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 First Submission 14/08/2024 16:42 (SGT) Reported by **Actual Driver** Date of Accident 14/08/2024 07:20 (SGT) Exact Location of Accident Singapore Additional Location Information 521 ANG MO KIO AVENUE, S 560521 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mitsubishi

Vehicle Registration Number SJN64Z

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TEO KIAT HWEE (ZHANG JIEHUI) NRIC No S1672352E Email Address CWH8638@GMAIL.COM Mobile Phone No (Phone) +65-96411010 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Attrage 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 1200 Vehicle Fuel First Regisration Date Chassis no MMBSTA13AJH000984

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1800042710-05

DRIVER

Effective Date/Time of Ownership

Name of Driver HO JUN WEI (HE JUNWEI) NRIC No T0131219C Date Of Birth 06/10/2001 Occupation Outdoor Driving Pass Date 14/03/2023 Driving License Pass Class 3A Driving License Validity Valid Driving experience 1 YEAR AND 5 MONTHS Gender Mobile Number (Phone) +65-83820404 Alt. Phone Number Email Address XXXJUNWEIXXX@GMAIL.COM Address 14 LORONG TOA PAYOH #20-225 Address complement Postcode 310014 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? 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 Dry 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? Yes Was any injured conveyed to hospital by ambulance? No 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 ELIZABETH YONG YAN JUN Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Tanglin Division Headquaters Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

REFER TO ATTACHMENT COLLISION-HEAD TO SIDE

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 GBF8473K Vehicle Manufacturer Toyota Vehicle Model Hiace Vehicle Variant Vehicle Colour White Vehicle Category Commercial vehicle Name of Driver TAN SIEW CHYE Contact Number (Phone) +65-90067372 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

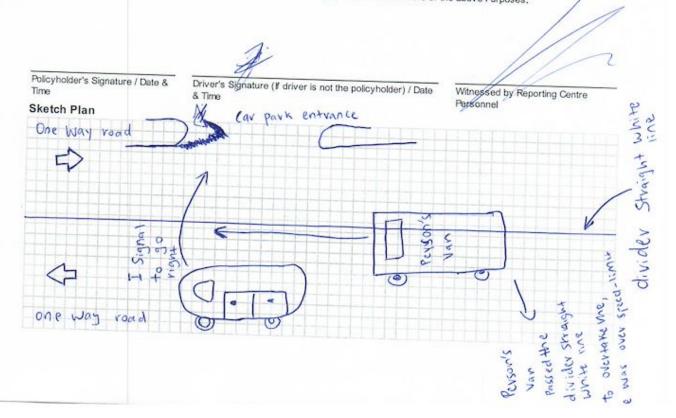
SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- 8. Consent under the Personal Data Protection Act (PDPA)

l understand, acknowledge, agree and consent that :

- (a) My insurer , my w orkshop 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' law yers/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
- (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
- (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.



Describe Circumstances of the Accident
Statement regarding accident at \$560521. This is my account of the unfortunate
park entrance on a road divided into 2 langer 1. I was approaching a car
park entrance on a road divided into 2 lanes by a single white like. One
other for vehicles the travelling in the opposite direction, under no
circu of vehicles travelling in the opposite direction, under an
circumstances there should be any overtaking.
AT I approach the car park, I carefully signaled my intention to Make a right turn. I was fully aware in the
a vight turn. I was fully aware of the traffic condition around in
and took every precanting to ensure a safe maneurer. I writed parter all accoming traffic in the sparts last maneurer. I writed part
my which spot to confirm that it was all maneuver. I waited part
my blind spot to confirm that it was safe to proceed. When I there
Signua behind I retical a Yan approximately 5 car lengths also
I had been signalling my intention to then vight for an extende
period, making it alighdantly clear that I intended to turn right into the comparts triver the annual distribution
and the van any prudent drive is all the between my vehicu
and the van any prudent driver would have to recognise my well and allowed me the space to consist to an time to recognise my in
and allowed me the space to complete my town of safely.
to the safety.
However, the van driker who was to will as at
Speed ignored my signal and recklessly attempted to survivale me
by conting across the single white line dividing the lanes. This
wane year was not only dangerous but also illegal, as it is a one
way road with strict no - overtaking vales, Despire my coreful
driving, the van collisted vitu my carl as I was in the prices of
turning viging.
8 3 1
Upon impact was local interest
Upon impact my head joined sharply to the left. The collision left me with persistent headounes and visible stratumes The entitional was transmate.
incident was training to.
7.00
I want to value !
Vectoriss and going over U speed innit. He is doing illegal
activities. I am a viction
THO. HES. I am a VICTIM.
eclaration
le declare the foregoing particulars are true in every respect.

