SS2X249H0009 / SME MOTOR PTE LTD ENTRY DATE & TIME: 17/09/2024 15:47 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (17/09/2024 15:47 (SGT))



SINGAPORE ACCIDENT STATEMENT

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 policy liability.

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.

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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 17/09/2024 15:47 (SGT) Both Policyholder and Actual Driver Reported by 16/09/2024 23:00 (SGT) Date of Accident **Exact Location of Accident** Tanjong Rhu Rd, Singapore Additional Location Information BESIDE MRT STATION Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

No - Claiming third party

Private car

Auto

1496

Vehicle Registration Number SFH3609L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LEE SIONG SIN NRIC No S7525499G **Email Address** JASON@LEAPTRON.COM Mobile Phone No (Phone) +65-96929638 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model C200 Variant 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

your vehicle? Vehicle Category

Transmission CC Vehicle Fuel First Regisration Date

Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company **ECICS** Limited Policy Number / Cover Note Number MPC24P00332700

DRIVER



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Name of Driver	CHUA WEILYN NATALIE
NRIC No	S8031334I
Date Of Birth	10/10/1980
Occupation	Indoor
Driving Pass Date	18/01/2001
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	23 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-81230916
Alt. Phone Number	-
Email Address	NATALIE_CHUA@HOTMAIL.COM
Address	201 TANJONG RHU ROAD #11-10
Address complement	-
Postcode	436917
Is the driver the policyholder?	No
If No. Relationship of the Driver with the Insured	Spouse
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Verificial Heighburgh Hamber of Outlet Verificial Commence by Exercise	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
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?	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)	
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	
DETAILS OF POLICE ACTION	
Was the assident reported to the police?	No
Was the accident reported to the police? Was notice of intended Prosecution given?	
	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I AM A GYNAECOLOGIST WHO HAD FINISHED A DELIVERY AT PARKWAY EAST HOSPITAL. I WAS DRIVING BACK HOME WHEN THE ACCIDENT OCCURED AT TANJONG RHU ROAD WITH A TAXI. I WAS AT THE MIDDLE LANE OF A 3 LANES. THE ROAD WAS JUST BESIDE THE TANJONG RHU MART EXIT. I HAD CLEARED THE HUMP AND WAS ON MY LANE (MIDDLE LANE) WHEN SUDDENLY, A TAXI SWERVED INTO MY LANE. THE TAXI WAS ON THE LEFT MOST LANE AND SWERVED TO HIS RIGHT, KNOCKING INTO THE PASSENGER SIDE OF THE FRONT END OF MY CAR. I JAMMED THE BRAKES. I WAS UNHARMED AND EXITED THE CAR. THE DRIVER OF THE TAXI TOOK A WHILE BEFORE GETTING OUT OF HIS TAXI FROM THE PASSENGER END. HE WAS UNHARMED. PICTURES TAKEN, CALLS WERE MADE.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No



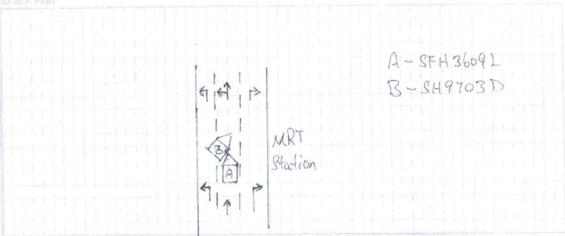
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH9703D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	E .
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	H.
Nature Of Damage	=
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT MOTICE

8 Consent under the Personal Data Protection Act (PDPA)



Describe Circumstance of the Accident	
I am a gynecologist who had finished a deliney a Parkwan East Hospital I was dring back home when the accordent occuped at Tanjong Rhu Road with a taxi.	
I will was at the middle lane of a 3 lane noodd. The road was just bride the Tanjons Rhn MRT exit 1. I had cleared the hump and was on my lane (middle lane) when Suddenly a taxi swerved into my lane.	
The faxi was on the left most lane and swerned to his right, Knocking into the passenger side of the front end of my car. I janned the breaks.	
I was unharmed and exited the car. The drihar of the taxi took a while before gether out of his taxi from the passanger and the hours unharmed.	
Pictures taken. Calls were made.	

Declaration I/We declare the

Policyholder's Signature / Date & Time

Wenessed by Reporting Centre Personnel (Name as in NRICAD card)