

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 First Submission	02/09/2024 22:37 (SGT)
Reported by	Actual Driver
Date of Accident	01/09/2024 16:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNM3845A
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	201426961K
Company Reg No	201426961K
Email Address	accident@lumens.sg
Mobile Phone No	(Phone) +65-87781765
Alternative Phone No	(Office) +65-87781765

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS 4DR SEDAN (AT)(2WD) HYBRID
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1798
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	23-MAA00601-R00

DRIVER

Name of Driver	ONG KOK HENG
NRIC No	S7105685F
Date Of Birth	09/02/1971
Occupation	Outdoor
Driving Pass Date	13/07/1993
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	31 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81891242
Alt. Phone Number	-
Email Address	accident@lumens.sg
Address	78 ANCHORVALE CRESCENT 05-20
Address complement	-
Postcode	544603
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	4
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)	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	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 01/09/2024 AT ABOUT 1620HRS I WAS DRIVING VEHICLE A(SNM3845A) ALONG PIE CHANGI WHERE I WAS GOING BACK HOME AT TAMPINES. WHILE DRIVING ALONG THE FIRST LANE ON PIE VEHICLE C(SMQ954D) JAMMED BRAKE AND AS I WAS ABOUT TO STOP VEHICLE B(SKX7161J) DID NOT MANAGE TO STOP ON TIME AND HIT THE REAR BUMPER OF MY VEHICLE AND WHICH MAKE MY VEHICLE TO HIT THE REAR OF VEHICLE C. AS FOR VEHICLE D(SME6192J) DID NOT MANAGE TO STOP ON TIME SHE CUT ONTO THE RIGHT SIDE OF ALL THE VEHICLES AND WHICH LED TO VEHICLE D SCRATCH THE RIGHT SIDE OF MY VEHICLE AND MY RIGHT SIDE MIRROR DROP. NO ONE WAS INJURED.

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 SKX8161J
Vehicle Manufacturer Mazda
Vehicle Model 5-DOOR HATCHBACK 1.5L SP.6EAT
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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 SMQ954D
Vehicle Manufacturer Mercedes
Vehicle Model CLA180 COUPE URBAN (R18 LED)
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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 3

Vehicle Registration Number SME6192J
Vehicle Manufacturer Kia
Vehicle Model CARENS 1.7 DCT DIESEL 5DR FWD
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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**

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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.



Policyholder's Signature / Date & Time

Onyiah K.

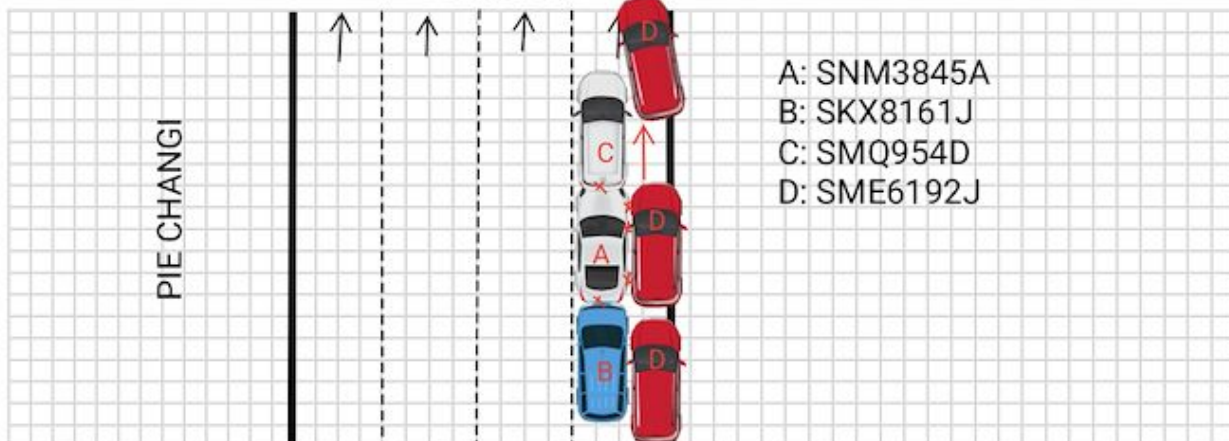
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

01/09/2024
2100hrs



Describe Circumstances of the Accident

ON 01/09/2024 AT ABOUT 1620HRS I WAS DRIVING VEHICLE A(SNM3845A) ALONG PIE CHANGI WHERE I WAS GOING BACK HOME AT TAMPINES. WHILE DRIVING ALONG THE FIRST LANE ON PIE VEHICLE C(SMQ954D) JAMMED BRAKE AND AS I WAS ABOUT TO STOP VEHICLE B(SKX7161J) DID NOT MANAGE TO STOP ON TIME AND HIT THE REAR BUMPER OF MY VEHICLE AND WHICH MAKE MY VEHICLE TO HIT THE REAR OF VEHICLE C. AS FOR VEHICLE D(SME6192J) DID NOT MANAGE TO STOP ON TIME SHE CUT ONTO THE RIGHT SIDE OF ALL THE VEHICLES AND WHICH LED TO VEHICLE D SCRATCH THE RIGHT SIDE OF MY VEHICLE AND MY RIGHT SIDE MIRROR DROP. NO ONE WAS INJURED.

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

01/09/2024
2100hrs



Witnessed by Reporting Centre Personnel













