SJ0G247I000S / JP Knights Pte Ltd ENTRY DATE & TIME: 18/07/2024 12:45 (SGT) SUBMITTED BY: Flash Reporting VERSION: 1 (18/07/2024 12:45 (SGT))

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.

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 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 18/07/2024 12:45 (SGT) Reported by **Actual Driver** Date of Accident 17/07/2024 21:05 (SGT) Exact Location of Accident Central Expw., Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mazda

1496

Vehicle Registration Number SLK9713S

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner LION CITY RENTALS PTE LTD Company Reg No 201504621K Email Address lcrarc@lioncityrentals.com.sg Mobile Phone No (Phone) +65-62525525 Alternative Phone No (Office) +65-62525525

VEHICLE PARTICULARS

Manufacturer

Model 3 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 - Reporting only your vehicle? Vehicle Category Private car Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D23MFL0002571

DRIVER

Name of Driver TAN BOON HWEE RYAN NRIC No S9621318B Date Of Birth 18/06/1996 Occupation Outdoor

Driving Pass Date 01/10/2018 Driving experience 5 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-91863101 Alt. Phone Number Email Address lcrarc@lioncityrentals.com.sg Address 24A CHEOW KENG ROAD Address complement Postcode 429485 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE 17/07/2024 AT ABOUT 20:40HRS I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER (SLK9713S) ALONG CTE EXPRESSWAY EN-ROUTE FROM HOMELOT TOWARDS SEMBAWANG ROAD TO PERSONAL PURPOSE, I WAS TRAVELLING ON LANE 4 GOING STRAIGHT ALONG CTE WHEN VEHICLE B BEARING REGISTRATION NUMBER (SNF5600M) WHICH WAS AHEAD OF MY VEHICLE SUDDENLY JAM BRAKE STOPPED. I APPLY BRAKED BUT STILL VEHICLE A DID NOT RESPOND THE BRAKE AND IT CONTINUED TO CRUISE AND REAR ENDED ONTO VEHICLE B REAR BUMPER. NO INJURIES WERE PRESENTED DURING THE COURSE OF COLLISION. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SNF5600M
Vehicle Manufacturer Porsche
Vehicle Model Panamera
Vehicle Variant



Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	GWEE KEVLIN
NRIC No	S8302783E
Contact Number	(Phone) +65-92300741
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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 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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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.
- (ii) 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 involvedisclosure 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

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

Witnessed by Reporting Centre Personnel

Sketch Plan

18/07/2024 -- 01:30HRS



Describe Circumstances of the Accident

ON THE 17/07/2024 AT ABOUT 20:40HRS I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER (SLK9713S) ALONG CTE EXPRESSWAY EN-ROUTE FROM HOMELOT TOWARDS SEMBAWANG ROAD TO PERSONAL PURPOSE, I WAS TRAVELLING ON LANE 4 GOING STRAIGHT ALONG CTE WHEN VEHICLE B BEARING REGISTRATION NUMBER (SNF5600M) WHICH WAS AHEAD OF MY VEHICLE SUDDENLY JAM BRAKE STOPPED, I APPLY BRAKED BUT STILL VEHICLE A DID NOT RESPOND THE BRAKE AND IT CONTINUED TO CRUISE AND REAR ENDED ONTO VEHICLE B REAR BUMPER. NO INJURIES WERE PRESENTED DURING THE COURSE OF COLLISION.

