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 25/10/2024 17:26 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 25/10/2024 04:00 (SGT) Exact Location of Accident 228A Punggol Fld, Singapore 821228 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNQ8972L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **BOEY CHEE SIONG** NRIC No. S9172451J Email Address

BOEYCHEESIONG@GMAIL.COM

Mobile Phone No (Phone) +65-87113691

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi

Model A3 SEDAN 1.4 TFSI (AMBIENTE)

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 1395 Vehicle Fuel Petrol

First Regisration Date 22/12/2015

Chassis no WAUZZZ8V3G1032511 Effective Date/Time of Ownership 02/07/2024 03:07 (SGT)

INSURANCE COMPANY

Name of Insurance Company Singapore Life Ltd

Policy Number / Cover Note Number 13269082

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 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 Insurance Company of Other Vehicle Owned by Driver	BOEY CHEE SIONG S9172451J 26/02/1991 Outdoor 05/07/2010 3 Valid 14 YEARS AND 3 MONTHS Male (Phone) +65-87113691 - BOEYCHEESIONG@GMAIL.COM BLK 228A PUNGGOL FIELD 13-110 SINGAPORE 821228 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked 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 phone number Translator's email Original language used in the statement	No 8 No - Yes 0 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	
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	SMG963E
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 2

Vehicle Manufacturer-Vehicle Model-Vehicle Variant-Vehicle Colour-Vehicle CategoryPrivateName of Driver-	
Vehicle Variant-Vehicle Colour-Vehicle CategoryPrivate	
Vehicle Colour - Vehicle Category Private	
Vehicle Category Private	
Name of Driver	car
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	SJQ9034K
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 4

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	_
Contact Number	_



Address	 	 	 	 	 _
Address complement	 	 	 	 	 . <u>-</u>
Postcode	 	 	 	 	 _
Insurance Company Name	 	 	 	 	 _
Nature Of Damage					
Details of property damaged in accident					
No. Of Passenger (Including Driver)					

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage	GBH5390A Commercial vehicle
Details of property damaged in accident No. Of Passenger (Including Driver)	<u>.</u>

DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number	SKW8063P
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 7

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)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised 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 Police for investigation.
- 6. The 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

WOCT 2024

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

DAPKING LOT ver 6:2Kmb0036 veh 0: 070 9034K veh A: SNQ 8972L voh H: Unknown

veh B: 5mg 963 E

veh C: SJA 8177K

Veh E = Unknown voh F: GBH 5390A

Refer	to	police	report.	poport	number: T120241005/7053.	
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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

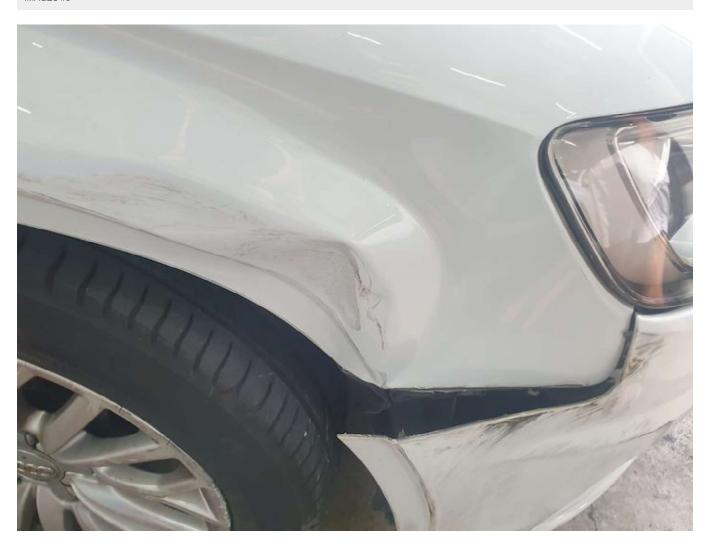
Witnessed by Reporting Centre Personnel





































Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20241025/7053

REPORT OF A TRAFFIC ACCIDENT

Date/Tim 25/10/202	e Report Ma 24 13:09	ide:	Vide Report No.: F/20241025/0042	Station Diary No.:
Informan	's Particular	S		
Name of Boey Che	Informant: ee Siong		Address: 228A Punggol Field #13-110 SIN	GAPORE 821228
ID Type / NRIC NO	ID No.: / S9172451	J	Contact No.: Home/Office:	Mobile: 87113691
Nationalit SINGAPO	y: DRE CITIZE	N	Email: boeycheesiong@gmail.com	
Sex: Male	Age:	Date of Birth: 26/02/1991	Type of Informant: Vehicle Owner	A CONTRACTOR OF THE STATE OF TH
Race: Chinese			Language: English	
Occupation Singapore		es personnel	Driving Licence Information: Class:	Date of Expiry:

Type of Accident:	Non-Injury Attended by Police	Drink Dri No	ve: Date/Time 25/10/202	of Accident: 4 03:10	Type of Location Car Park
Location: PUNGGOL FIELD			•	+	
Mosther		Road Surface:			
		Road Surface: Dry			
Weather: Clear Traffic Flow: One Way				1	iic Volume: Traffic

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SNQ8972L	Motor car	AUDI	A3	White	Totally Damaged	5

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNQ8972L	AVIVA LTD	13269082	02/07/2024	21/12/2025



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

2 of 3 Report No. T/20241025/7053

CONTINUATION OF REPORT

Details of Person	Involved				
Any Pedestrian In	volved: No				7,000
No, of Pedestrians	Use of Pedestrian Crossing: NA				
Vehicle Owner					
Name	BOEY CHEE SIONG		ID No		S9172451J
Related Vehicle	NIL		Contact No.		87113691
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	
No. of Days grant	ed Medical Leave (MC) NIL	Degree of I	njury	NIL	

Brief Details.

I have pictures of my vehicle damages, and a video from a far (which may not help)
I arrived home from 2100 day prior (24 Oct 2024). Incident happened approximately 0310 on 25 Oct based on timestamp from my neighbour's IVC (i do not have the video file)

Only aware of the accident that happened because my neighbourhood whatsapp chat shared about the incident, and i had the namecard left from the police officer, and the damages of my vehicle.



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



3 of 3 Report No. T/20241025/7053

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: 25/10/2024 13:09			
Officer In Charge Of Case: TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	Classification Of Case:			

NP168



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THERD-PARTY RISKS) RULES, 1999 (PEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THERD-PARTY RISKS AND COMPENSATION) ACT 1990 (REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THERD-PARTY RISKS AND COMPENSATION) ACT 1990 (REPUBLIC OF SINGAPORE)
OR ANY AMESSMENT, ACT OR ACT S PASSED IN SUBSTITUTION THE REOF.

CERTIFICATE NUMBER, 13269082

SNQ8972L

Boey Chee Stong

02-Jul-2024 00:00hours

21-Dec-2025 23:59hours

- 1) VEHICLE REGISTRATION NO.
- 2) NAME OF INSURED

FAMILY NAME GIVEN NAME

- 3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT
 - 4) DATE OF EXPIRY OF INSURANCE
 - 5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

You and any driver aged 30 m over

Provided that the person drawing is permitted in accordance with the licensing or other laws or regulations to drive the Moure Vehicle or has been to permitted and is not disqualified by order of a Coort 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 and its registration under the Road Traffic Act has not been carecifed at the time of accident or loss.

Please prier to the policy document for full terms and conditions

6) LIMITATIONS AS TO USE*

Use unity for social, domestic and pleasure purposes and for the hastred's business. The Policy does not cover use for line is reward, fultion or driving tests, recing, pace-making, reliability trials, speed-resting or the carriage of goods other than samples in connection with any trade or business or use for any purpose is connection with the Motor Trade.

- Lacratums residend university by Section 8 of the Moser Vehicles (Third-Pury Mike and Componenties) Act 1860 and Section 95 of the Road Temport Act, 1987 (Malaysia), also not to be redicted under these headings.
- 7) FINANCE COMPANY

Li 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 and Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 29-Jun-2024 at 23:57hours

IMPORTANT NOTE

If you want to cancel your policy at any time, you will need to return the certificate to us

You must report all accidents to Us within 24 hours of the occurrence or by the next working day at our accident reporting comes organized of whether you strend to claim on your own policy or not, or whether your car is damaged as not. Should you fail to do so, Your NCD could be affected and your claim may be projectived.

For the list of our accident reporting convex, please visit https://winglefc.com/en/claims/singlefe-approved-car-Alternatively, you may call us at 6333 2222 for assistance (including assistance on windscreen damage).

In case of accident or windscreen damage, please salt 6333 2222 (24 bours) instructionally.

Singapore Life Ltd.

Pearlyn Phas Group Chief Executive Officer

ORIGINAL
Singapore Life Ltd. 4 Shenton Way #01-01 SGX Centre 2 Singapore 068807
Company Reg. No. 196900499K GST Reg. No. MR-8500186-8