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 23/09/2024 15:30 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 22/09/2024 10:30 (SGT) Exact Location of Accident Tampines St. 21, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SMW8381Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner NG LEE KEOW NRIC No S1635888F Email Address REGANTAN9099@GMAIL.COM Mobile Phone No (Phone) +65-97334317 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Stream 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 Yes your vehicle? Vehicle Category Private car Transmission Auto CC 1800 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10514422R03

DRIVER

Name of Driver TAN YIK RONG REGAN NRIC No S9929818I Date Of Birth 13/09/1999 Occupation Indoor Driving Pass Date 02/08/2024 Driving License Pass Class 3A Driving License Validity Valid Driving experience 1 MONTH Gender Male Mobile Number (Phone) +65-97334317 Alt. Phone Number Email Address REGANTAN9099@GMAIL.COM Address BLK 612B TAMPINES NORTH DRIVE 1 #06-250 Address complement Postcode 522612 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 - Change/cross lane Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (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 REFER TO POLICE REPORT: T/20240922/7063. ATTACHMENT(S) Are accident photos available for attachment? Yes

No

Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLK6347K
Vehicle Manufacturer	-
Vehicle Model	-
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	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.

- 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.
- 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.

× Yhik

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan

700

Some

Describe Circumstance of the Accident				
	Refer	Pohice	Report	

Declaration

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

Policyholder's Signature / Date & Time

Driver's Smature (* driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2

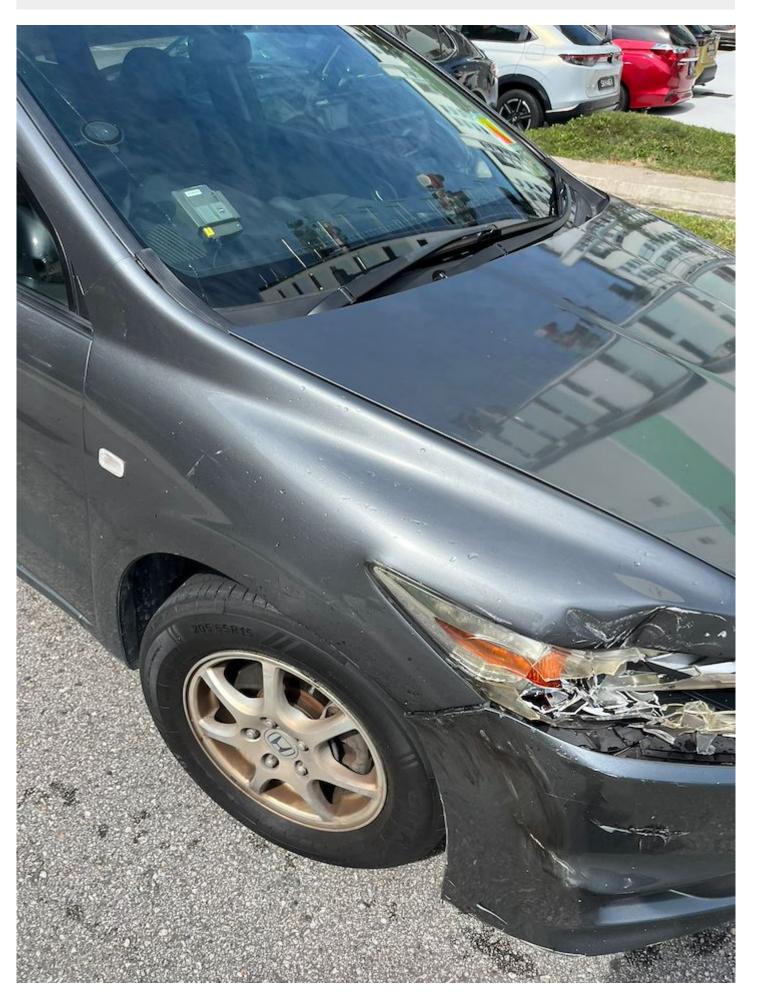


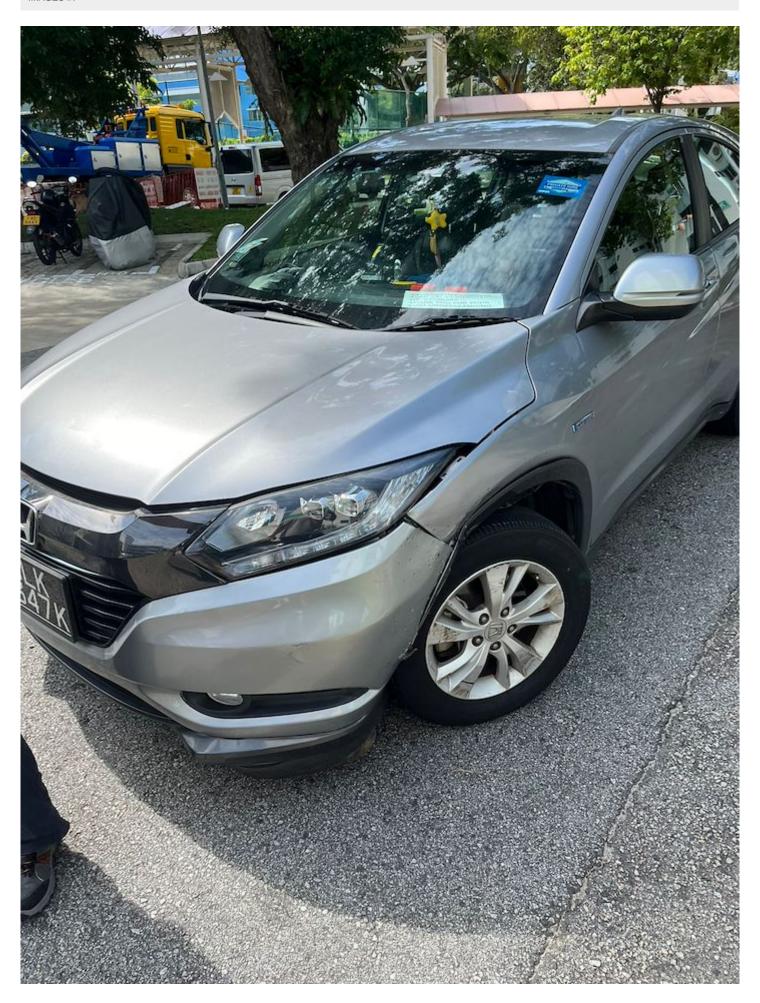






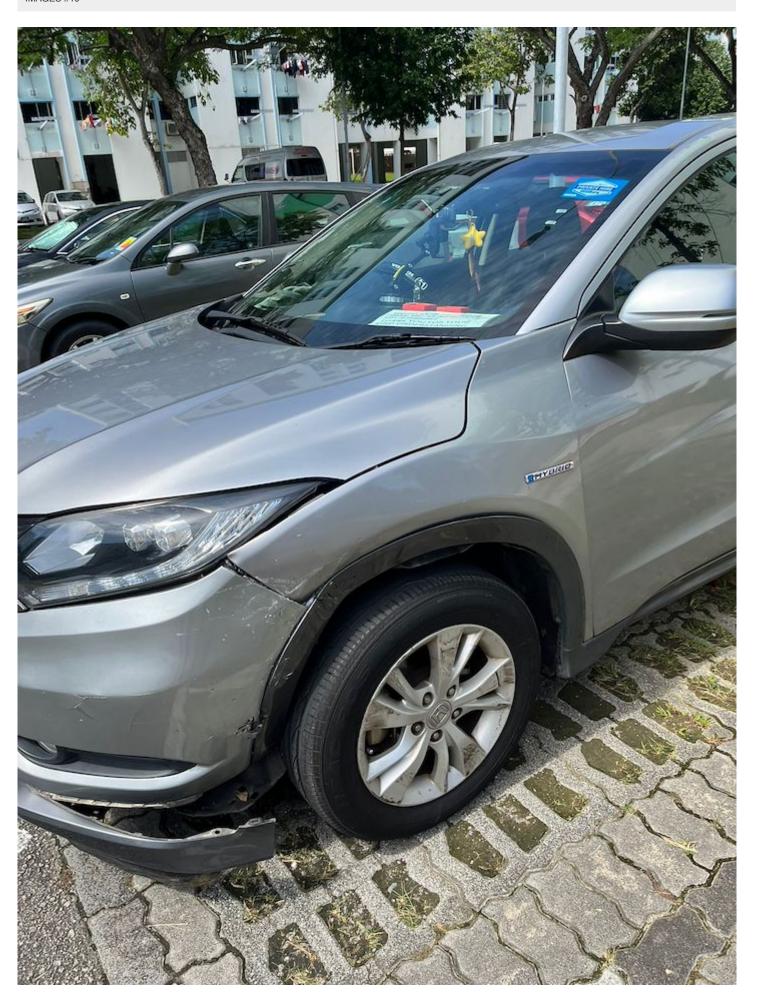


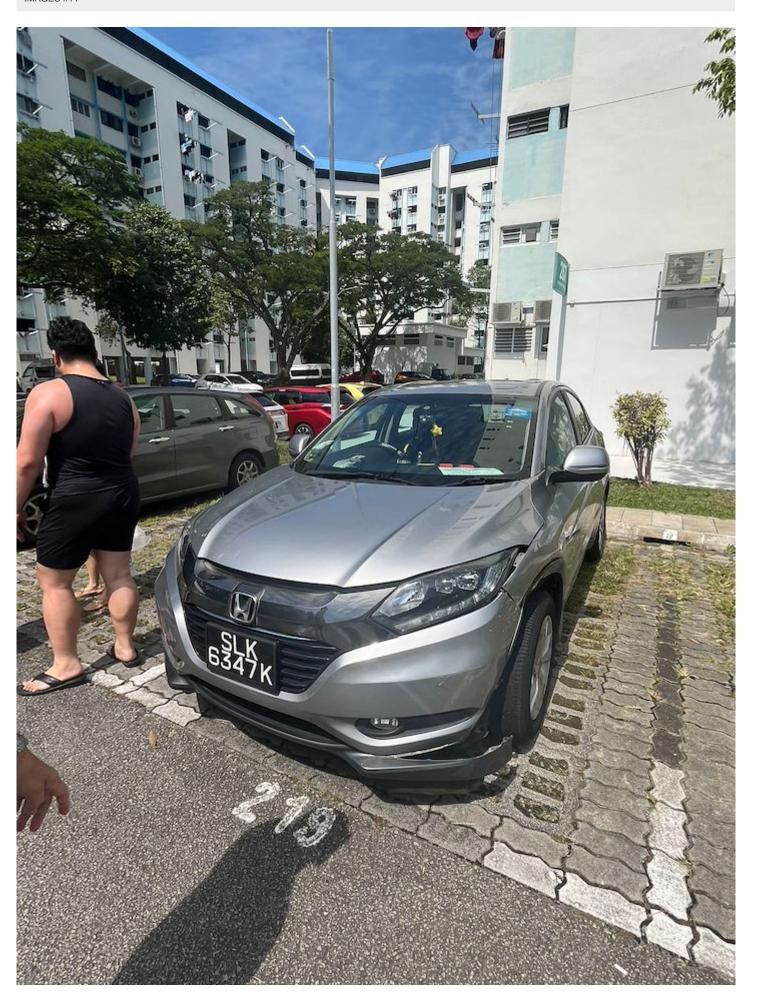


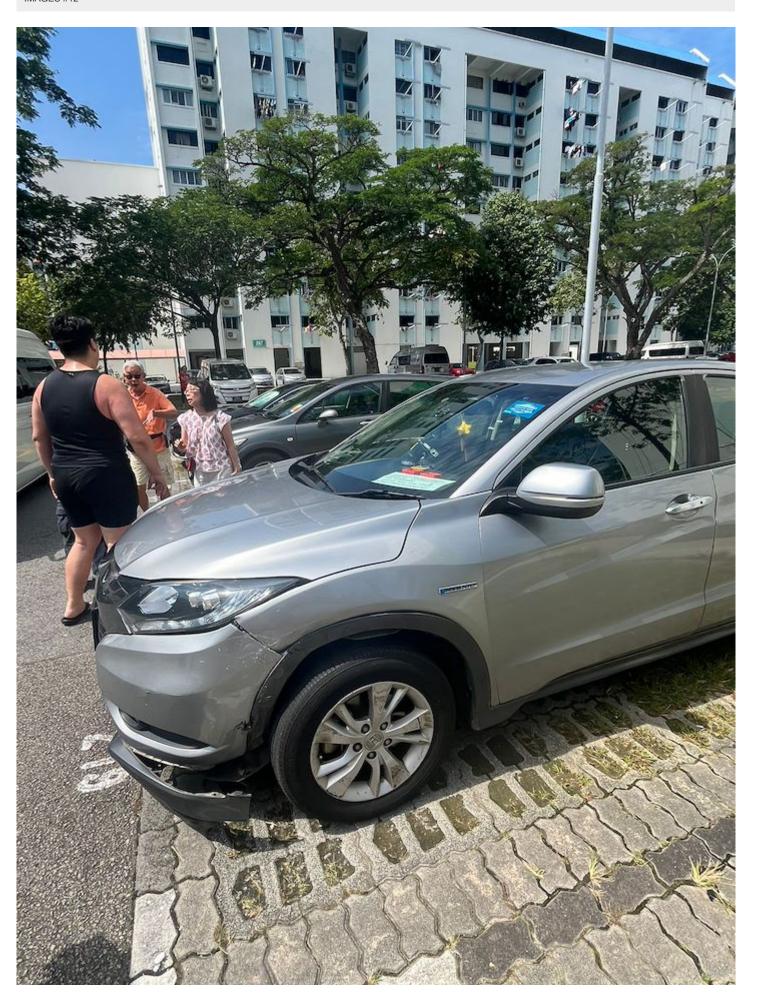


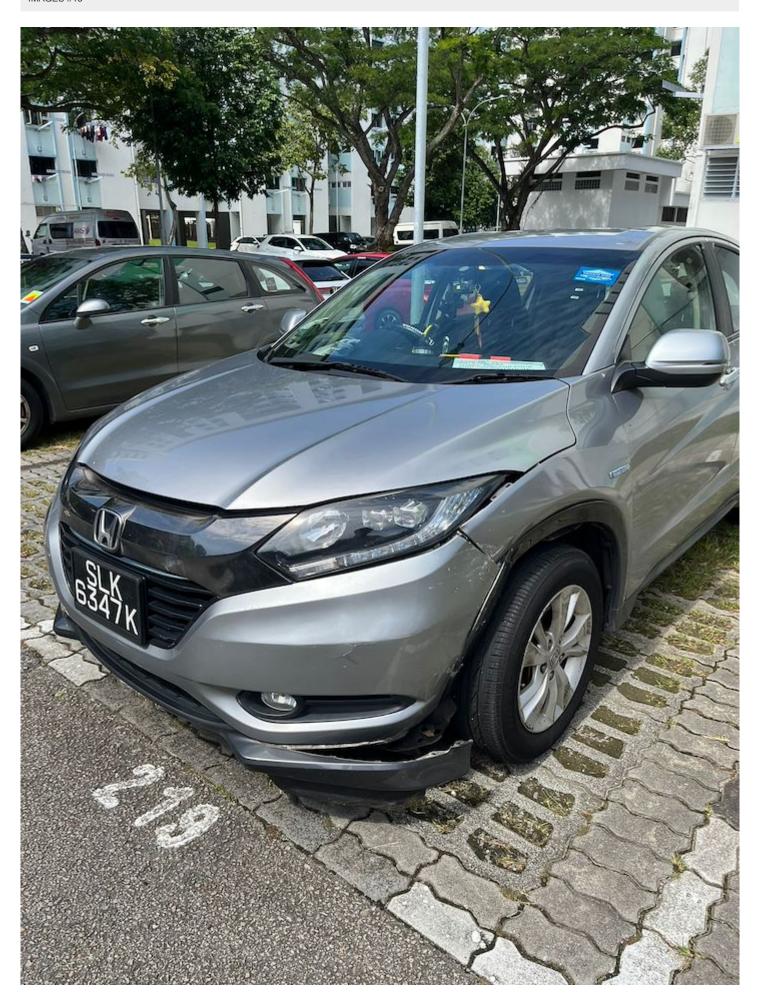
















1 of 3 Report No. T/20240922/7063

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/09/2024 22:07		Vide Report No.:		Station Diary No.		
Informen	re Particular	18				
