

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 30/07/2024 15:49 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 29/07/2024 16:10 (SGT) Exact Location of Accident Singapore Additional Location Information BEFORE UNDERPASS (QUEENWAYS) TOWARDS FARRER **ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

2000

Vehicle Registration Number SKM8999S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner SOON YU WEN NRIC No SXXXX574J Email Address BENNINGTONSOON@GMAIL.COM Mobile Phone No (Phone) +65-82238055

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model E250 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

your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto

CC

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number S9333574J

DRIVER

Name of Driver SOON YU WEN NRIC No SXXXX574J Date Of Birth 11/09/1993

Occupation Indoor Driving Pass Date 13/01/2012 Driving experience 12 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-82238055 Alt. Phone Number Email Address BENNINGTONSOON@GMAIL.COM Address BLK 449 CLEMENTI AVE 3 #03-219 Address complement Postcode 120449 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? Number of vehicles involved in the accident Was anybody injured in the Accident? Yes 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 PASSENGER 1 Name **GLADYS KEE** Gender Female 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 TO THE SKETCH PLAN POLICE ATTACHMENT(S) Are accident photos available for attachment? Yes

Yes

ACCIDENT VIDEO WITH OWNER

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJK3383Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KAM SOCK YEE
NRIC No	SXXXX666Z
Contact Number	(Phone) +65-96633220
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	SOON YU WEN
Gender	Male
Phone No	(Phone) +65-82238055
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SKM8999S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

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- 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' lawyere/lawfirms, may/are permitted to collect, use, disclose endior 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 tawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Yime

Actual Driver's Signature (if driver is not the

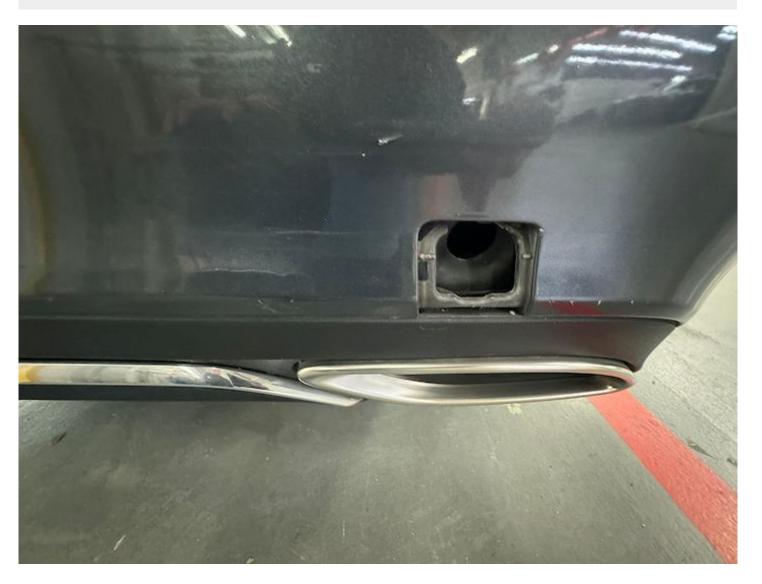
Warressed by Reporting Centro Personnel (Name as in NRIC/ID card)

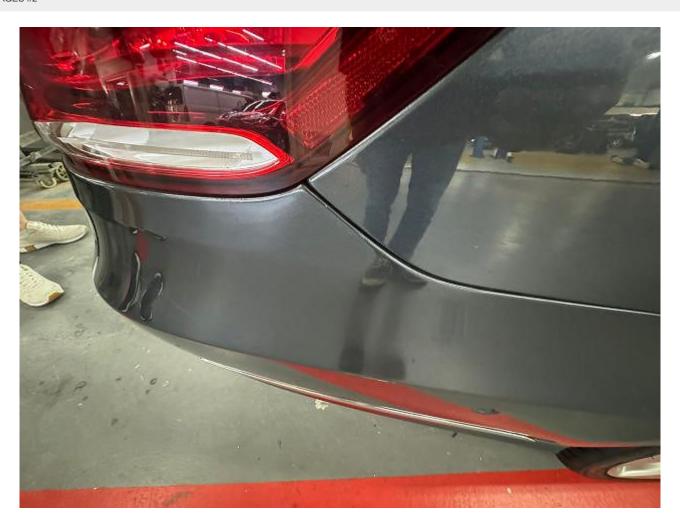
Sketch Plan

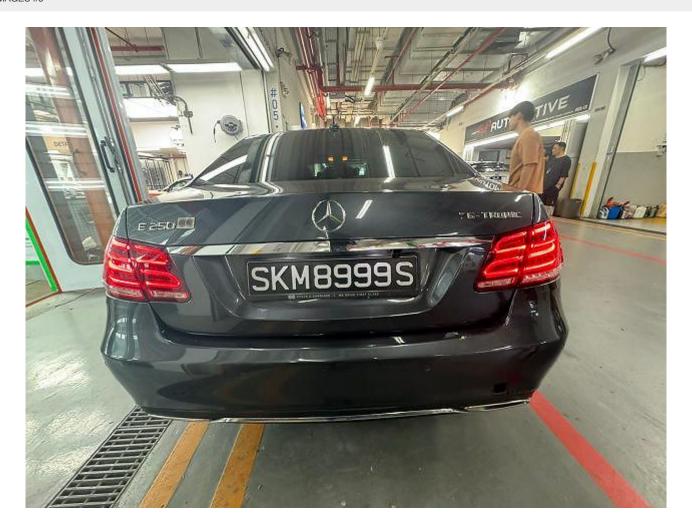
Before Underpass (Gueensway) towards Farrer Rd

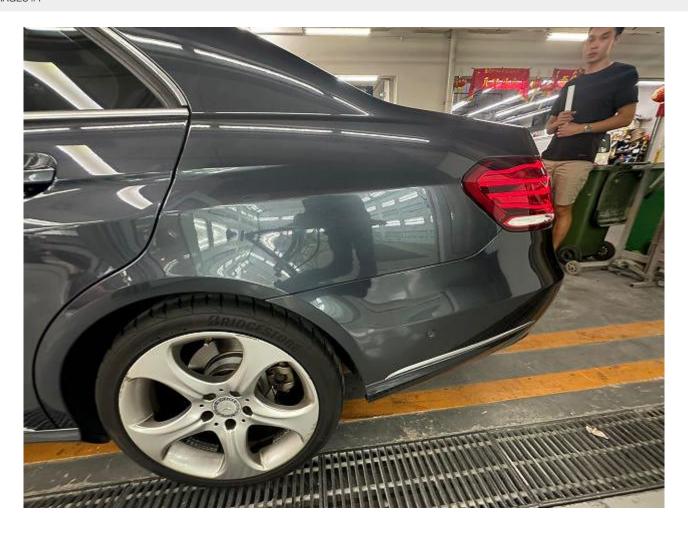
	Time: 4.10pm Location: Before Underpass (Queensway) towar Vehicle B: SJK 3383Z Vehicle C:
CHILD A.	Venicle 5. 45 (C 5505) Venicle 6.
Refer to police	e report
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	STORES TO SEASON
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Claim OD/TP at Ah Lim Motor	Claim OD/fP at other workshop Reporting Only
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Workshop Email Address : Note : Please take note that your	Claim OD/P at other workshop Reporting Only efile accident Report to : insurer have a 14 days timeframe for you to submit own damage claim under your own our own insurer for more information
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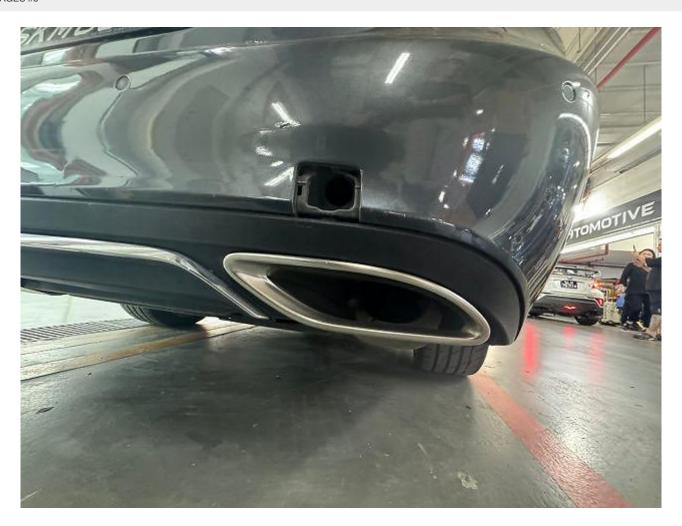
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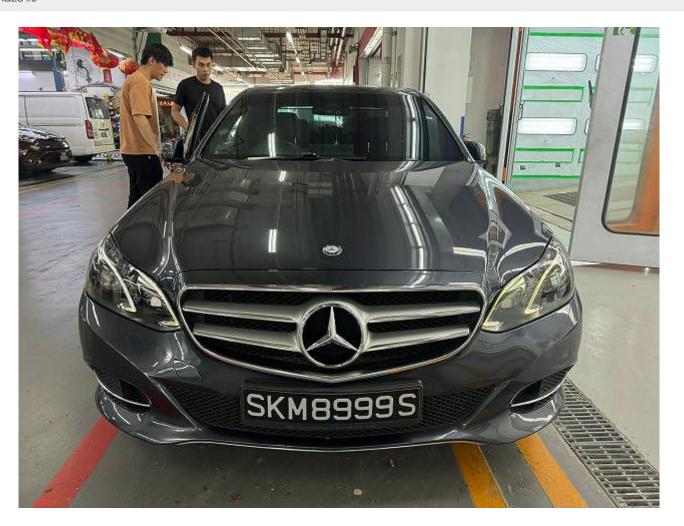




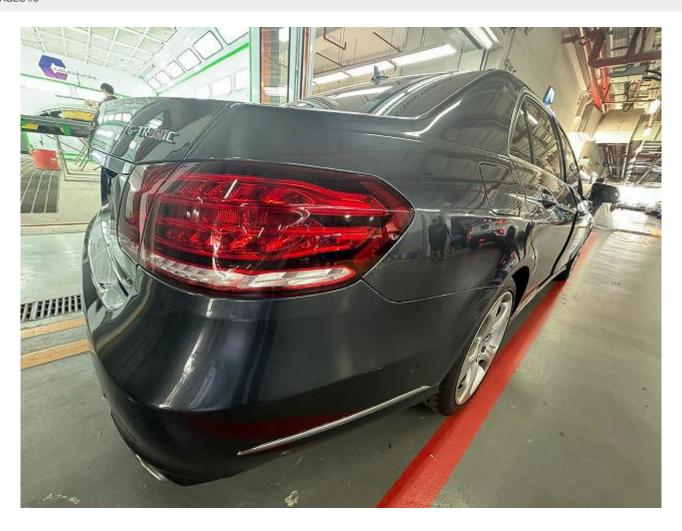


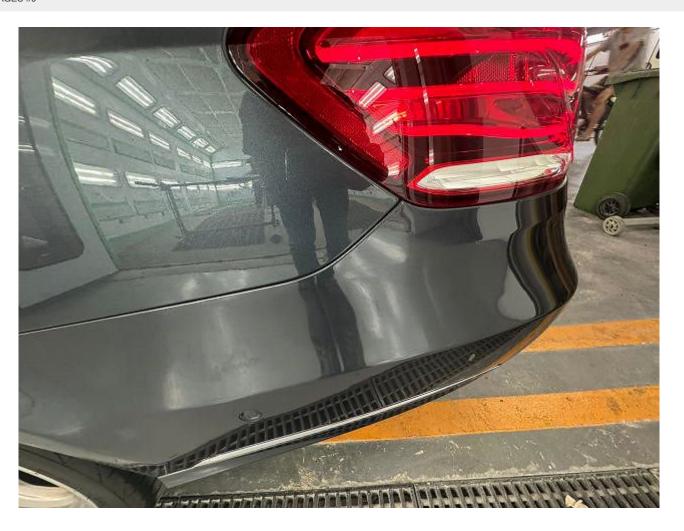


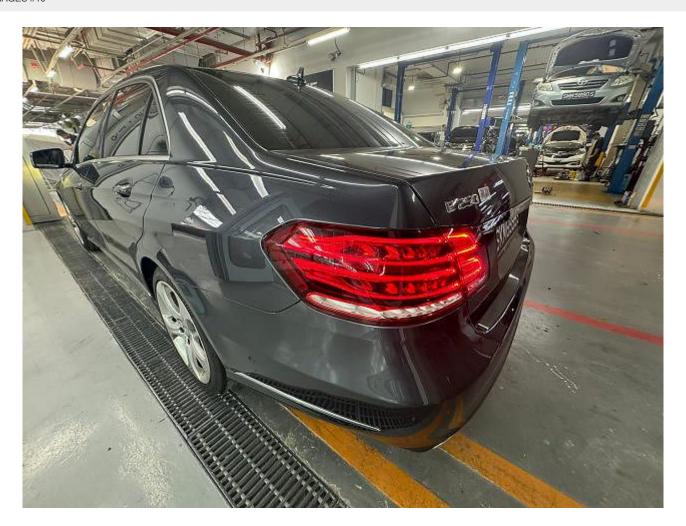




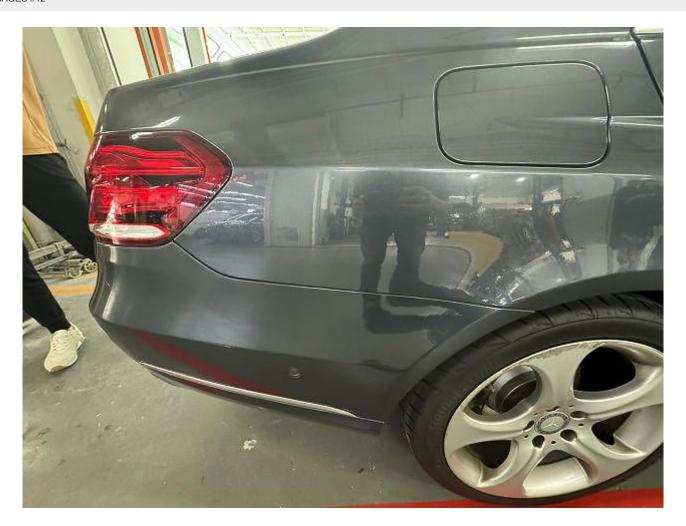




















Report No. T/20240730/7069

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

Date/Time Report Made: 30/07/2024 14:39		Vide Report No.:	Station Diary No.:		
Informan	t's Particular	s			
Name of Soon Yu	Informant: Wen		Address: 449 clementi ave 3 #03-:	219 SINGAPORE 120449	
ID Type / ID No.: NRIC NO / S9333574J		Contact No.: Home/Office:	Mobile: 82238055		
Nationali SINGAP	ty: ORE CITIZE	N	Email: benningtonsoon@gmail.	com	
Sex: Male	Age: 30	Date of Birth: 11/09/1993	Type of Informant: Driver		
Race: Chinese		Language: English			
Occupation: Real estate agent		Driving Licence Informat Class: 3	ion: Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/07/2024 16:10	Type of Location Straight Road	
Location:		*			
QUEENSWAY					
Weather:		Road Surface:			
Clear		Dry Traffic Control:	Traf	fic Volume:	
Traffic Flour			TTGI	Heavy	
Traffic Flow: One Way		Not Controlled	Hea	ivy	

Details of Ve	hicle Involved		20			
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJK3383Z	Motor car	TOYOTA	CH-R	White	Slightly Damaged	0
SKM8999S	Motor car	MERCEDES BENZ	E250 SEDAN (R18)	Grey	Slightly Damaged	1

Details of Veh	nicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SKM8999S	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/01295189	25/08/2023	28/11/2024



T/20240730/7069

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20240730/7069

CONTINUATION OF REPORT

Details of Person I		Z., Z.				
Any Pedestrian Inv	rolved; No					
No. of Pedestrians	Use of Po	edestrian	Crossin	ig: NA		
Driver						
Name	KAM SOCK YEE (JIAM SHUY	1)	ID No		S7804666Z	
Related Vehicle	SJK3383Z (Motor car)		Conta	ct No.	96633220	
Hospital/Clinic	NIL			of g ce & / Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Date Dis	charge	NIL		
the service of the service of the service of	d Medical Leave (MC) NIL	Degree o				
Driver	The second second second	1203,000	- Injury	1		
Name	Soon Yu Wen				S9333574J	
Related Vehicle	SKM8999S (Motor car)		Conta	ct No.	82238055	
Hospital/Clinic	CLEMENTI FAMILY & AESTHETIC CLINIC		Class Drivin Licen Expiry	g	Class: 3 Date of Expiry: NIL	
Date Treatment	30/07/2024	Date Dis	charge	30/07	7/2024	
No. of Days grante	d Medical Leave (MC) 03	Degree o		Slight		
Passenger				1 - 0		
Name	GLADYS KEE JING YING				S9745139G	
Related Vehicle	SKM8999S (Motor car)			ct No.	91254267	
Hospital/Clinic	CLEMENTI FAMILY & AESTHETIC CLINIC			of g ce & Date	Class: NIL Date of Expiry: NIL	
Date Treatment	30/07/2024	Date Dis	charge	30/07	7/2024	
	d Medical Leave (MC) 03	of Injury Slight				

Brief Details.

On 29 Jul 2024, I was driving my car (SKM8999S) from Battery Road towards Holland Village for my next appointment with my wife.

When I was traveling towards Farrer Road before the Queensway Underpass, there was some road works going on on the left lane before the entrance of the underpass, so several vehicles in front started filtering right. I turned on my right signal light, waited for an opportunity to filter into the right lane, when I spotted a big gap between the van in front and the Toyota CHR (SJK3383Z) behind who slowed down, I took the opportunity to let my car merge fully into the right lane. Shortly after merging into the right lane, the van in front of me slowed down, I followed suit, then I saw the CHR in the rear view mirror coming fast towards me and she hit the back of my car. The impact felt was quite big



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 T/20240730/7069

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Report No. T/20240730/7069

CONTINUATION OF REPORT

in our opinion, she was using her phone then and the phone flew to her face, causing a cut under her lip. We felt unwell today and decided to went to the clinic to have a check up. Both me and my wife's was given 3 days MC.



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



Report No. T/20240730/7069

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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: 30/07/2024 14:39
Officer In Charge Of Case:	Classification Of Case:
NP168	



Contact us at

Hotline: (65) 6665 5555

E-mall: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/01295189

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SKM89995

Chassis No. . wopatagasas

: WDD2120362B146987
2) Name of Policy Holder

2) Name of Policy Holder : SOON YU WEN

3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act : 25/08/2023 12:26

4) Date/Time of Expiry of Insurance : 28/11/2024 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) Any named person under the policy who is driving on the Policyholder's permission.

(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use'

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

 Sum Insured
 : Market Value

 Own Damage Excess
 : S\$ 2,000.00

 Windscreen Excess
 : S\$ 100.00

Choice of workshop : DirectAsia approved workshops

Finance company / Hire Purchase

Main driver : SOON YU WEN

Ref Named Driver

Named driver (1) KEE JING YING GLADYS

Typer tank Note: This policy does not cover the Policyholder (drivers below the age of 30 and

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

Company Registration; 2008225115

Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com