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

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre Personnel















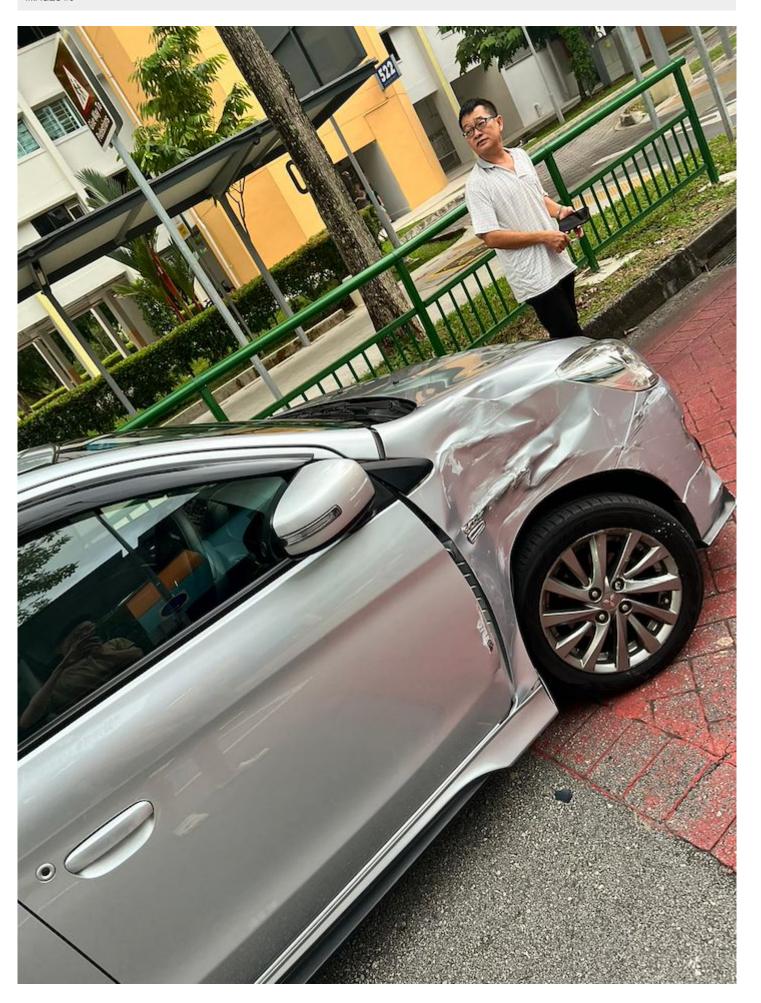




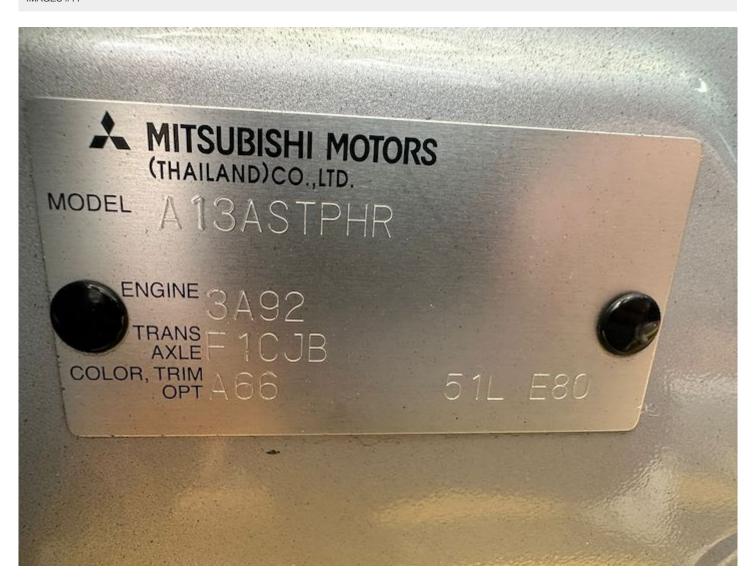










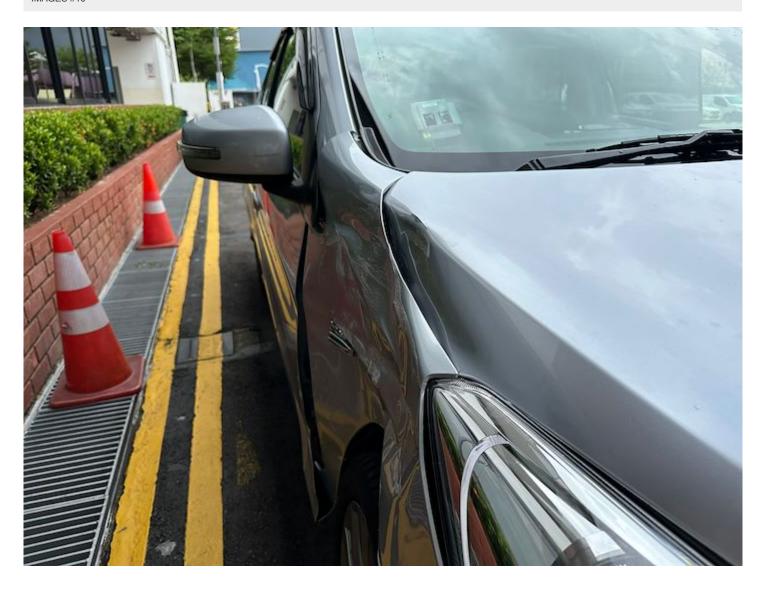


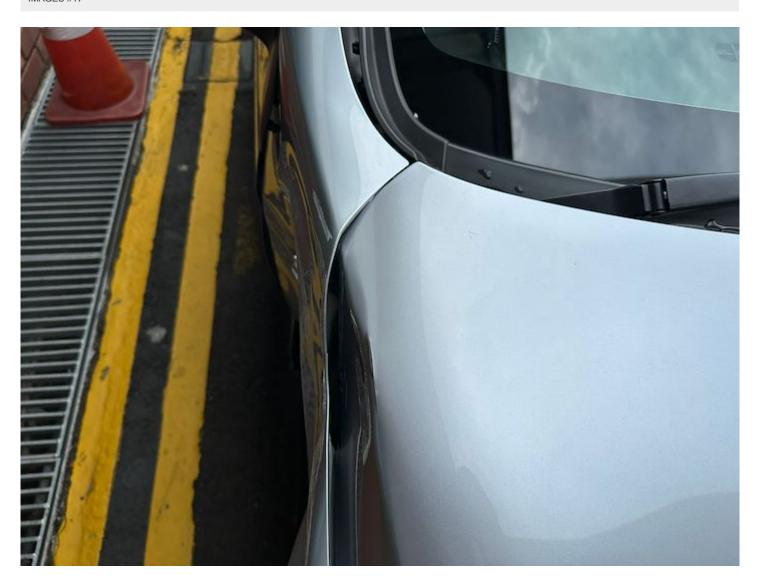


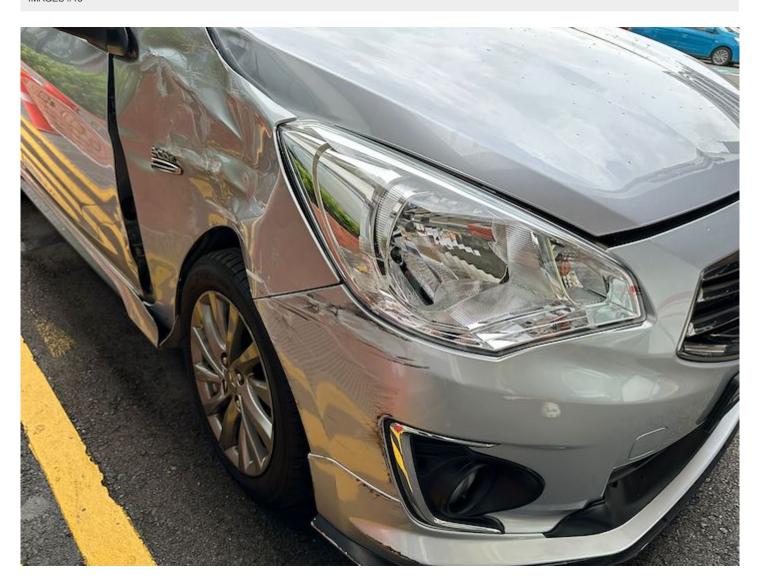


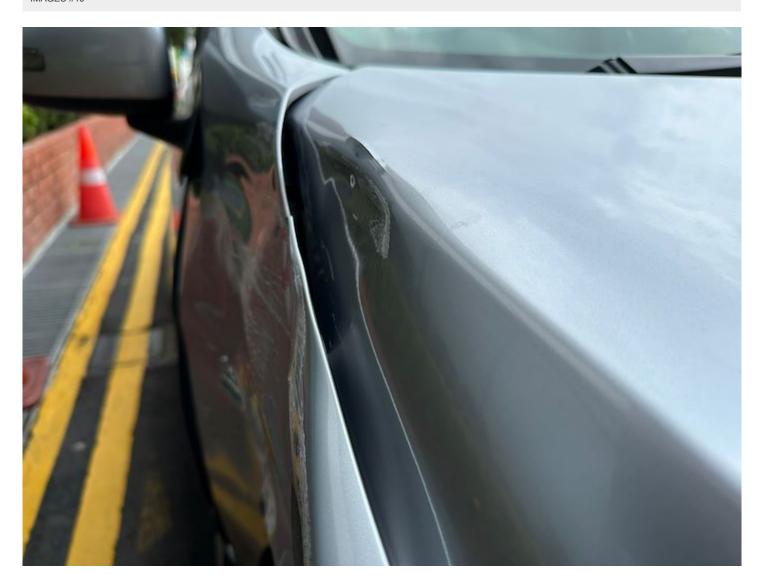


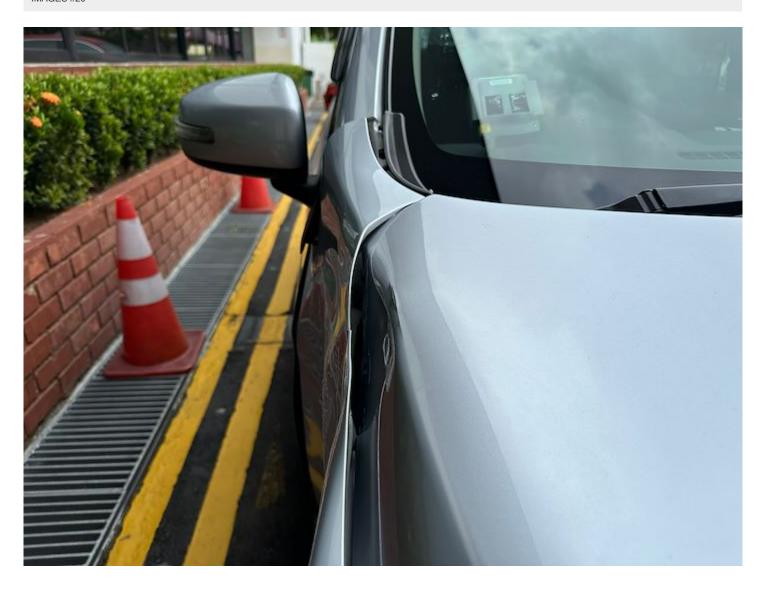


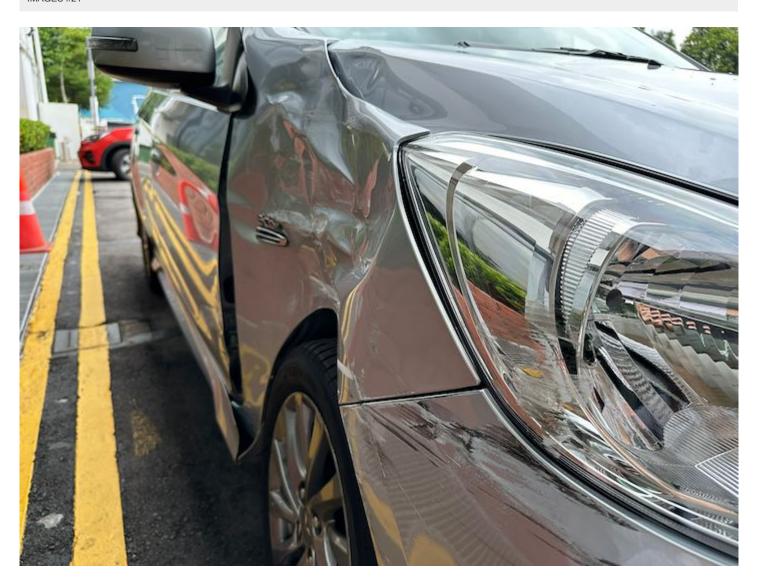


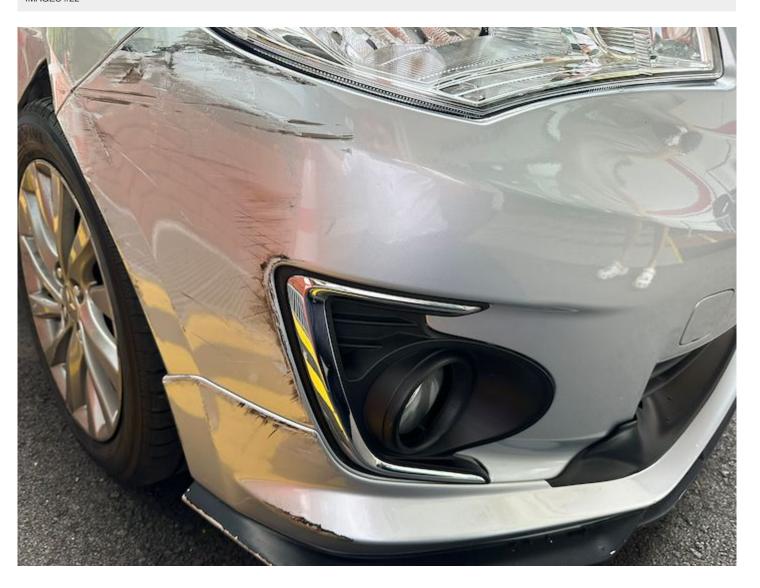






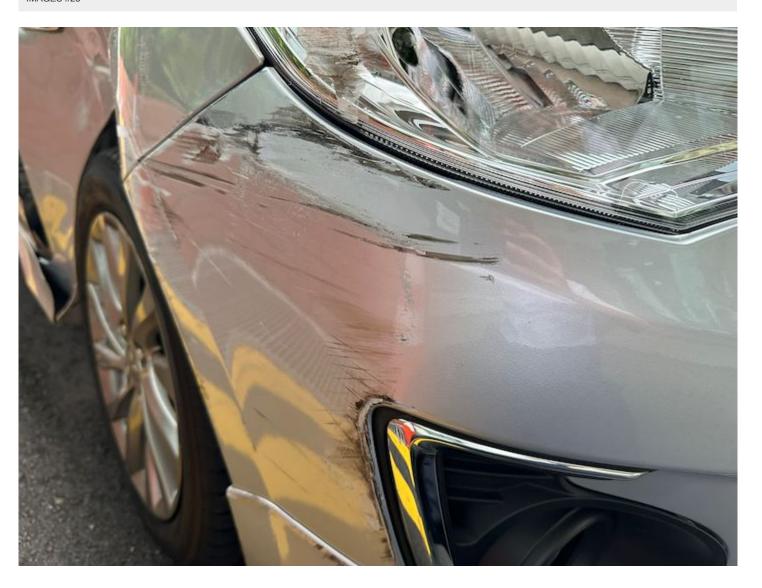


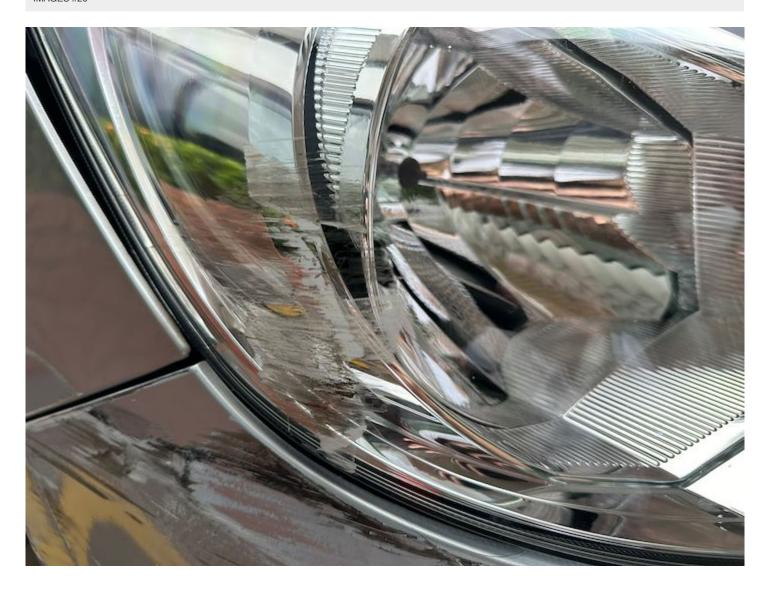


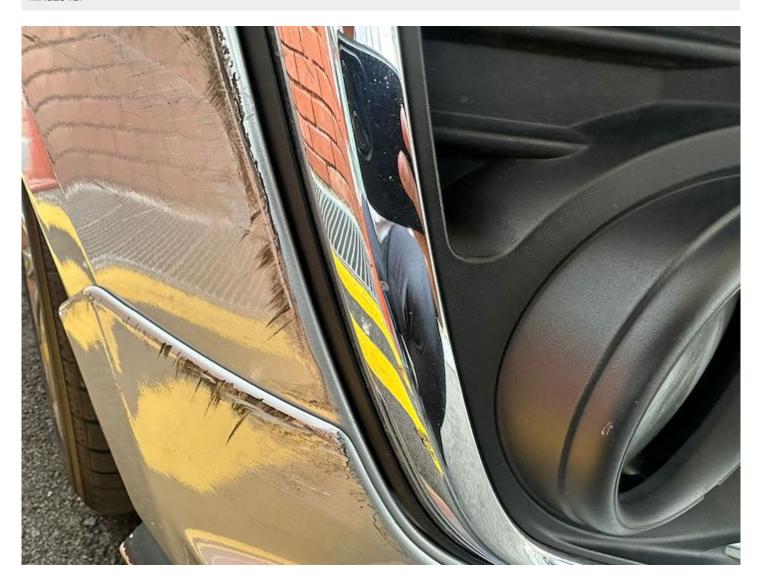


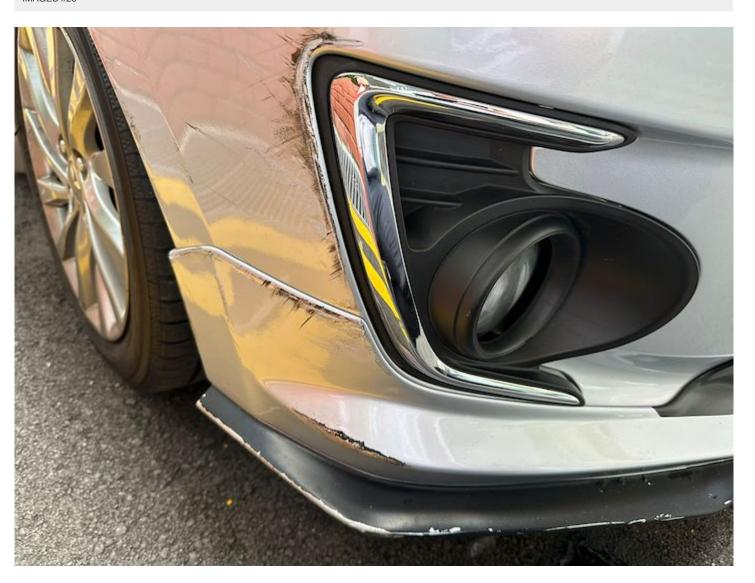


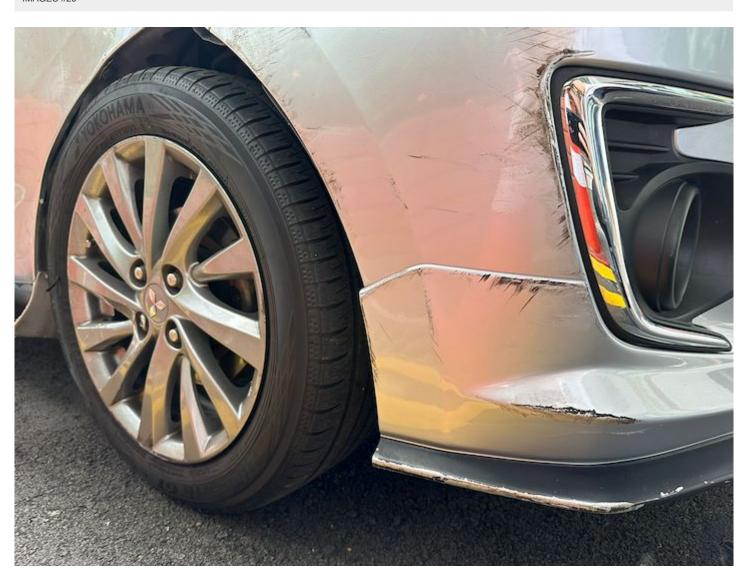


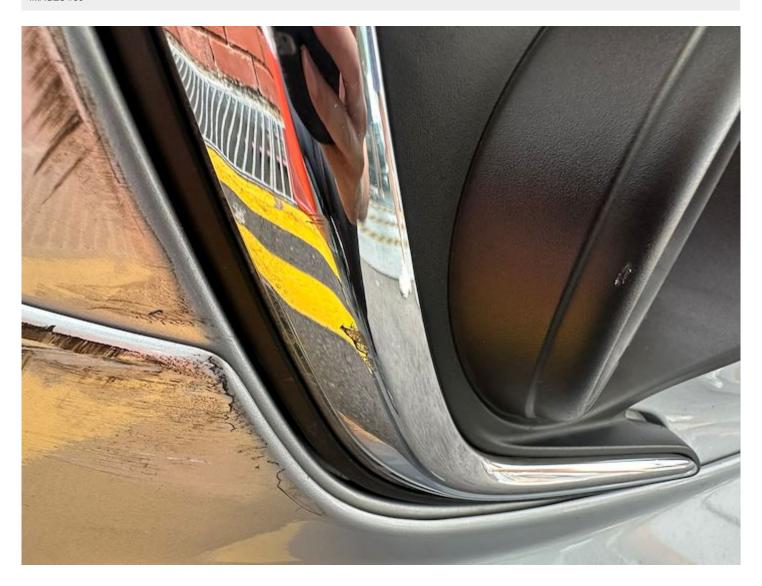


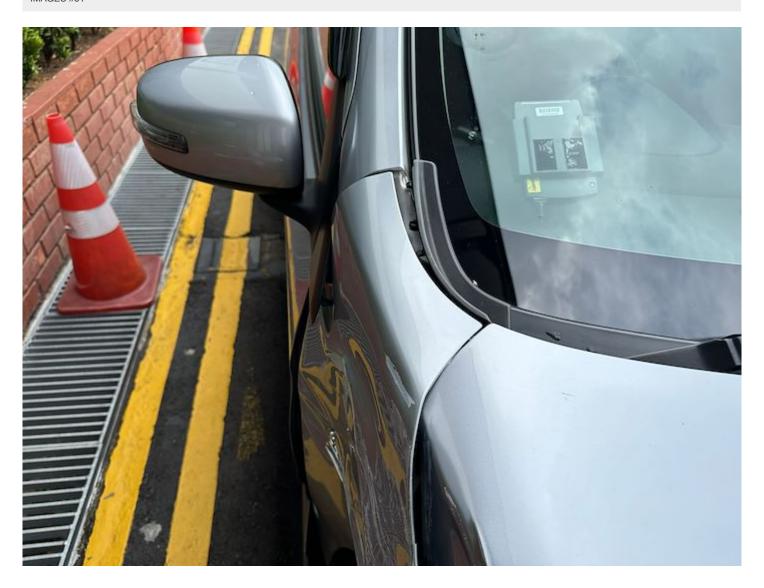


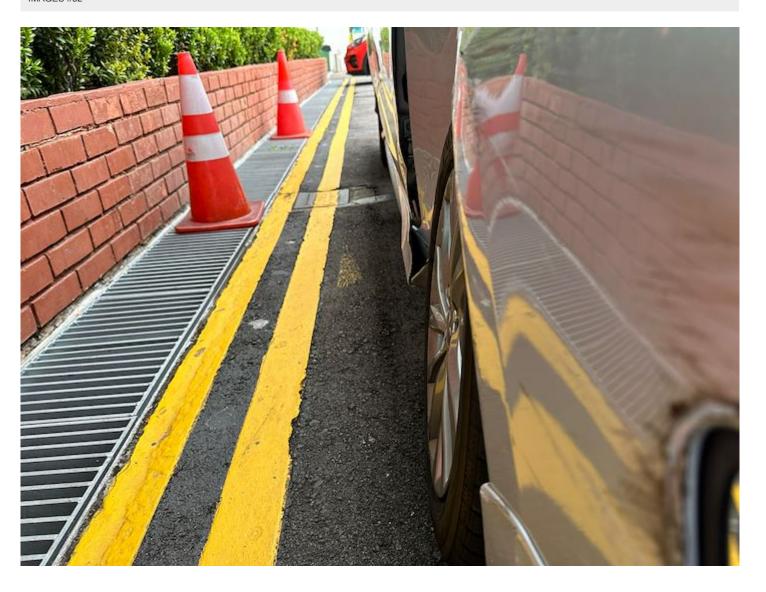


