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.

 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 02/08/2024 10:55 (SGT) Reported by **Actual Driver** Date of Accident 01/08/2024 09:50 (SGT) Exact Location of Accident Woodlands Rd, Singapore Additional Location Information WOODLANDS ROAD TOWARD UPPER BUKIT TIMAH ROAD. Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Infiniti

Vehicle Registration Number SLZ9338M

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KOH SOON PHENG NRIC No. S1312509J Email Address NICKKJW@GMAIL.COM Mobile Phone No (Phone) +65-98185093 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Q50 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 your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1991 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1800028672

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 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	NICK KOH JING WEI S9143871B 14/11/1991 Indoor 18/05/2010 3 Valid 14 YEARS AND 3 MONTHS Male (Phone) +65-98185093 - NICKKJW@GMAIL.COM BLK 152C BEDOK SOUTH ROAD #06-510 - 463152 No Child No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface OTHER INFORMATION	Collision - Head to Rear Clear Dry
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	No 2 Yes No Yes 1 No
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?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT NO.T/20240801/7108	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB7579X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	_
Contact Number	-
Address	_
Address complement	=
Postcode	_
Insurance Company Name	=
Nature Of Damage	_
Details of property damaged in accident	VEH B
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	NICK KOH JING WEI
Gender	=
Phone No	=
Address	-
Address Complement	=
Post Code	=
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLZ9338M
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	_

SKETCH PLAN

IMPORTANT NOTICE

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- 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

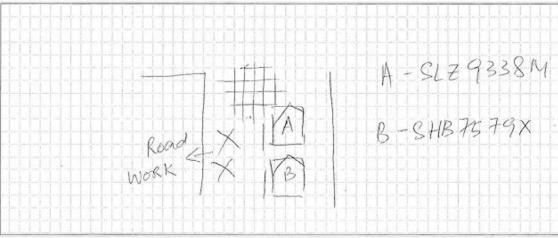
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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



1

Describe Circumstance of the Accident				
	P.P.	DA:co	Panal	
	Nefer	fonce	Report.	

Declaration

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

PolicyMolder's Signature / Date & Time

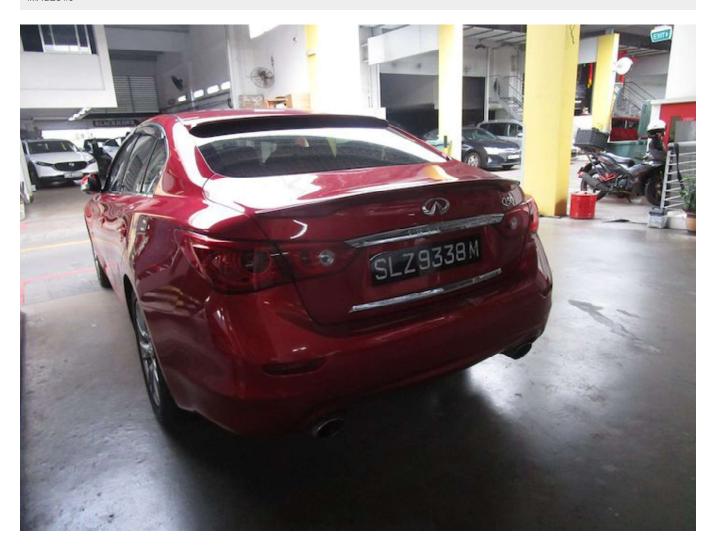
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel (Name as in NRICfiD card)

2

















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240801/7108

Date Time - F		IC ACCIDENT	100-	D					
Date/Time F 01/08/2024		ade:	Vide I	Report No.:				Station Diary No.:	
Informant's	Particula	rs	_		_				
Name of Info NICK KOH .		il	Addre 152C	ss: BEDOK SOUT	H ROAD #	06-510 SIN	IGAPO	DRE 463152	
ID Type / ID No.: NRIC NO / S9143871B			ct No.: /Office:		Mobile:	98185	5093		
Nationality: SINGAPOR	E CITIZE	N	Email:	JW@GMAIL.	СОМ				
Sex: Male	Age: 32	Date of Birth: 14/11/1991		Type of Informant: Driver					
Race: Chinese				Language: English					
Occupation: Singapore armed forces personnel			Driving Class:	g Licence Infor	mation:	Date of	Expiry	r:	
Type of Acci		f the Accident Non-Injury Hit and Run		Drink Drive; No		ne of Accid 024 09:50	ent:	Type of Location Straight Road	
Location: WOODLANE	OS ROAI	D							
Weather: Clear			Road :	Surface:					
			200000000000000000000000000000000000000	Control: ontrolled				raffic Volume: ight	
					Type of Collision: Between Moving Vehicles - Head To Rear				
One Way Type of Colli		nicles - Head To R	ear					ne conveyed by ilance:	
One Way Type of Colli Between Mo	ving Veh		ear				ambu		
	ving Veh			Model	Color	Conc	ambu		
One Way Type of Colli Between Mo Details of Ve	ving Veh	olved Make		Model	Color Red	Con	ambu No	ilance:	

