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 16/07/2024 12:21 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 15/07/2024 17:55 (SGT) Exact Location of Accident Bukit Timah Rd, Singapore Additional Location Information NEAR LP 34/1F Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

BMW

Vehicle Registration Number SMD6706H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TEE KIAN SENG NRIC No SXXXX397E Email Address BLIZZARA.KS@GMAIL.COM Mobile Phone No (Phone) +65-97577836 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model 216i 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 No - Claiming third party your vehicle?

Vehicle Category Private car Transmission Auto CC 1499

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5144954419

DRIVER

Name of Driver TEE KIAN SENG NRIC No SXXXX397E Date Of Birth 29/08/1987 Occupation Indoor

Driving Pass Date 08/09/2008 Driving experience 15 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-97577836 Alt. Phone Number Email Address BLIZZARA.KS@GMAIL.COM Address BLK 518B TAMPINES CENTRAL 7 #09-62 Address complement Postcode 522518 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT AS PER POLICE REPORT NO. T/20240715/7118 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 **QX374T** Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	_
Vehicle Category	Government
Name of Driver	HO XUAN RENNIS
NRIC No	TXXXX441F
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.
- 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 aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

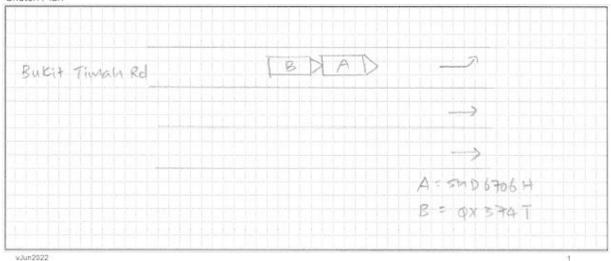
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

Actual 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 Circu	imstance of the Acciden	it	33		
AK	per police	report	NO. 7/2024	715/7118.	
			100 100		

Declaration

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

vJun2022



T/20240715/7118

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240715/7118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/07/2024 21:19		Vide Report No.: E/20240715/0080	Station Diary No.:				
Informan	's Particular	S					
Name of Informant: TEE KIAN SENG			Address: 518B TAMPINES CENTRAL 7 #09-62 SINGAPORE 522518				
ID Type / ID No.: NRIC NO / S8726397E		Contact No.: Home/Office: Mobile: 97577836					
Nationality: SINGAPORE CITIZEN		N	Email: BLIZZARA.KS@GMAIL.CO	ОМ			
Sex: Age: Date of Birth; Male 36 29/08/1987			Type of Informant: Driver	1770			
Race: Chinese			Language: English				
Occupation: Regional sales manager		ger	Driving Licence Information Class:	n: Date of Expiry:			

Seneral Information	of the Accident				
Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 15/07/2024 17:55	Type of Location Straight Road	
Location: BUKIT TIMAH ROA	AD	'			
Weather: Road Surface: Clear Dry					
Traffic Flow: Traffic Control: One Way Traffic Light - Working				Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				one conveyed by oulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
QX 374 T	Motor car	TOYOTA	Corolla Altis	Multi-Colored	Slightly Damaged	0
SMD6706H	Motor car	BMW	216I GRAN TOURER	Black		0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date	
SMD6706H	NTUC Income Insurance Co-Operative Limited	5144954419	26/04/2024	25/04/2025	



T/20240715/7118

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20240715/7118

CONTINUATION OF REPORT

Details of Person	Involved					
Any Pedestrian In	volved: No					
No. of Pedestrians	Use of Ped	Use of Pedestrian Crossing: NA				
Driver						
Name	HO XUAN, RENNIS			ID No	-	T0220441F
Related Vehicle	QX 374 T (Motor car)			Contact No.		NIL
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date			charge NIL		
No. of Days grant	ed Medical Leave (MC)	Degree of	f Injury NIL			
Driver						
Name	TEE KIAN SENG			ID No		S8726397E
Related Vehicle	SMD6706H (Motor car)			Conta	ct No.	97577836
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	I Describer	Date Disch	arge	NIL	
No. of Days grant	ed Medical Leave (MC)	NIL	Degree of	Degree of Injury NIL		

Brief Details.

Have photo and video evidence exceeding 2MB.

Was filtering left at Bukit Timah Road near lamp post 34/1F heading to KK hospital before being rammed at the back by police vehicle QX 374 T driven by Ho Xuan, Rennis (nric: T0220441F). Traffic was very slow at the time of incident. Involved driver was not apologetic throughout the incident. Vehicle also did not display P-plate despite driver getting his licence for less than 1 year.



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



3 of 3 Report No. T/20240715/7118

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: 15/07/2024 21:19
Officer In Charge Of Case:	Classification Of Case:
NP168	