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 17/09/2024 12:57 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 17/09/2024 07:50 (SGT) Exact Location of Accident Bartley Rd, Singapore Additional Location Information BARTLEY ROAD SINGAPORE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Kia

11/02/2019 09:02 (SGT)

Vehicle Registration Number SMH8310G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **LUO JIAN** NRIC No S7284108E Email Address LJKCAL@HOTMAIL.COM Mobile Phone No (Phone) +65-90286158 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model CERATO 1.6(A) EX Variant KIA / CERATO 1.6(A) EX 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 1591 Vehicle Fuel Petrol First Regisration Date 11/02/2019 Chassis no KNAF3416MK5027488

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10504500R03

DRIVER

Effective Date/Time of Ownership

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	LUO JIAN \$7284108E 08/10/1972 Indoor 28/12/2017 3 Valid 6 YEARS AND 9 MONTHS Male (Phone) +65-90286158 LJKCAL@HOTMAIL.COM BLK 68 MACKENZIE ROAD 05-04 SINGAPORE 228687 228687 Yes No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Chain Collision Clear Dry

OTHER INFORMATION

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 email Original language used in the statement	Yes 3 No - Yes 1 No
FOREIGN VEHICLE 1	
Vehicle Registration Number	JVJ565

DETAILS OF POLICE ACTION

Vehicle Category

Was the accident reported to the police? Police Station Name Police Station Phone No	Yes Traffic Police (Phone) +65-65470000
Alt. Police Station Phone No Police Station Address	(Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? If yes, against whom?	No -

Motorcycle

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD TEL 67415336

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **JVJ565** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Motorcycle Name of Driver **ASMAWI BIN ALI** Passport No/FIN 830705145561 Contact Number (Phone) +65-93982565 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 **SLK5907B** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver SHEN YUN NRIC No S7555723Z Contact Number (Phone) +65-89262875 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

escribe Circumstance of the Accident		
Reter to 1	olice Report.	
eclaration		
	rticulars are true in every respect.	
you wish to claim against yo ust be made within the stipo	ur own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the clated timeframe from the day of occurence. Kindly check with your insurer for more details.	laim
Creal		
olicyholder's Signature / Date &	Firme Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Centre Person & Time (Name as in NRIC#D part)	inel

2

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 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.

- 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.

(year 17/09 bory

Policyholder's Signature / Date & Time

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

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

Sketch Plan

Towards
Tamping

Bartley Rood

LANE 1

SIK19078

LANE 2

LANE 3

LANE 3

1











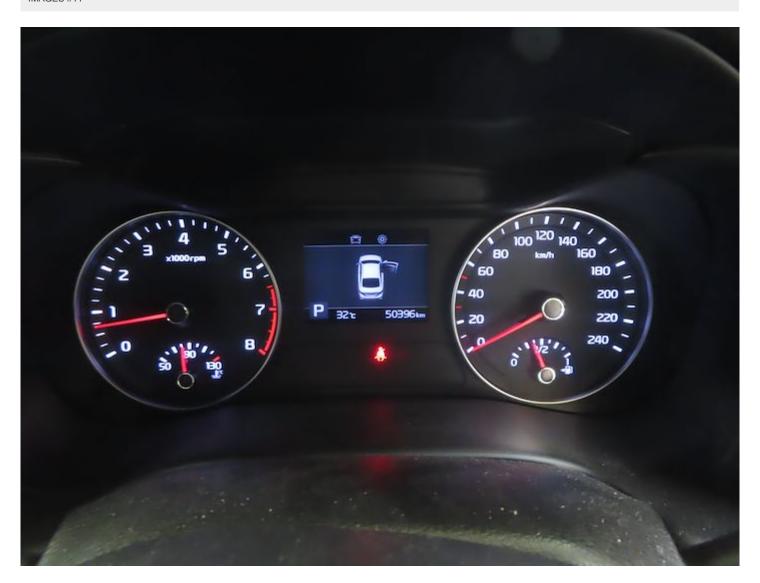


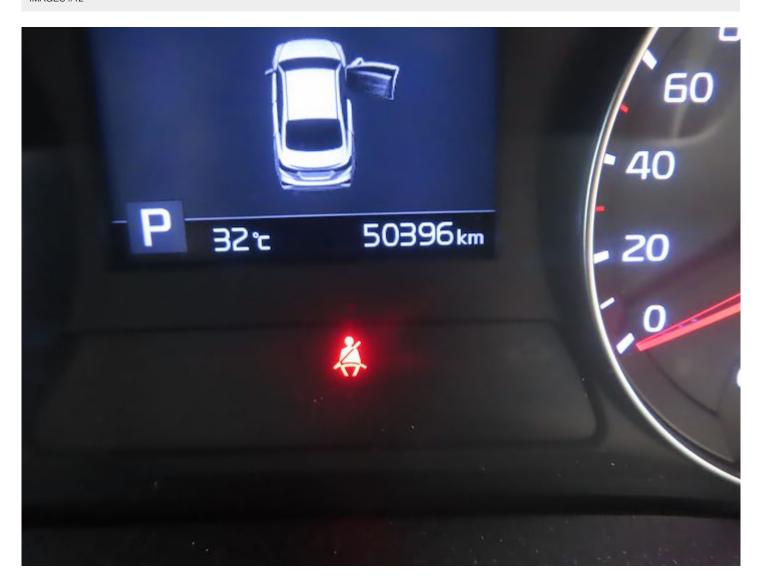




































Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 4 Report No. T/20240917/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/09/2024 11:18		de:	Vide Report No.: F/20240917/0038	Station Diary No.:	
Informan	's Particular	9			
Name of Informant: LUO JIAN		Address: 68 MACKENZIE ROAD #05-04 SINGAPORE 228687			
ID Type / ID No.: NRIC NO / S7284108E		Contact No.: Home/Office: Mobile: 90286158			
Nationality: SINGAPORE CITIZEN		Email: LJKCAL@HOTMAIL.COM	(
Sex: Age: Date of Birth: Male 08/10/1972		Type of Informant: Driver			
Race: Chinese		PS	Language: English		
Occupation: Management executive		Driving Licence Information: Class: Date of Expiry:			

General Information	of the Accident			
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/09/2024 07:50	Type of Location Straight Road
Location:				*
BARTLEY ROAD				
Weather: Sunny		Road Surface: Dry		
Traffic Flow: Two Way			Tra He	ffic Volume: avy
Type of Collision: Between Moving V	ehicles - Head To Rear			yone conveyed by bulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
JVJ565	Motorcycle	YAMAHA	Not sure	Black	Slightly Damaged	1
SLK5907B	Motor car	HONDA	VEZEL 1.5X CVT	White	Slightly Damaged	1
SMH8310G	Motor car	KIA	CERATO 1.6(A) EX	White		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SMH8310G	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10504500R03	11/02/2024	10/02/2025



T/20240917/7021

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20240917/7021

CONTINUATION OF REPORT

Details of Person					
Any Pedestrian In	- 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				20102-15
No. of Pedestrians Injured: NIL Use of Pede			edestrian	Crossin	g: NA
Driver			La constituto	-	
Name	ASMWAI BIN ALI		ID No		406251705
Related Vehicle	JVJ565 (Motorcycle)		Conta	ct No.	93982565
Hospital/Clinic	NIL		Class Drivin Licen Expir	g	Class: 2A Date of Expiry: 05/07/2026
Date Treatment	NIL	Date Dis	scharge	NIL	100
No. of Days grant	ed Medical Leave (MC) NIL	Degree		NIL	
Driver		100			
Name	SHEN YUN		ID No		S7555723Z
Related Vehicle	SLK5907B (Motor car)		Conta	ict No.	89262875
Hospital/Clinic	NIL		Class Drivin Licen Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Disch		scharge	NIL	
	ed Medical Leave (MC) NIL	Degree		NIL	
Driver	THE PERSON NAMED IN THE PE	10		10,000	
Name	LUO JIAN		ID No		S7284108E
Related Vehicle	SMH8310G (Motor car)		Conta	ict No.	90286158
Hospital/Clinic	NIL		Class Drivin Licen Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Dis	scharge	NIL	
No. of Days granted Medical Leave (MC) NIL Degree			NIL		

Brief Details.

Along Bartley Road towards Tampines road, opposite Bartley MRT Station, I am driving car plate SMH8310G in the middle lane (Lane 2) around 50 meter behind car SLK5907B. The traffic is heavy, the motor vehicle JVJ565 is trying to change lane from lane 1 to lane 2. At this moment, the car SLK5907B in front of JVJ565 come to an emergency stop, JVJ565 unable to stop in time, and bump into SLK5907B, I did an emergency break as well, but unable to stop in time and bump into JVJ565.

A police report was report, an ambulance was deployed even though none was injured. The motor JVJ565 driver was attended by the paramedics and after check and simple attendance, the motor JVJ565 driver get out from the ambulance and assist the police for the investigation. Both myself and SLK5907B driver assisted the investigation.



T/20240917/7021

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20240917/7021

CONTINUATION OF REPORT

The video camera memory card of both SLK5907B and SMH8310G been submitted to the police.

I am the driver of SMH8310G, my name is Luo Jian, my IC is S7284108E, my mobile number is 90286158. JV565 driver name is Mr. Asmawi Bin Ali, his work permit number is 406251705. Mobile number is 93982565. SLK5907B driver name is Mr. Shen Yun, IC number is S7555723Z.

The police case investigation officer is Ms Sharon Jo contact number is 96793952.



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



4 of 4

Report No. T/20240917/7021

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: 17/09/2024 11:18
Officer In Charge Of Case: TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	Classification Of Case:
NP168	