Name of Informant: Tan Yik Rong Regan			Address: 612b Tampines North Drive 1 #06-250 SINGAPORE 522612			
ID Type / ID No.: NRIC NO / S9929818I		Contact No.: Home/Office:	Mobile: 97	Mobile: 97334317		
Nationali SINGAP	ty: ORE CITIZE	N	Email: regantan9099@gmail.co	om		
Sex: Male	Age: 25	Date of Birth: 13/09/1999	Type of Informant: Driver			
Race: Chinese		Language: English				
Occupation: Student		Driving Licence Information: Class: Date of Expiry:				

General Information	of the Accident				
Type of Accident:	Non-Injury Others	Drink D No	rive:	Date/Time of Accident: 22/09/2024 10:30	Type of Location: Car Park
Location: TAMPINES STREE	ET 21	1		,	
Weather: Clear		Road Surface: Dry			
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		10.000	ffic Volume: Traffic
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				vone conveyed by bulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLK6347K	Motor car	HONDA		Grey	Slightly Damaged	1
SMW8381Y	Motor car	HONDA	Honda Steam 1.8	Grey	Slightly Damaged	1

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SMW8381Y		P10514422R03	05/08/2024	26/01/2025



T202409227083

2 of 3 Report No. T/20240922/7063

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

CONTINUATION OF REPORT

Any Pedestrian In	unlund: No				