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



T/20240801/7108

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20240801/7108

CONTINUATION OF REPORT

Driver						
Name	NICK KOH JING WEI		ID No),	S9143871B	
Related Vehicle	SLZ9338M (Motor car)		Contact No. 98		98185093	
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disch	arge	NIL	
No. of Days grante	ed Medical Leave (MC)	NIL	Degree of Injury		NIL	

Brief Details

I was driving along Woodlands Road (towards Upper Bukit Timah direction). As I was turning left towards Jalan Bumbong, my car was rear-ended by another car. The car drove off without stopping to address the collision.

I have a front-cam video that capture the audio of the impact that is more than 2MB. However, the date and time of the video is not accurate.



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



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Report No. T/20240801/7108

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: 01/08/2024 20:29
Officer In Charge Of Case: TP / HRT / KASMAWATI BTE SAMIAN Contact No.: 65476368	Classification Of Case:
NP168	



WEARNES AUTO PROTECTOR (INFINITI) PRIVATE VEHICLE

: 1800028672-05

Period of Insurance : 27 Mar 2024 to 26 Mar 2025 Issued Date : 18 Mar 2024 15:00

AGOVED HELE POLICY HOUSE

Name of Policyholder : KOH SOON PHENG

Address : 59 CHAI CHEE ROAD

#07-870

SINGAPORE 460059

Occupation/Nature of Business: Manager/Director/Management

Registration No. : SLZ9338M Engine Capacity/Tonnage: 1,991.00 CC Chassis No. : JN1BCAV37Z0530150 Engine/Motor No. : 274AE082552A

Seating Capacity: 5 First Year of Registration : 2018 Body Type : Sedan

Make/Model : INFINITI Q50 PREMIUM

Hire Purchase Company/Employer's Loan : OVERSEA-CHINESE BANKING CORPN LTD

ABOUT THE COVER

Sum Insured : Market Value Off Peak Car : No Driver Restriction : NA Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive :

a) The Policyholder b) Any after person who is driving on the Pelicyhelder's order or with his/her permission. This Policy will indemnify the Policyholder or any authorised driver only if heishe meets the specified age condition.

You have to pay an additional sum of SS\$3,000 as "Young and/or Inexperienced Oriver Excess" ("YIOR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has

: All Age Condition Age Condition Mileage Condition

: Unlimited Mileage Mileage Declaration Limitation as to use

Use only for social, demestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving fusion, driving fost, racing, pace-making, reliability Irial or speed-testing, the carriage of goods other than samples in connection with high Trade or business or use for any purpose in connection with high Trade.

Other Key Policy Benefits:

Act of God, Fisture and Accessories (Cosmolic), \$5000, NCD Protector, Solar Film-\$1150, In-Car Camera Excess Walver, PA Insured-\$10000, Strike, Rioss and Child Commolions, Glass Roof/ Moon Roof/ Sun Roof/ Pancramic Glass Roof, Windscreen / Windows, Medical Reimbursement-\$1000, Dealer + AlG Authorised Workshops, Key Reptacement Cover Optional-\$2000, Loss of Use 2000cc, Loan Protection, PA to Authorised Driver / Unnamed Passengers-\$10000, Personal Effects-\$1000.

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800 Premium : 8 1 582 98 GST (9%) : \$ 142.47

Property Damage - \$0 Total : \$ 1,725.45 Windscreen: \$100

Your Premium includes the following discount(s):

Named Driver KOH SOON PHENG - \$800 (Own Damage), \$800 (Floed Cover)

Loyally Discount - 8.00%, No Claim Discount - 50%