SS2X248Q000H / SME MOTOR PTE LTD ENTRY DATE & TIME: 26/08/2024 15:25 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (26/08/2024 15:25 (SGT))

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.

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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

26/08/2024 15:25 (SGT) Both Policyholder and Actual Driver 24/08/2024 15:00 (SGT) PIE, Singapore JALAN TOA PAYOH TWDS CHANGI AIRPORT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNJ3019J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes PRIME CAR LIMO PTE LTD 201826883W SUPREMELEASINGSG@GMAIL.COM (Phone) +65-86836000

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number Honda Freed

Private hire

No - Claiming third party

Private car Auto

1500

Income Insurance Limited 5119742081-03-000066

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 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

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?

CIRCUMSTANCES OF ACCIDENT

Dry Dry

No

Clear

LAU KUM THIM

S1476271Z

25/08/1961

09/07/1982

42 YEARS AND 1 MONTH

SUPREMELEASINGSG@GMAIL.COM BLK 939 JURONG WEST STREET 91 #04-413

(Phone) +65-98007962

Collision - Head to Rear

Outdoor

3 Valid

Male

640939

No

No

Hirer

2 Yes No

Yes 1

No

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Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

ON 24/08/2024 AT AROUND 1500HRS ALONG PIE JALAN TOA PAYOH TOWARDS CHANGI AIRPORT (LAMP POST 750) SNJ3019J WAS HIT ON THE REAR WHEN VEHICLE STOP DUE TO HEAVY TRAFFIC. VEHICLE SNJ2104C HIT THE BACK OF MY VEHICLE A. I HAVE 5 PASSENGERS ONBOARD MY VEHICLE.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes No



DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

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)

SNJ2104C

_

_

-

Private car

7722

_

02

_

_

_

-

VEHICLE B

_

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Gender Phone No

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

LAU KUM THIM

Male

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-

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SNJ3019J

Yes

No

SELTERIAL

IMPORTANT NUTICE

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- 5. Any take reporting may be referred to the Traffic Police Department for investigation
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GRESSWORD STREET BANK FOR

Contribution of the contribution of Colleges

White each by Reporting Control September Stone are in NR dust bound.

On 24/8/2024 at around 2500 hrs along PIE Jalan Toa Payor Howards Chanji Arryon (Lamp post 750) aster SNJ 3019 J was hit on the rear when Vehicle stop due to heary traffic. refricle SNJ 21040 hit the back Of My various (A). I nove 5 parengers andward my various.

(A) SNJ 3019 J

(B) SNJ2104C





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240826/7048

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 26/08/2024 13:00 | | Vide Report No.: | Station Diary No. | | | |
|--|---------------|-------------------------------------|---|------------------|--|--|
| Informant | 's Particular | S | | | | |
| Name of Informant: LAU KUM THIM | | | Address 939 JURONG WEST STREET 91 #04-413 SINGAPORE 640939 | | | |
| ID Type / ID No.: NRIC NO / S1476271Z | | | Contact No.: Home/Office: | Mobile: 98007962 | | |
| Nationality: SINGAPORE CITIZEN | | Email: RAYMONDKTLAU.RL@GMAIL.COM | | | | |
| Sex: Male | Age: 63 | Date of Birth: 25/08/1961 | Type of Informant. Driver | | | |
| Race: Chinese | | | Language: English | | | |
| Occupation: Private-hire car driver | | | Driving Licence Information: Class: Date of Expiry: | | | |

| Type of Accident: | Injury Others | Drink Drive: Na | Date/Time of Accident: 24/08/2024 15:00 | Type of Location Straight Road | | | |
|-----------------------------|------------------|---------------------|---|-----------------------------------|--|--|--|
| Location: JALAN TOA PAYC | рн | | | | | | |
| Weather: Clear | | Road Surface Dry | | | | | |
| Traffic Flow: | | Traffic Control: | Traf | Traffic Volume | | | |
| | | | | | | | |

| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
|-------------|-----------|------|-------|-------|-----------|-----------------|
| SNJ2104C | Motor car | | | | | 0 |
| SNJ3019J | Motor car | | | | | 5 |

| Details of Person Involved | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing, NA |



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000



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Report No. T/20240826/7048

CONTINUATION OF REPORT

| Driver | | | | | | |
|-------------------|------------------------------|-------------|------------------------|-----------------------------------|---------|-----------------------------------|
| Name | LAU KUM THIM | | | ID No |)_ | S1476271Z |
| Related Vehicle | SNJ3019J (Motor car) | | | Conta | act No. | 98007962 |
| Hospital/Clinic | NATIONAL UNIVERSITY HOSPITAL | | | Class Drivin Licen Expir | g | Class: NIL Date of Expiry: NIL |
| Date Treatment | 24/08/2024 | 4/08/2024 E | | harge | NIL | |
| No. of Days grant | 05 | Degree o | Degree of Injury Serio | | US | |

Brief Details.

ON 24/08/2024 AT ABOUT 1500 HOURS ALONG PIE JALAN TOA PAYOH TOWARDS CHANGI AIRPORT. TRAFFIC WAS HEAVY, I WAS TRAVELLING ON THE EXTREME RIGHT LANE ON THE ABOVE MENTIONED ROAD. FRONT VEHICLE SLOWED DOWN AND STOP, HENCE I FOLLOW SUIT. SUDDENLY, I HEARD A LOUD BANG AND WHEN I ALIGHT, I REALISE IT WAS VEHICLE (B) WHO HIT ONTO THE REAR PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE. I HAVE 5 PASSENGERS ONBOARD MY VEHICLE.

AFTER THE ACCIDENT, I FELT DISCOMFORT AND WENT TO CONSULT A DOCTOR AND WAS GIVEN 05 DAYS MC FOR MY INJURY.

- (A) SNJ3019J
- (B) SNJ2104C



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



3 of

Report No. T/20240826/7048

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. 26/08/2024 13:00 | | | |
| Officer In Charge Of Case TP / AEIT / PHNG KAR SOON Contact No.: 65476439 | Classification Of Case: | | | |
| NP168 | | | | |