Declaration

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



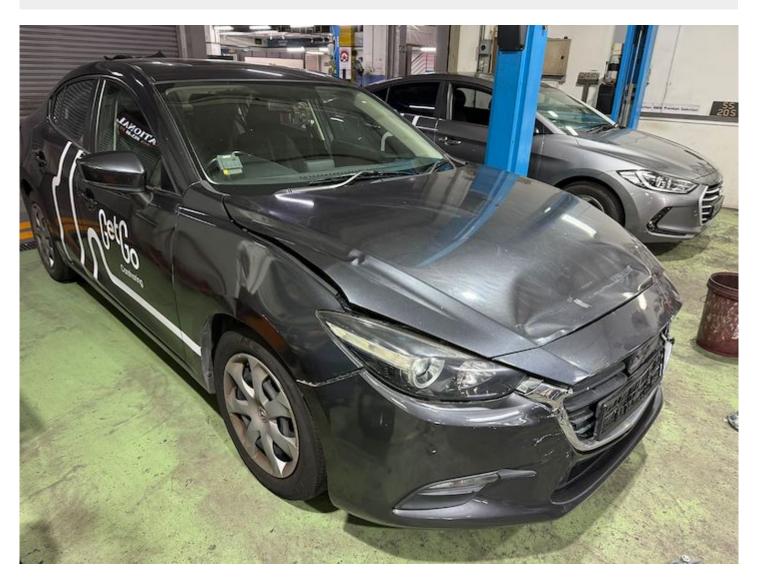
Policyholder's Signature / Date & Time

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

