# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

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

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 16/09/2024 15:53 (SGT) Reported by Actual Driver Date of Accident 14/09/2024 11:05 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information TOWARDS TUAS (3KM LAMP POST 269) Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number SKN38M

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LEE JEFF KINGSLEY NRIC No S1173183Z Email Address kingsleylee7jk@yahoo.com Mobile Phone No (Phone) +65-96600696 Alternative Phone No ......

#### VEHICLE PARTICULARS

Manufacturer

Model Harrier Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Private car Transmission Auto CC 2487 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

## INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd Policy Number / Cover Note Number Z24VP05035097

#### 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?	LEE YANG ZHEN, WANDA S8941554C 04/11/1989 Indoor 23/05/2012 3 Valid 12 YEARS AND 4 MONTHS Female (Phone) +65-97565833 - wanda.yangzhen@gmail.com 7 JALAN KEBAYA - 278297 No
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	DAUGHTER IN LAW 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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	2
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)	1
Has the driver been approached by unknown person(s)	Ma
soliciting/offering accident claims assistance? Translator's name	No
Translator's ID	-
Translator's phone number	_
Translator's email	-
Original language used in the statement	•
FOREIGN VEHICLE 1	
Vehicle Registration Number	VJB1084
Vehicle Category	Motorcycle
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name	Yes Traffic Police
Police Station Phone No Alt. Police Station Phone No	(Phone) +65-65470000 (Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT T/20240915/7011	

Accident report SN08249G0003

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Motorcycle
Name of Driver BATTMANATHAN A/L KUMARASAMY
Passport No/FIN 020328-02-0741
Contact Number (Phone) +60-182619631
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 raport 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 Traffic Police Department for investigation.
- 6. 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.
- 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)

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.

165EP 2024 Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) OWARDS lidu pos Sketch Plan

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Policyholder's Signature / Date & Time 
Actual Driver's Signature (if driver is not the policyholder) 
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Accident report SN08249G0003

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



T/20240915/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 4 Report No. T/20240915/7011

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made; 15/09/2024 02:56		de;	Vide Report No.: A/20240914/0170	Station Diary No.:	
Informant	s Particular		医异体性肾经 在 不是	SERVICE PROPERTY OF STREET	
Name of Informant: LEE YANG ZHEN, WANDA		Address: 7 JALAN KEBAYA SINGAPORE 278297			
ID Type / ID No.: NRIC NO / S8941554C		Contact No.: Home/Office: Mobile: 97565833			
Nationality: SINGAPORE CITIZEN		N	Email: WANDA.YANGZHEN@GMAIL.COM		
Sex: Age: Date of Birth: Female 34 04/11/1989		Type of Informant: Driver			
Race: Chinese			Language: English		
Occupation: Financial analyst			Driving Licence Information: Class: Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/09/2024 23:05	Type of Location Straight Road
Location: TELOK BLANGAH	CRESCENT			
Weather:		Road Surface:		
and the second		Road Surface: Dry Traffic Control:	Tra	ffic Volume:
Weather: Traffic Flow: One Way		Dry		ffic Volume:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKN38M	Motor car	TOYOTA	Harrier	Silver	Seriously Damaged	0
VJB1084	Motorcycle			Multi-Colored		1

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



Report No. T/20240915/7011

#### CONTINUATION OF REPORT

Driver	THE RESIDENCE OF STREET				
Name	LEE YANG ZHEN, WANDA		ID No.		S8941554C
Related Vehicle	SKN38M (Motor car)		Contact No.		97565833
Hospital/Clinic	NIL			of g ce & / Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			NIL	
No. of Days granted Medical Leave (MC)   NIL			Injury	NIL	
Rider	Control of the second		and the same of	STATE OF THE PARTY	A CONTRACTOR OF THE PARTY OF TH
Name	BATTMANATHAN A/L KUMARASAMY		ID No		020328020741
Related Vehicle	VJB1084 (Motorcycle)		Contact No.		+60182619631
Hospital/Clinic	NIL		Class Driving Licence Expiry	g e &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arce	NIL	L
No. of Days grante	ed Medical Leave (MC)   NIL	Degree of		NIL	

Location: Traffic accident along AYE towards Tuas, 3.1km, Lamp post 169

Time: Between 23:05 and 23:10

Perpetrator (Motorcyclist): Battmanathan A/L Kumarasamy

Malaysian ID: 020328-02-0741 License plate: VJB 1084 Phone number: +60-18-261-9631

My car description details: License plate: SKN38M

Make and model: Toyota Harrier

Description: I was driving along AYE towards Tuas in lane 2 (second lane from the right) and near the 3km mark and saw that there was traffic piling up ahead. As I slowed down slightly, I heard a loud skidding sound from behind. Upon checking my rearview mirror, I noticed that a motorcyclist in the furthest right lane, Iane 1 (and/or was splitting lane 1 and 2) had lost control of his bike presumably by slamming his brakes, which led to him skidding. Checking on the motorcyclist. Mr Battmanathan, he said he was obes. on the motorcyclist, Mr Battmanathan, he said he was okay.

As the motorcycle fell, the motorcyclist was thrown off and he tumbled away. At the same time, the motorcycle continued to spin forward due to the momentum of the fall and the speed the driver was going at, which led to the motorcycle shooting forward down the highway and hitting the entire right side of my car. That is, the motorcycle slid from the left side of lane 1 to right side of lane 2. This is evident from the marks on the rear right tyre and even more so with an entirely punctured front right tyre and dislodged front bumper of the car.

After falling, the motorcyclist stood up and walked away to the side. Two other motoryclists (JRX 9602 and JRR 1765) stayed around as well. As my car was situated in lane 2 but with an entirely busted type. I inched to the



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



3 of 4 Report No. T/20240915/7011

CONTINUATION OF REPORT

Damage to the naked eye includes but isn't limited to: damage to both rear tyre and front tyre and rims, of which the front tyre is entirely ripped and punctured, as well as a dislodged, scratched, and broken front bumper.

Witnesses that stayed around until the officers came include aforementioned two motorcyclists as well as a family in a black Audi.

Post calling 999, we were attended to by Sgt (2) Faris and Justis, who called EMAS and also took the SD card from the car and shared acknowledgement slip.



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



4 of 4 Report No. T/20240915/7011

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: 15/09/2024 02:56
Officer In Charge Of Case: TP / TPIB / MOHAMAD BURHAN BIN SABTU Contact No.: 65476214	Classification Of Case: