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 21/10/2024 17:13 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 20/10/2024 15:55 (SGT) Exact Location of Accident Singapore Additional Location Information CTE (WHAMPOA TOWARDS TOA PAYOH) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Hyundai

30/05/2019 08:05 (SGT)

Vehicle Registration Number SML6631Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LIM PENG HWEE NRIC No S7017154F Email Address LIMPENGHWEE@GMAIL.COM Mobile Phone No (Phone) +65-92224707 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model AD AVANTE 1.6 GLS (A) 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 1591 Vehicle Fuel Petrol First Regisration Date 30/05/2019 Chassis no KMHD841CMKU910845

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10888571R01

DRIVER

Effective Date/Time of Ownership

Name of Driver	LIM PENG HWEE
NRIC No	S7017154F
Date Of Birth	25/05/1970
Occupation	Indoor
Driving Pass Date	14/04/2016
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	8 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92224707
Alt. Phone Number	-
Email Address	LIMPENGHWEE@GMAIL.COM
Address	BLK 1 LORONG 7 TOA PAYOH 10-43 SINGAPORE 310001
Address complement	-
Postcode	•
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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	-
	-
Original language used in the statement	-
DETAILS OF POLICE ACTION	
Was the assident reported to the police?	Voc
Was the accident reported to the police? Police Station Name	Yes
Police Station Phone No	Traffic Police
Alt. Police Station Phone No	(Phone) +65-65470000
Police Station Address	(Fax) +65-65474900
Was notice of intended Prosecution given?	10 Ubi Avenue 3 Singapore 408865
If yes, against whom?	No
ii yes, against wildin:	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
	100

Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMC7832A
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Private hire
Name of Driver	-
Contact Number	-
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	SKX7383S
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	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
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	-
No. Of Passenger (Including Driver)	_

Describe Circumstance of the Accident Toa Payoh)	
Date of Accident: 30/Co/ Fime: 3:11/ Procession: C7E (Whampor Amy Vehicle A: SML 6631 Y Vehicle B: SMC 7832A Vehicle C: SKX 73835	was
My Vehicle A: SML 6631 Y Vehicle B: SMC 7832A Vehicle C: SKX 73835	
D: unknow	
Reper to the Police Rent No	
Refer the other Report No. T/2024 2020/2071	
6	
Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only	
ternanks : Please forward a copy of my efile accident Report to :	
My Workshop :	
Workshop Email Address :	
Note: Please take note that your insurer have a 14 days timeframe for you to submit own damage claim under your own	
policy. Kindly check with your own insurer for more information	
Declaration I/We declare the foregoing particulars are true in every respect.	
A A Source one recogning particulars are true in every respect.	
Olto silvelan	
13/2/ 21/10/24	
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 SA1C24ALM002

vJun2022

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.
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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 aforesald.
- 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:

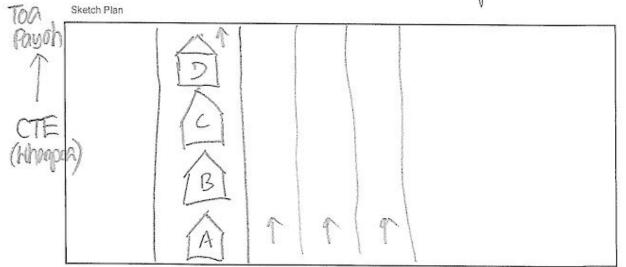
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of 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/faw 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.

21/10/24 Policy bender's Signature / Date & Time

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

Witness 2 by Recording Centre Personnel (Name as the NRIC/ID card)













































Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20241020/7071

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/10/2024 22:56		Vide Report No.:	Station Diary No.:			
Informan	t's Particular	'S				
Name of Lim Peng	Informant: Hwee		Address: 1 Lor 7 Toa Payoh #10-4	3 SINGAPORE 310001		
	e / ID No.: Contact No.: Home/Office:		Mobile: 92224707			
Nationali SINGAP	ty: ORE CITIZE	N	Email: limpenghwee@gmail.com	n		
Sex: Age: Date of Birth: Male 54 25/05/1970			Type of Informant: Driver			
Race: Chinese		Language: English				
Occupation: Tutor		Driving Licence Information: Class: 3 Date of Expiry:				

General Information	of the Accident			
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/10/2024 15:55	Type of Location: Straight Road
Location: WHAMPOA DRIVE		Road Surface:		
Clear Dry				
Traffic Flow: One Way				fic Volume: vy
Type of Collision: Between Moving V	ehicles - Head To Re	ear		one conveyed by oulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKX7383S	Motor car	NISSAN	Qashqai	White	Slightly Damaged	2
SMC7832A	Motor car	TOYOTA	Sienta	Brown	Seriously Damaged	2
SML6631Y	Motor car	HYUNDAI	AD AVANTE 1.6 GLS (A)	Grey		1

Details of Vel	nicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SML6631Y	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10888571R01	30/05/2024	29/05/2025



T/20241020/7071

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20241020/7071

CONTINUATION OF REPORT

Details of Person	Involved					
Any Pedestrian In	volved: No					
No. of Pedestrians	s Injured: NIL		Use of Pec	destrian	Crossin	g: NA
Driver					Mark 1	
Name	Lim Peng Hwee			ID No	,	S7017154F
Related Vehicle	SML6631Y (Motor car)		Conta	ict No.	92224707	
Hospital/Clinic	NIL			Class Drivin Licen Expir	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disci	harge	NIL	
No. of Days grante	ed Medical Leave (MC)	NIL	Degree of	Degree of Injury		

Brief Details.

(As stated on this page: I have videos and pictures exceeding 2MB)

This accident involved 4 cars along CTE (Moulmein Road towards Toa Payoh) but the first car driver fled the scene according to the second car driver. Hence 3 cars were left at the scene. I was the fourth car driver and could not verify the second car driver's words. I was also not sure if there are any damages to any person, car or public facility resulting from the encounter between the first and second driver.

The second car driver said he has the footage of the first car in his car camera. The third car driver called the police on site. I was advised by the car insurance company to report this officially, hence I am sending this report.

According to the second car driver (white Nissan Qashqai SKX 7383S), the first car suddenly cut into his lane at high speed, causing him to jam brake. The third car SMC 7832A (dark brown Toyota Sienta, SMC 7832A) hit his car and jam brake too. I then hit SMC 7832A.

The parties involved took pictures of the cars and telephone numbers were added into a whatsapp group.



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



3 of 3 Report No. T/20241020/7071

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: 20/10/2024 22:56
Officer In Charge Of Case: TP / HRT / IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
NP168	

It pays to choose Budget

Certificate of Insurance

Comprehensive Car Policy Policy Number: P10888571R01

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 P10888571R01 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number SML6631Y

Chassis Number KMHD841CMKU910845 30/05/2024 (00:00)

2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act

3) Date / Time of Expiry of Insurance 29/05/2025 (23:59)

(i) Policy 4) Excess S\$ 400.00 (ii) Windscreen 5\$ 100.00

Policyholder Lim Pena Hwee

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 Lim Peng Hwee(25/05/1970)

Named Driver(s) / Date of Birth Lim Peng Yeow (04/05/1966)

7) Limitation as to use*

Use only for social, domestic and pleasure purposes and for the business purposes of the drivers listed above. 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.

8) Finance Company NA

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 13/05/2024

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 Direct Insurance 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

^{*} 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.