& Time

Witnessed by Reporting Centre Personnel

18/07/2024 -- 01:30HRS











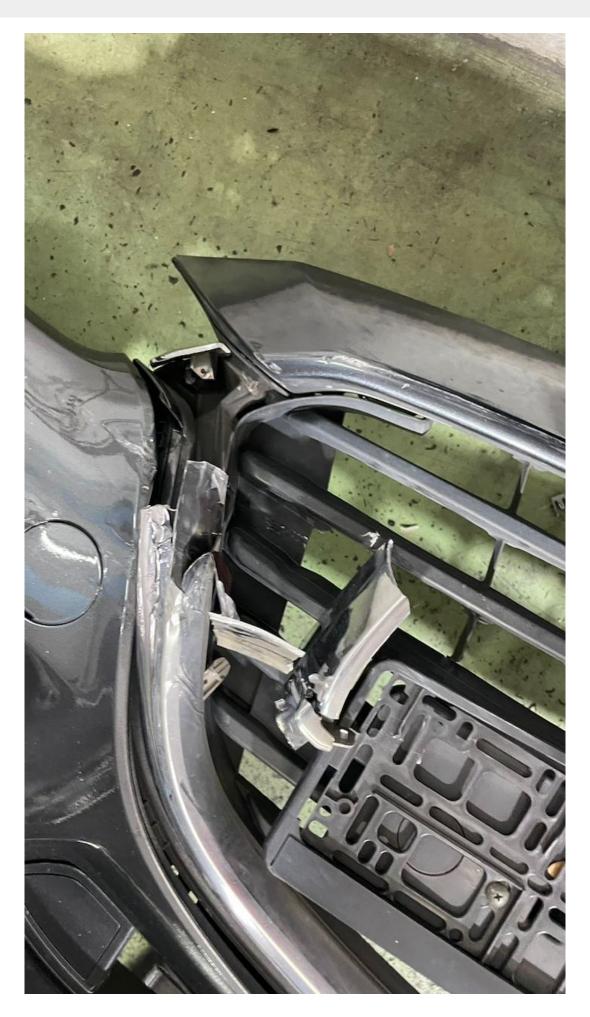


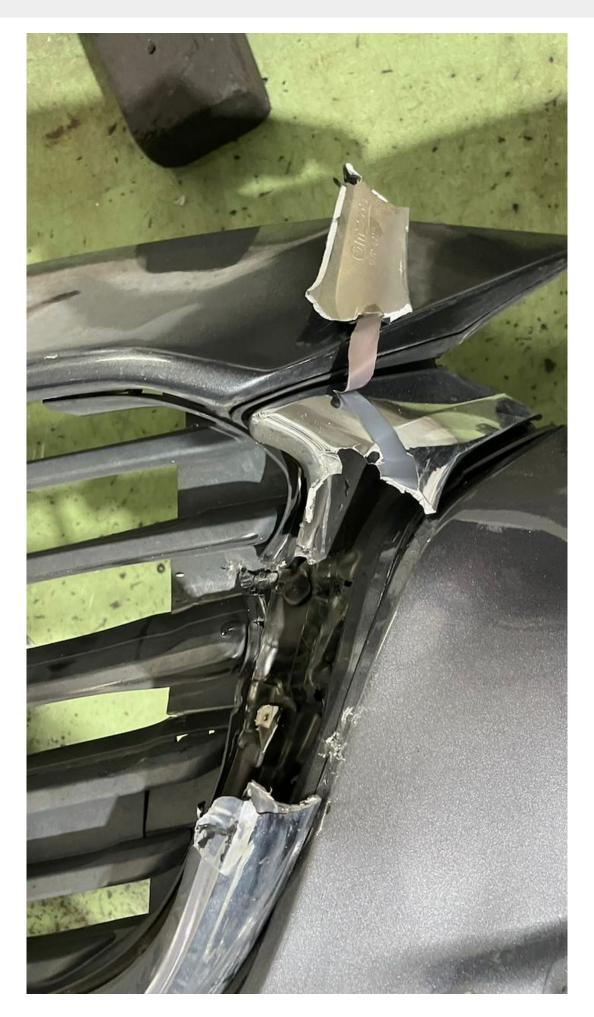


