days grant	ed Medical Leave (MC) NIL	Degree of I	njury	NIL	THE STREET ASSOCIATION OF THE STREET

Brief Details. | €₽₽
Turning left from carpark road between Blk.701 and 703 around 5,40pm .knock by QX3278T from pight exiting carpark lots .

Accident report SA1C248AM002



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



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Report No. T/20240809/7056

CONTINUATION OF REPORT

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: 09/08/2024 21:09
Officer In Charge Of Case: TP / DDGVT / MUHAMMAD ISMAIL BIN AMZAH Contact No.: 65476232	Classification Of Case:

NP168