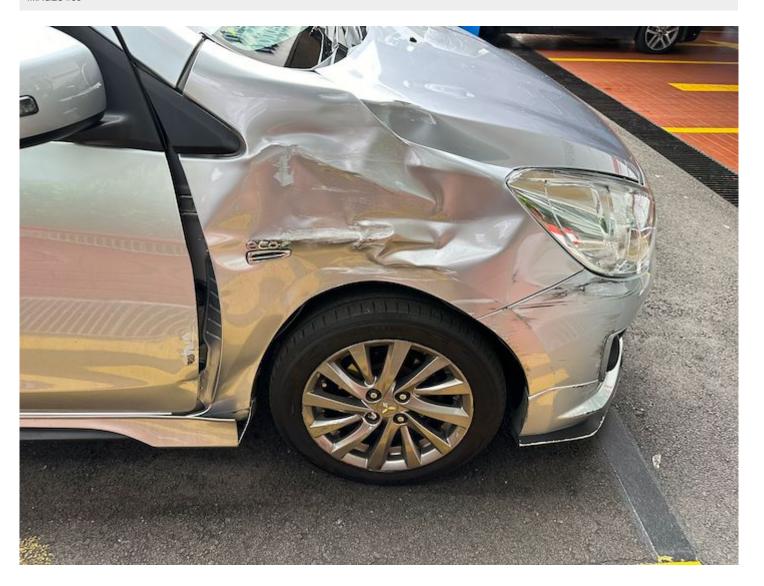








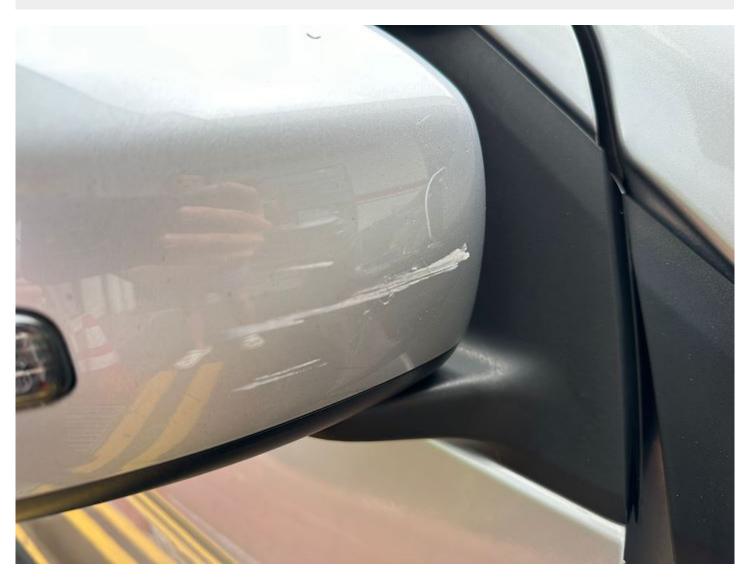




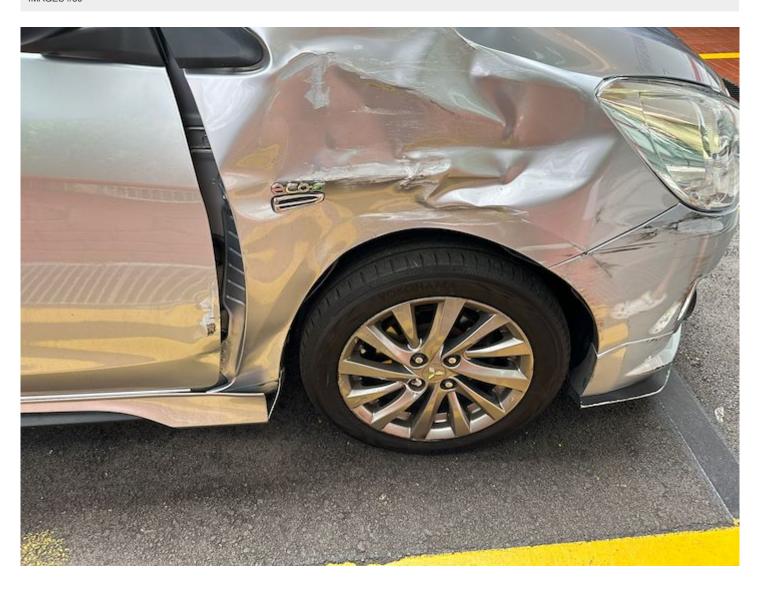


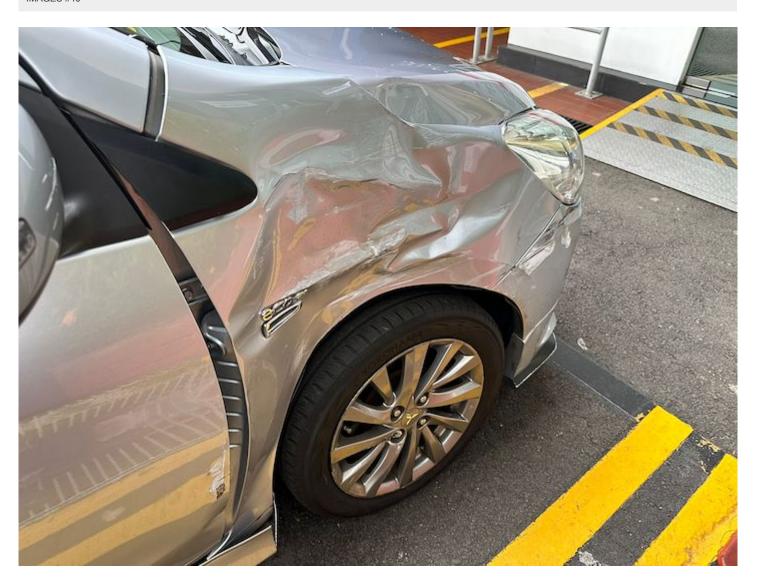


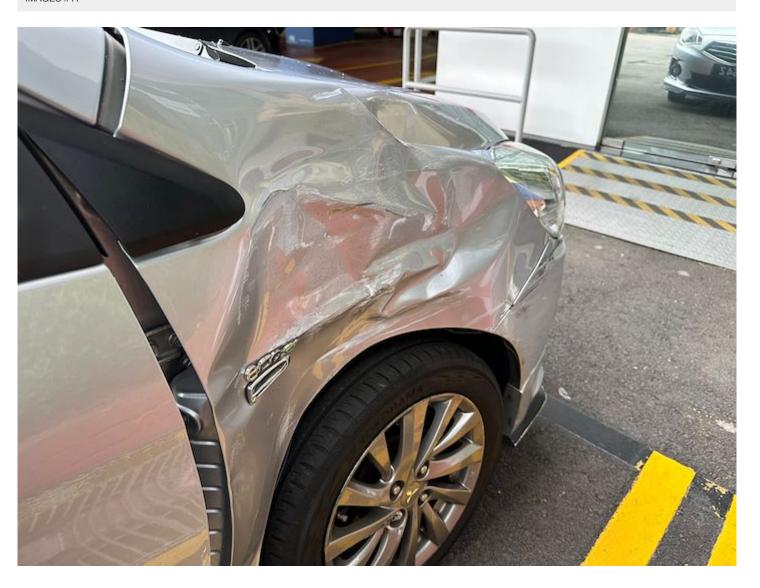


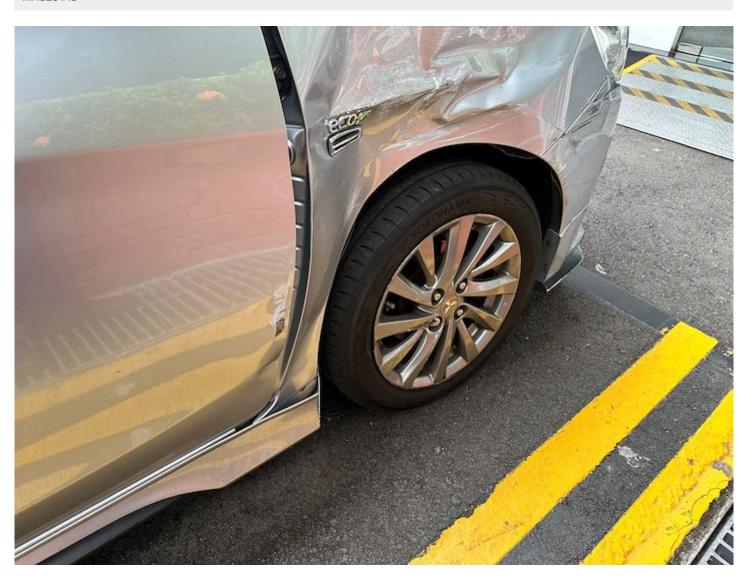












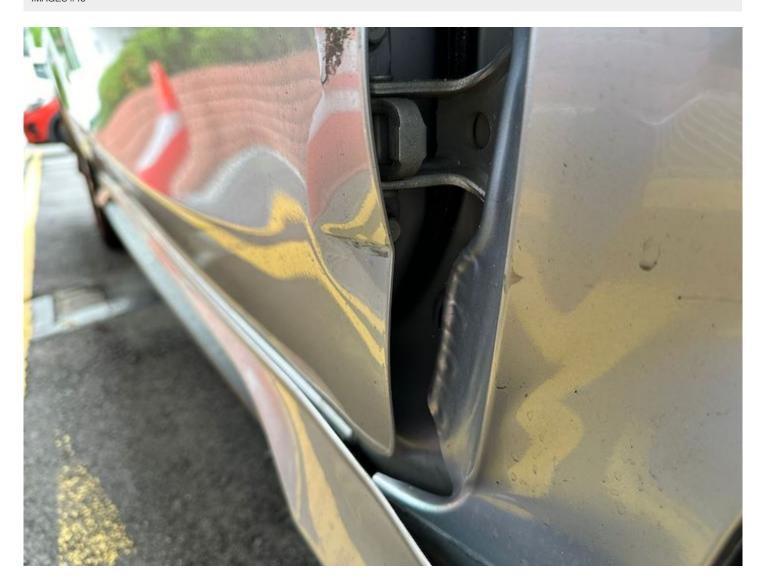


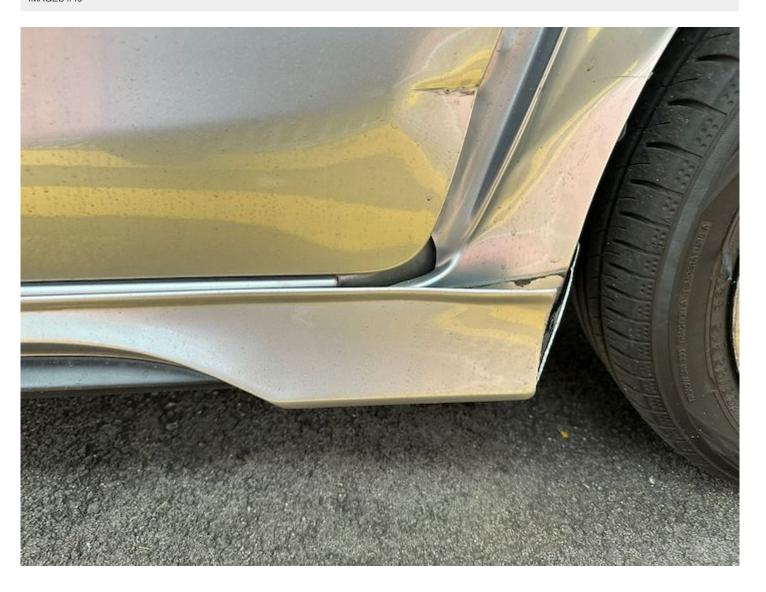


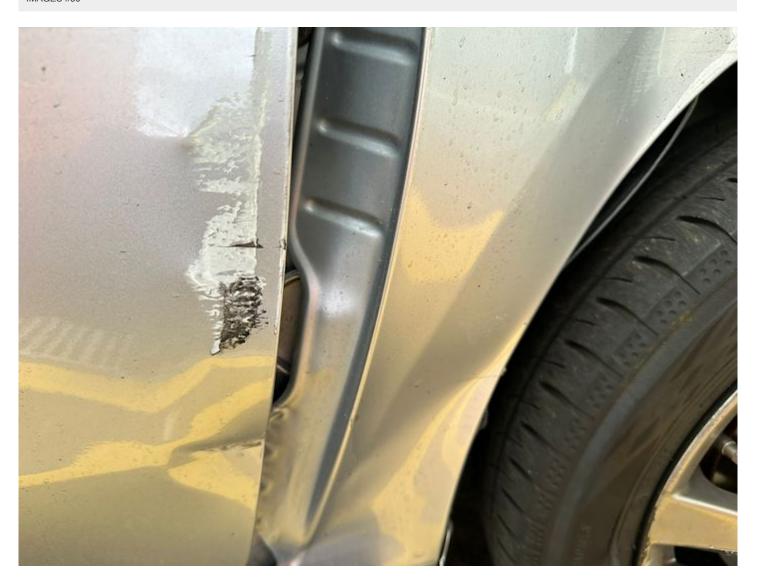


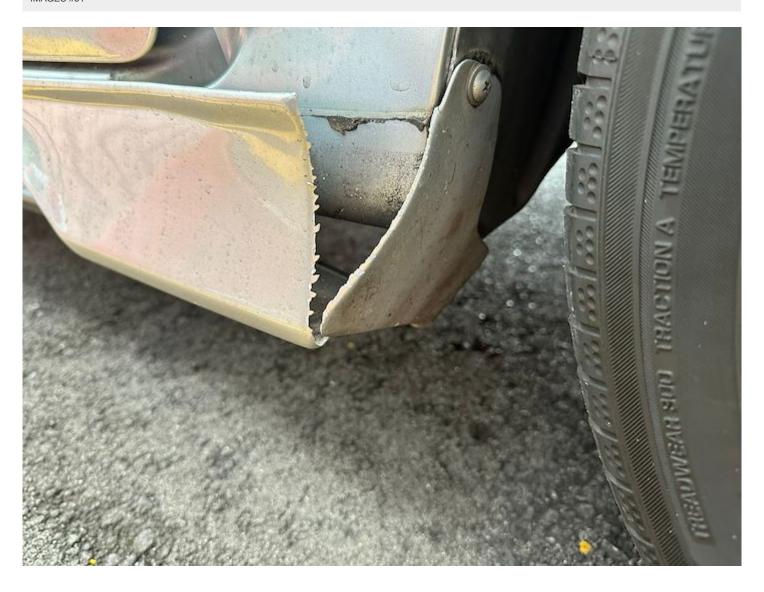


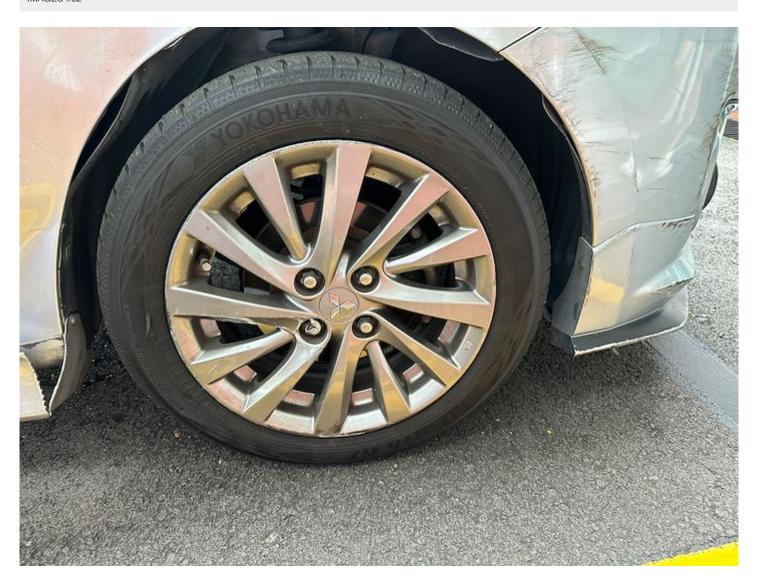


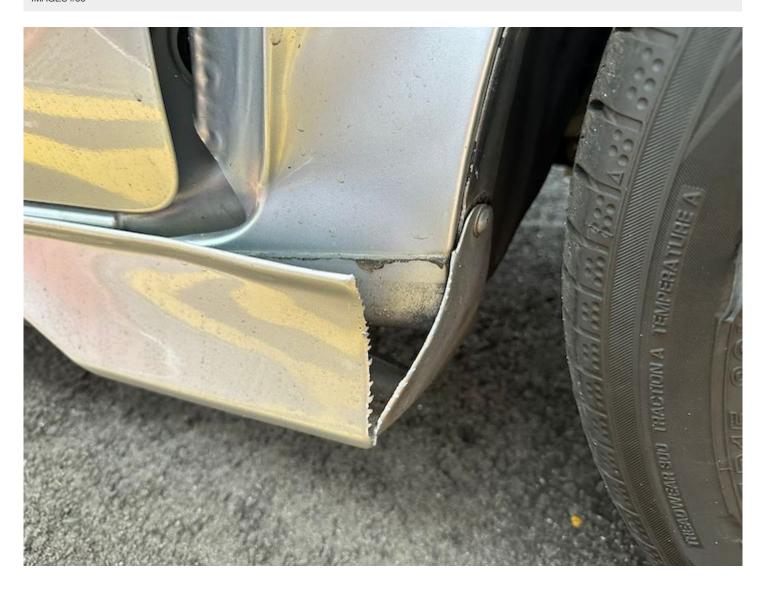


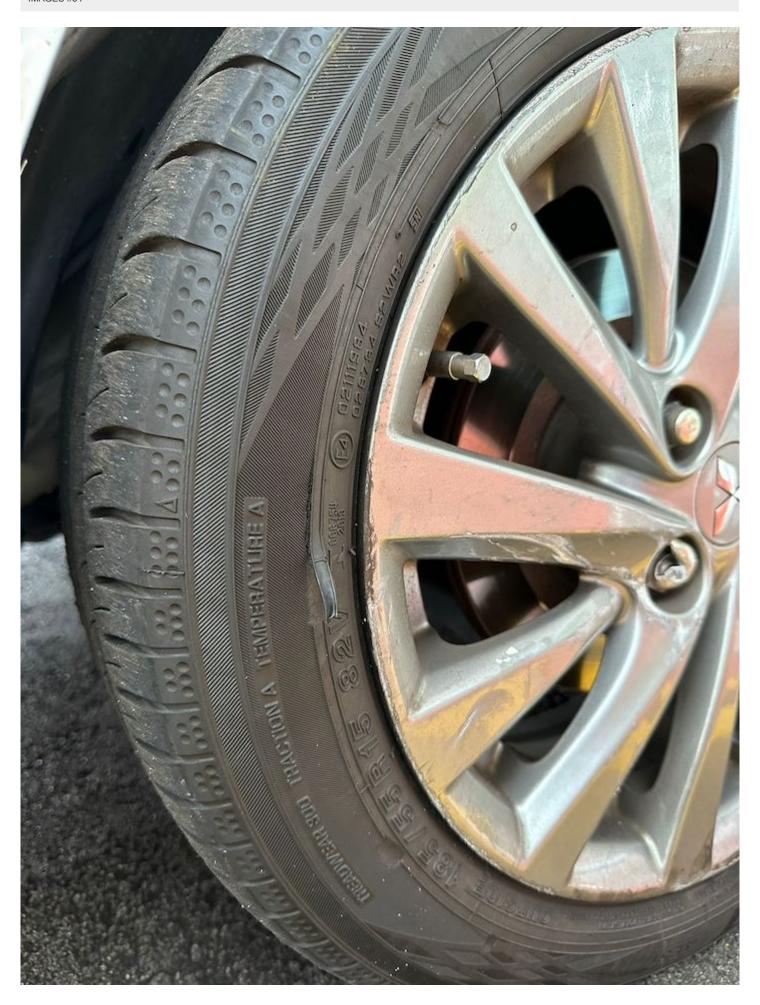






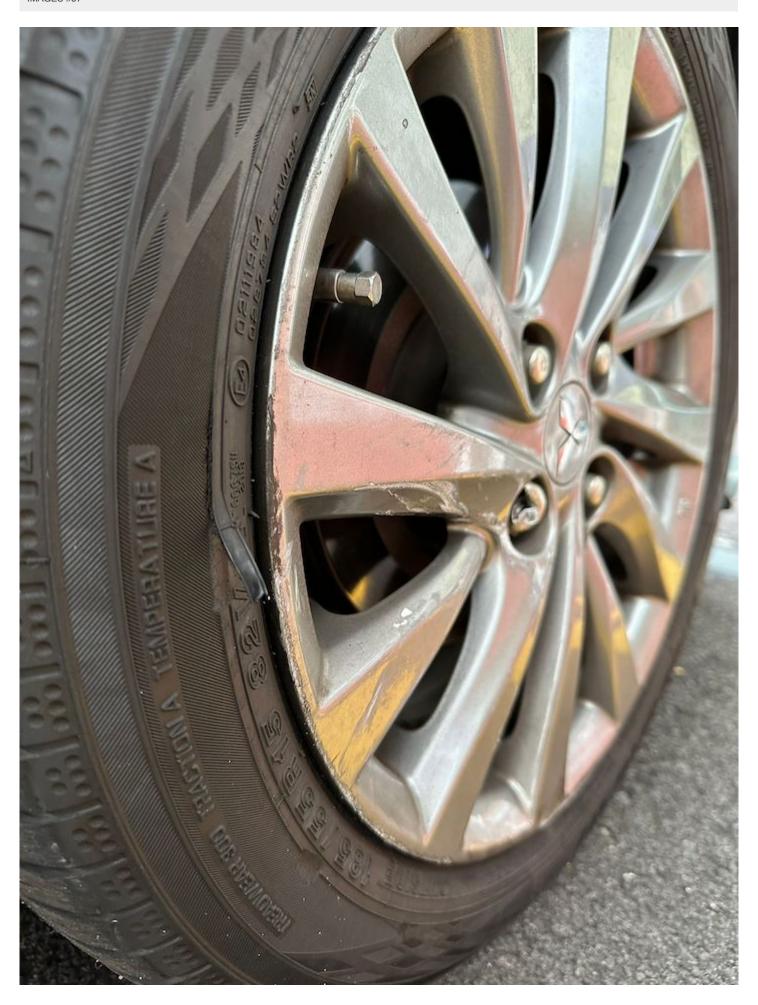


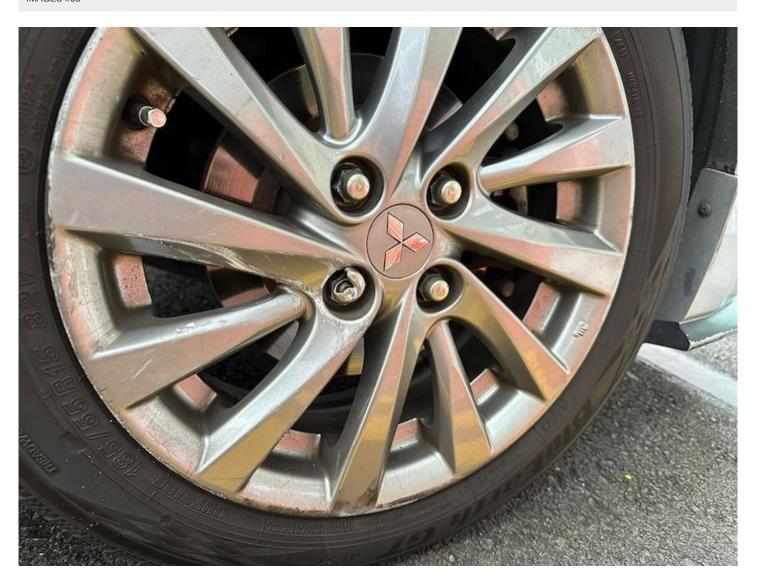




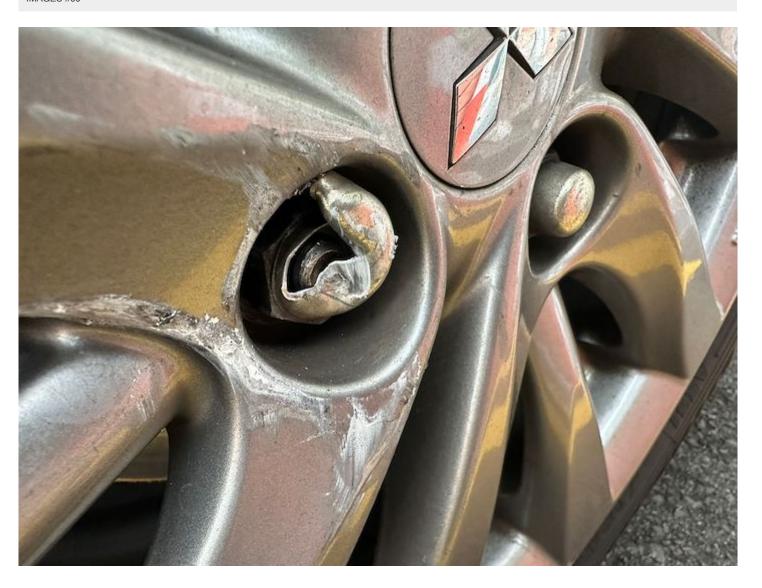


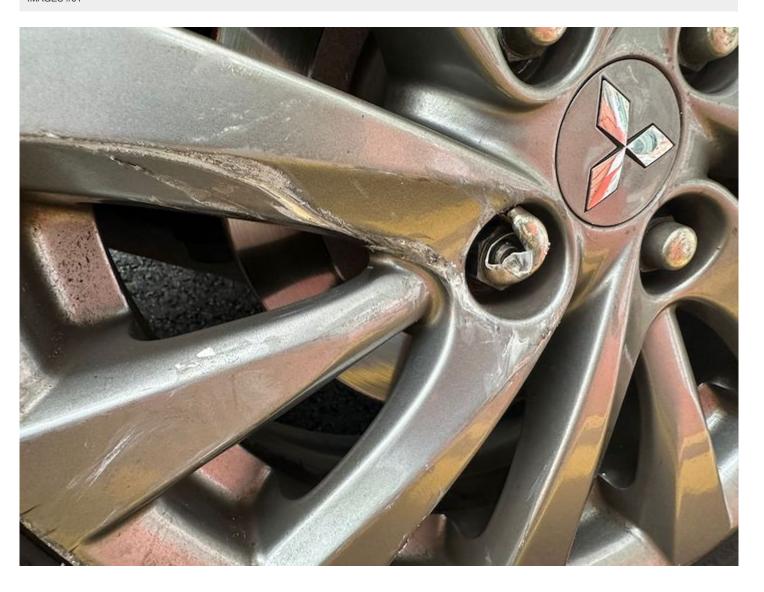


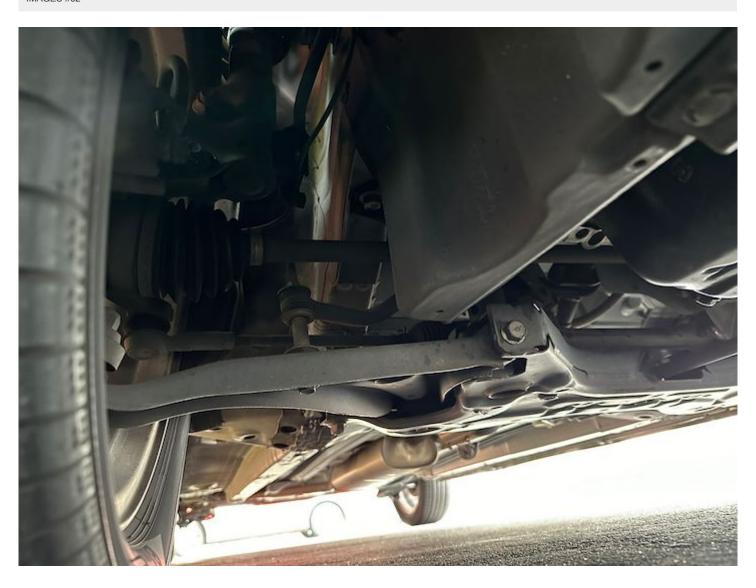


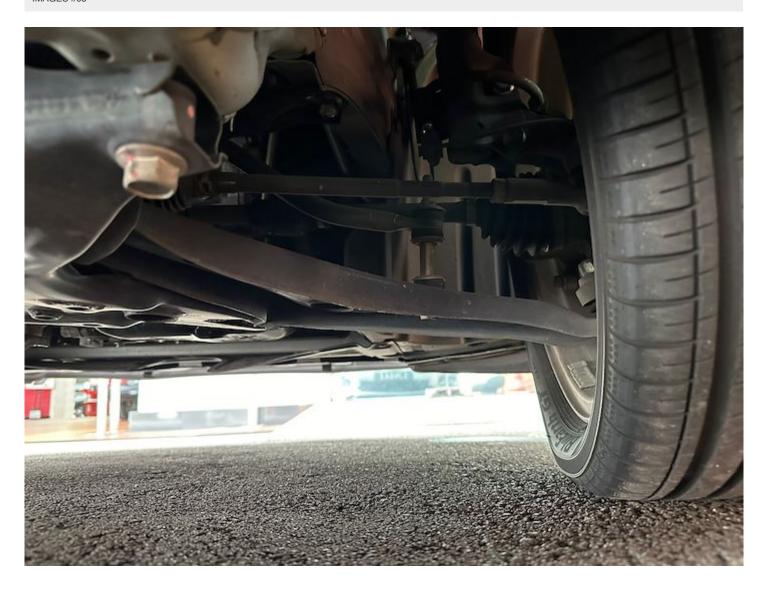
















1 of 3

Report No. E/20240814/7023