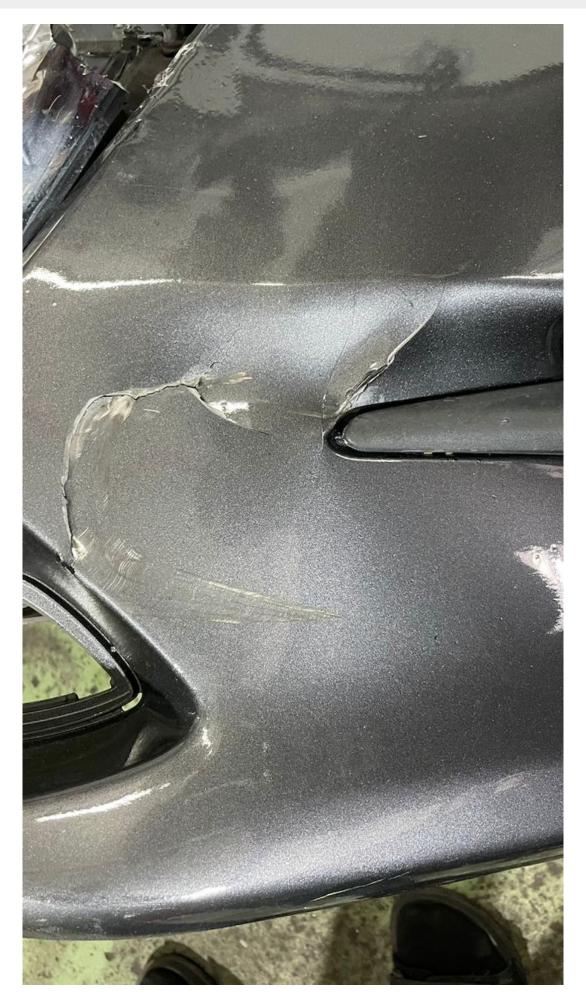




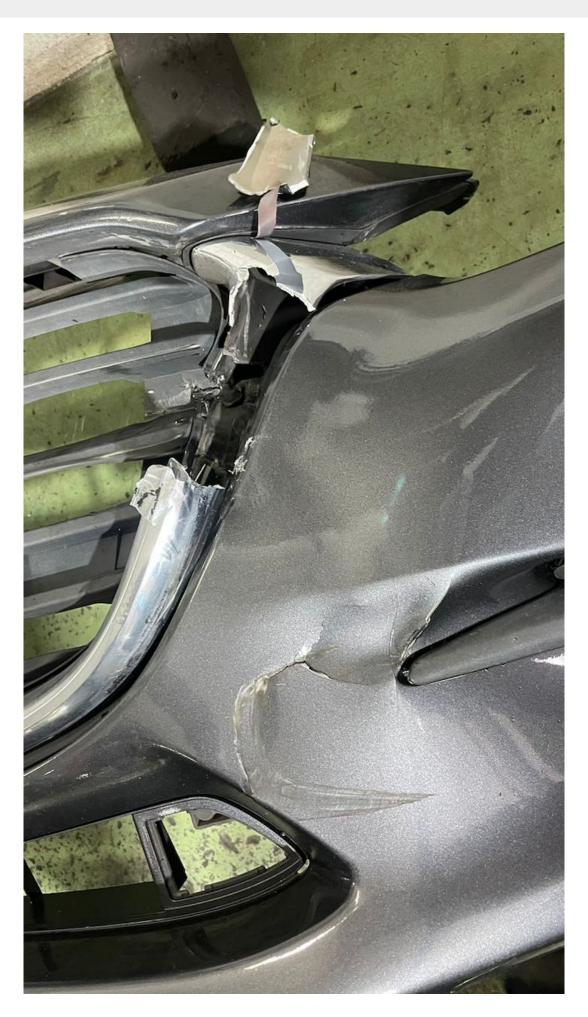


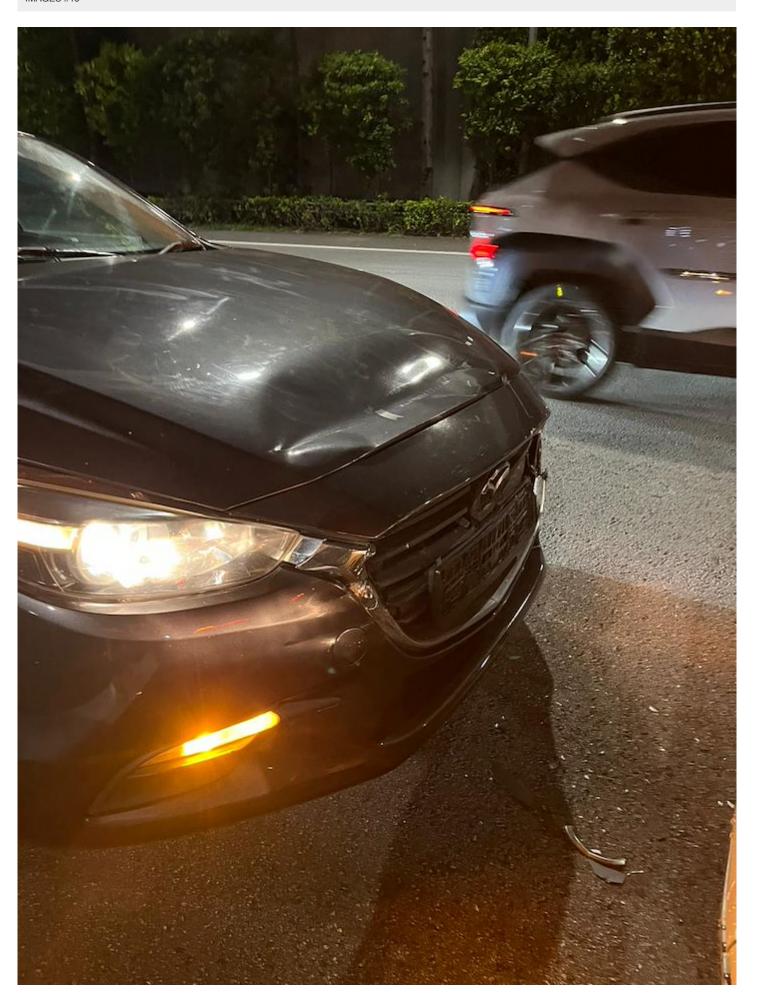




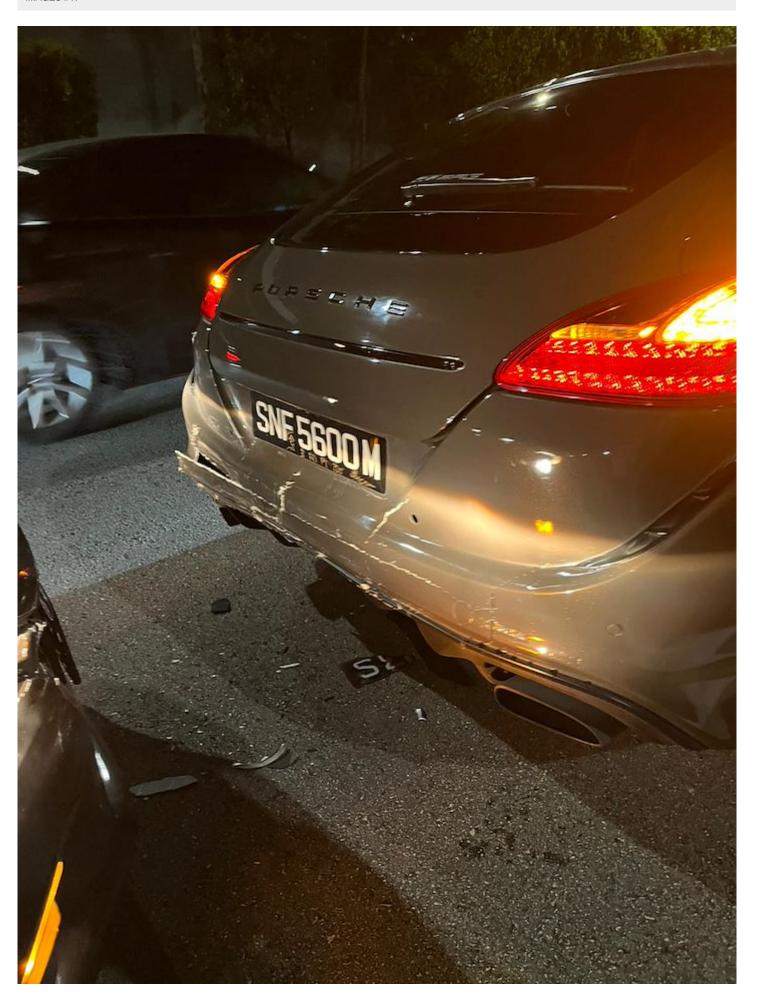












OTHER DOCUMENTS