No. of Pedestrian:	s Injured: NIL	Use of Pedestrian Crossing: NA			
Driver					
Name	Tan Yik Rong Regan		ID No		S9929818I
Related Vehicle	SMW8381Y (Motor car)		Conta	ict No.	97334317
Hospital/Clinic	NIL		Class Drivin Licend Expiry	9	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	narge	TNIL	
No. of Days grant	ed Medical Leave (MC) NIL		Degree of Injury NIL		

Brief Details.

I have pictures of the damage done to both vehicles and a map which will describe the entire incident.

The incident happened in the carpark of Blk 267, Tampines St 21. After turning left and moving forward towards the gantry to exit the carpark, a vehicle moving at a high speed swerved in and hit my vehicle at my front right tyre. My vehicle was already straight, cleared of the left turn and moving straight towards the gantry when the collision occured. The vehicle which hit me was in the other lane (opposing traffic) after hitting me. I was moving at a reasonable speed of 10km/h.



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



3 of 3 Report No. T/20240922/7063

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: 22/09/2024 22:07
Officer In Charge Of Case: TP / AEIT / LEE GUANG HUI Contact No.: 65476414	Classification Of Case:
NP168	





Certificate of Insurance

Comprehensive Car Policy Policy Number: P10514422R03

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10514422R03 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number : SMW8381Y

Chassis Number : JHMRN68609C200483

2) Effective Date / Time of Commencement : 27/01/2024 (00:00) of Insurance for the Purpose of the Act

3) Date / Time of Expiry of Insurance : 26/01/2025 (23:59)

4) Excess (i) Policy : \$\$ 600.00 (ii) Windscreen : \$\$ 100.00

5) Policyholder : Ng Lee Keow

6) Persons or Classes of Persons Entitled to Drive*

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth : Tan Lit Hong(06/07/1965)

Named Driver(s) / Date of Birth : Ng Lee Keow (07/04/1964) Tan Jin Siang Ronald (21/12/1994) Tan Yik Rong Regan (13/09/1999)

7) Limitation as to use*

Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

8) Finance Company : Tokyo Century Leasing (Singapore) Pte Ltd

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on 05/08/2024

Auto & General Insurance (Singapore) Pte. Limited

Trading as Budget Direct Insurance

Simon Birch Chief Executive Officer



Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Dire** 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budge

