

## 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 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. 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 .....	26/11/2024 15:59 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	25/11/2024 19:20 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	UPPER SERANGOON ROAD
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNA688U
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LOKE WAI KHIONG
NRIC No .....	S8408642H
Email Address .....	JACK.LOKE11@GMAIL.COM
Mobile Phone No .....	(Phone) +65-90283579
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Audi
Model .....	A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	-
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1984
Vehicle Fuel .....	Petrol-Electric
First Registration Date .....	26/02/2021
Chassis no .....	WAUZZZF53MA016761
Effective Date/Time of Ownership .....	26/02/2021 01:02 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	Etiga Insurance Pte Ltd
Policy Number / Cover Note Number .....	MA036713

#### DRIVER

Name of Driver .....	LOKE WAI KHIONG
NRIC No .....	S8408642H
Date Of Birth .....	19/03/1984
Occupation .....	Indoor
Driving Pass Date .....	28/06/2007
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	17 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90283579
Alt. Phone Number .....	-
Email Address .....	JACK.LOKE11@GMAIL.COM
Address .....	BLK 52 LAKESIDE DRIVE 12-12 SINGAPORE 648316
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 .....	3
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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 .....	-
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 WITH ATTACHED.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBF5339K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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 .....	SJX7963E
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	LOKE WAI KHIONG
Gender .....	Male
Phone No .....	(Phone) +65-90283579
Address .....	BLK 52 LAKESIDE DRIVE 12-12 SINGAPORE 648316
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SNA688U
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	-

**SKETCH PLAN**

**IMPORTANT NOTICE**

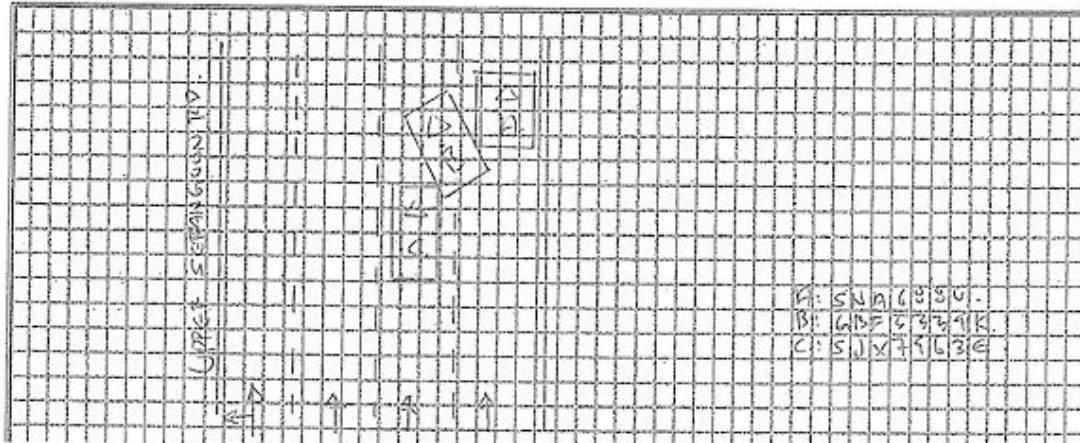
1. Please report correctly the details of the accident to speed up the claims process.
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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the Insurers to the GIA Records 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.
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' 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/are 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 & Time