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000

Date/Time Report Made 14/08/2024 13:53	Vide Report No.			Station Diary No.
Name Of Informant Ho Jun Wei	Address Block 14 310014		Lorong 7 #20-22	5 HDB SINGAPORE
ID Type / ID No. NRIC NO / T0131219C			Mobile: 83820404	
Nationality SINGAPORE CITIZEN	Email Address xxxjunweixxx@gmail.com			
Occupation Medical and pharmaceutical products sales professional	Sex Male	Age 22	Date of Birth 06/10/2001	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 14/08/2024 07:20 - 14/08/2024 07:50	Location Of Incident Block 14 Toa payoh Lorong 7 #20-225 HDB SINGAPORE 310014			

Brief details.

Signature Of Officer Recording The Report:	Signature Of Informant:	
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.	
Signature Of Interpreter: Not applicable	Date/Time: 14/08/2024 13:53	
Officer In-Charge Of Case:	Classification Of Case:	





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20240814/7023

Police Report Regarding Accident at 521 Ang Mo Kio Avenue 5, Singapore 560521

I am filing this report regarding a traffic accident that occurred at 521 Ang Mo Kio Avenue 5. As I was driving towards a car park entrance on a road divided into two lanes--one designated for vehicles traveling straight in one direction and the other for vehicles traveling in the opposite direction--I signaled my intention to make a right turn.

I exercised caution by signaling well in advance and waiting patiently for all oncoming traffic in the opposing lane to clear. After confirming that there were no vehicles approaching from the opposite direction, I checked my blind spot and noted that a van was approximately five car lengths behind me. Given the ample distance and the fact that I had been signaling for an extended period, any prudent driver would have recognized my intention to turn right and allowed me the space to do so safely.