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

Sketch Plan



Describe Circumstance of the Accident

POLICE REPORT

Declaration

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

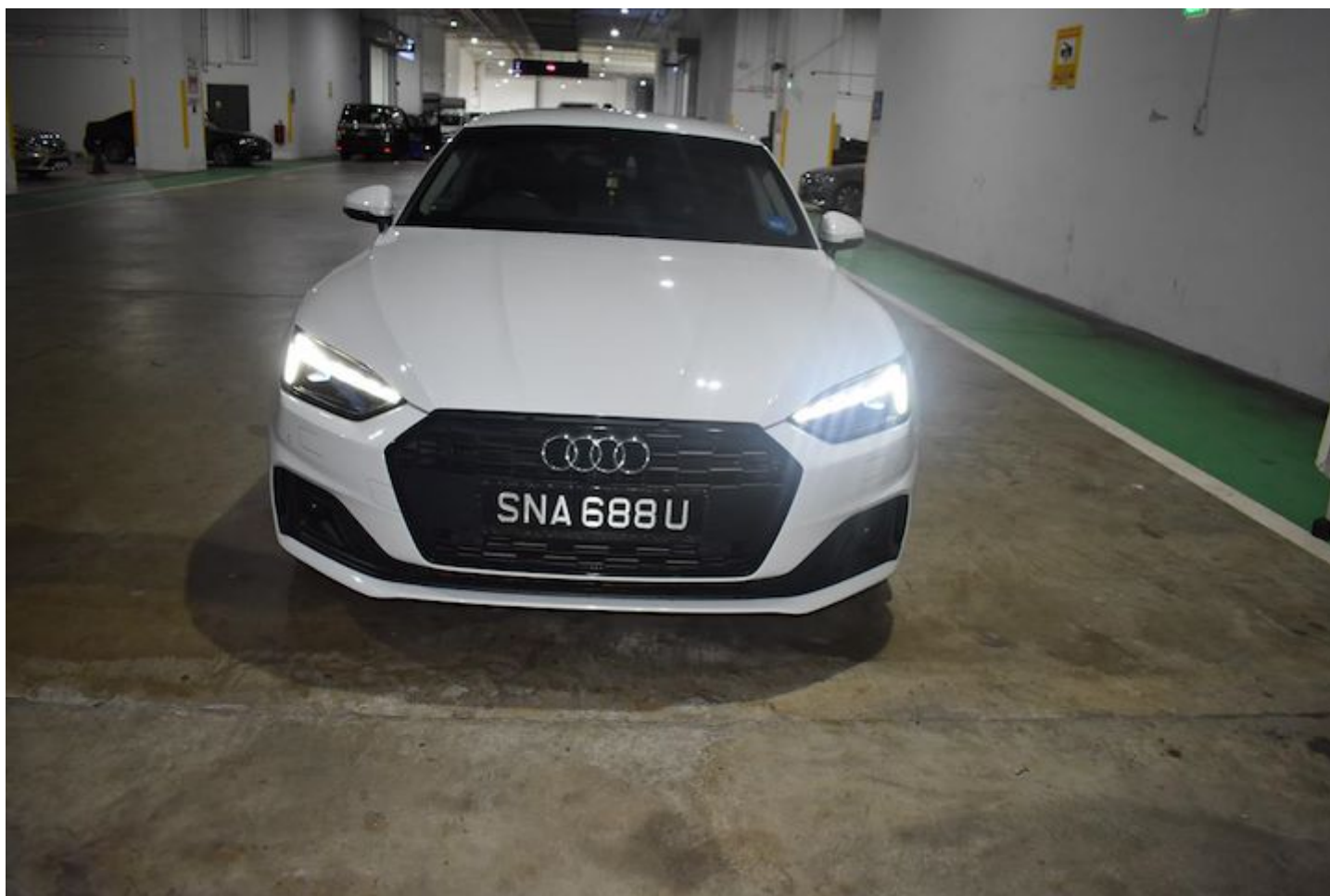
Policyholder's Signature / Date & Time 26/11/24 3pm

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

Witnessed by Reporting Centre Personnel

































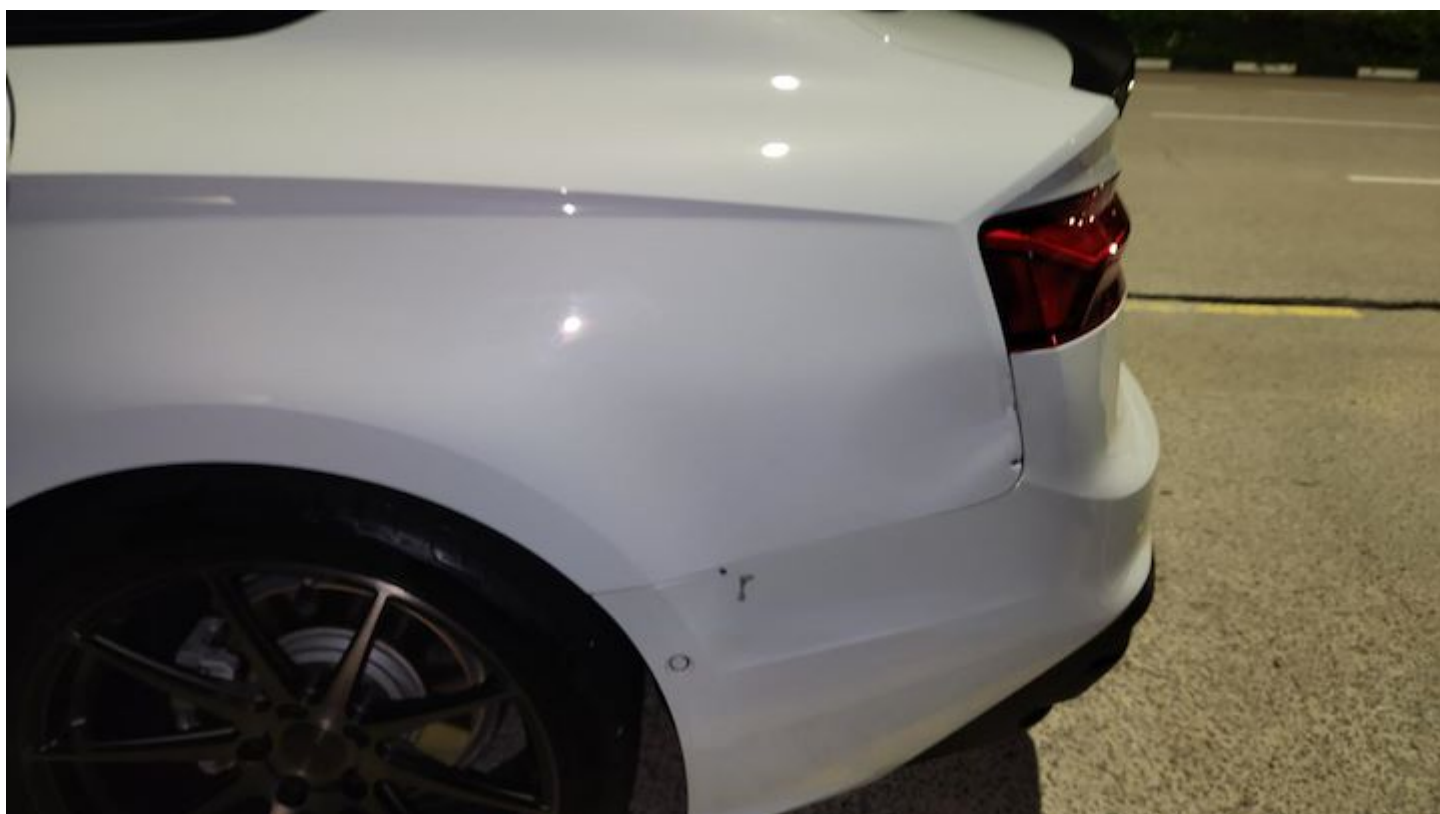
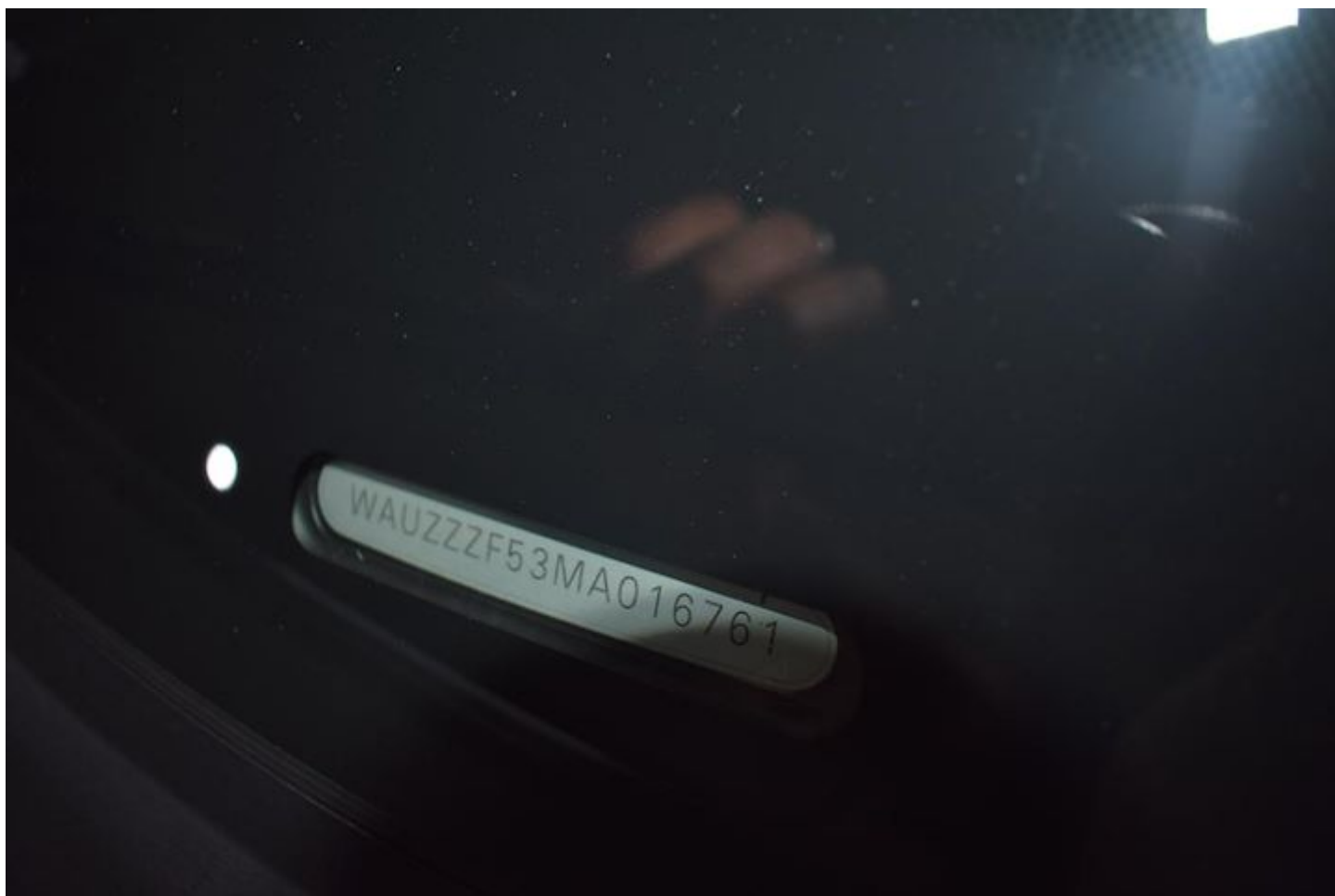










































**SINGAPORE  
POLICE FORCE**



T/20241126/7062

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

1 of 3

Report No. T/20241126/7062

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/11/2024 14:41		Vide Report No.:		Station Diary No.:
<b>Informant's Particulars</b>				
Name of Informant: Loke Wai Khiong (Lu Weiqiang)		Address: 52 Lakeside Drive #12-12 Caspian SINGAPORE 648316		
ID Type / ID No.: NRIC NO / S8408642H		Contact No.: Home/Office: Mobile: 90263579		
Nationality: SINGAPORE CITIZEN		Email: JACK.LOKE11@GMAIL.COM		
Sex: Male	Age: 40	Date of Birth: 19/03/1984	Type of Informant: Driver	
Race: Chinese		Language: English		
Occupation: Sales		Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/11/2024 19:20	Type of Location: Straight Road
Location:  UPPER SERANGOON ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF5339K	Lorry					0
SJX7963E	Motor car				Seriously Damaged	0
SNA688U	Motor car	AUDI	A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)	White	Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20241126/7062

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

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Report No. T/20241126/7062

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNA688U	ETIQA INSURANCE BERHAD	MA036713	26/02/2024	25/02/2025

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Loke Wai Khiong (Lu Weiqiang)	ID No.	S8408642H
Related Vehicle	SNA688U (Motor car)	Contact No.	90283579
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Serious

**Brief Details.**

On the stated date and time, I was travelling straight in my own lane and came to a stop to wait for the traffic light. GBF5339K was travelling behind me.

Out of nowhere, GBF5339K switched to the lane on my immediate left and was hit by SJX7963E which caused the right side of GBF5339K to hit onto the left and rear portion of my vehicle.

Due to the accident, I felt pain so i went to seek for professional medical help from a doctor and was given 3 days of medical leave.

**SINGAPORE  
POLICE FORCE**

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



T/20241126/7062

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Report No. T/20241126/7062

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
LOW MENG FATT  
Contact No.: 97577566

NP168

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
26/11/2024 14:41

Classification Of Case:





MX1  
73000001  
COV.Type: Comprehensive

**CERTIFICATE OF INSURANCE**

• MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) • MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 • ROAD TRANSPORT ACT, 1987 (MALAYSIA) • MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

<b>CERTIFICATE No. MA036713</b>		
1. Index Mark and Registration Number of Vehicle	SNA688U	
2. Name of Policyholder	LOKE WAI KHIONG (LU WEIQIANG)	
3. Effective Date of Commencement of Insurance for the purposes of the Act	25/02/2024	Engine No.: DEM028295 Chassis No.: WAUZZZF53MA016761 Hire Purchase: UNITED OVERSEAS BANK LIMITED Excess (Named Drivers): S\$800.00 Excess (Unnamed Drivers): S\$1300.00 Excess (Windscreen): S\$100.00
4. Date of Expiry of Insurance	25/02/2025	
5. Persons or Class of Persons entitled to drive		
(A) THE POLICYHOLDER		
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION		
	LOKE WAI KHIONG (LU WEIQIANG)	
	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 REASON OF ANY ENACTMENT OR REGULATIONS IN THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.	
6. Limitations as to use		
	USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.	
	THE POLICY DOES NOT COVER:	
	(i) USE FOR HIRE OR REWARD.	
	(ii) USE FOR RACING, PACE MAKING, RELIABILITY TRIAL OR SPEED-TESTING.	
	(iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.	
	(iv) 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 (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		

**Policy Owners' Protection Scheme**

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association Of Singapore (GIA) / Life Insurance Association Singapore (LIA) / SDIC websites.

I/WE HEREBY CERTIFY that the policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV for the Road Transport Act, 1987 (Malaysia).

For and on behalf of Etiqa Insurance Pte. Ltd.  
Approved Insurer

  
Authorised Signatory