Unfortunately, the van driver chose to ignore my signal and, traveling at an excessively high speed, recklessly attempted to overtake me. He cut across the single white line dividing the lanes, despite it being a one-way road with strict no-overtaking rules. As I was in the process of making my right turn, the van collided with my vehicle.

The impact was severe and sudden, resulting in a loud, jarring noise and causing my head to snap sharply to the left. I have since been experiencing headaches and have sustained visible scratches from the collision. The incident was both traumatic and distressing, and I firmly believe that the van driver's reckless behavior was the sole cause of this accident.

Regrettably, I do not have a car camera installed in my vehicle, which would have provided clear evidence of the events as they unfolded. Therefore, I respectfully request that the police thoroughly investigate this matter, as I believe the van driver's actions were dangerous and unlawful. I am confident that a detailed investigation will demonstrate my careful and lawful conduct in contrast to the van driver's recklessness.

Your assistance in this matter would be greatly appreciated, and I hope for a fair and just resolution to this case.

Signature Of Officer Recording The Report:	Signature Of Informant:	
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.	
Signature Of Interpreter: Not applicable	Date/Time: 14/08/2024 13:53	
Officer In-Charge Of Case:	Classification Of Case:	





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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20240814/7023

TAN SIEW CHYE NRIC NO		
The state of the s		
	ID No	S1521204G
Male	Age	62-62
Chinese	Language	Chinese
Odd job person	Address	Block 509 AMK AVE 8 #08- 2750 HDB SINGAPORE 560509
Light tan	Build	Medium
160cm	Attire Last Worn	Work attire
Black	Hair Style	Medium-Natural Curls
Offender		
Ho Jun Wei		
NRIC NO	ID No	T0131219C
Male	Age	22
Chinese	Language	English
Medical and pharmaceutical products sales professional	Address	Block 14 Toa payoh Lorong 7 #20-225 HDB SINGAPORE 310014
83820404	Is Informant A Victim?	Yes
	Odd job person Light tan 160cm Black Offender Ho Jun Wei NRIC NO Male Chinese Medical and pharmaceutical products sales professional	Odd job person Address Light tan Build 160cm Attire Last Worn Black Hair Style Offender Ho Jun Wei NRIC NO ID No Male Age Chinese Language Medical and pharmaceutical products sales professional 83820404 Is Informant A Victim?

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: 14/08/2024 13:53
Officer In-Charge Of Case:	Classification Of Case: