## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Occupation

Gender

Date Of Driving Pass

**Driving Experience** 

Mobile Number

Fax Number
Contact Number

**EMail Address** 

- 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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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

| aforesaid.   |  |  |  |
|--|--|--|--|
|  | ACCIDENT STATEMENT                                 |  |  |
| Date Of Report   | 01/02/2018 14:55                                   |  |  |
| Date Of Accident   | 27/01/2018 18:00                                   |  |  |
| Exact Location Of Accident   | LOR 17 GEYLANG NEAR NUMBER 43 LORONG 17 GEYLANG    |  |  |
| Country/State of Loss  | SINGAPORE  |  |  |
| DETAILS OF OWN VEHICLE   |  |  |  |
| Vehicle Registration Number  | SKX2441R   |  |  |
| Insured/Policyholder   |  |  |  |
| Name Of Registered Owner   | LEE TONG CHUAN JOHNNY                              |  |  |
| NRIC No  | S1156180B  |  |  |
| Email Address  | NOEMAIL  |  |  |
| Mobile Phone No  | (LOCAL) +65-98001639                               |  |  |
| Alternative Phone No   | OFFICE-98001639                                    |  |  |
| Vehicle Particulars  |  |  |  |
| Manufacturer   | HYUNDAI  |  |  |
| Model  | ELANTRA-1.6 (A)                                    |  |  |
| 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   |  |  |
| If No, Please state action to be taken                                       | THIRD PARTY  |  |  |
| Vehicle Category   | PRIVATE CAR  |  |  |
| Insurance Company  |  |  |  |
| Name of Insurance Company  | AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED. |  |  |
| Type Of Coverage   | COMPREHENSIVE                                      |  |  |
| Fleet Policy   | NO   |  |  |
| Policy Number  | P10029959R00                                       |  |  |
| Cover Note Number  |  |  |  |
| Driver   |  |  |  |
| Name of Driver   | LEE TONG CHUAN JOHNNY                              |  |  |
| NRIC No  | S1156180B  |  |  |
| Date Of Birth  | 20/12/1955   |  |  |
|  |  |  |  |

OFFICE-98001639

**NOEMAIL** 

**INDOOR** 

MALE

17/07/1979

38 YEARS AND 6 MONTHS

(LOCAL) +65-98001639

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Address BLK 77 LORONG LIMAU #16-39

Postcode 320077

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

**General Information of the Accident** 

Type Of Accident HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions CLEAR
Road Surface DRY

**Other Information** 

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

3

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : NG POH ENG

GENDER: : FEMALE

Passenger 2 NAME: : NG EK TENG

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name WHAMPOA NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 29 JALAN BAHAGIA , POSTCODE: 320029 , COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2507999 - **FAX NO**: 63554314

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT: E/20180128/2043.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera?

Was there any audio recorded?

NO NO

### Sketch Plan Pg. 1

#### 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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Driver's bignature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

## Sketch Plan #2 Pg. 1

| SKETCH PLAN  | ptree   |  |  |  |
|--|---|--|--|--|
| DESCRIBE CIRCUMSTANCES OF TH   | : SFX 2441R   |  |  |  |
| Pls. refer Police  | Report No. E/20180128   | 2043                                   |  |  |
|  |   |  |  |  |
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| DECLARATION  I/We declare the foregoing particulars are true in every respect.   |   |  |  |  |
| Parlia de la Circa | Driver's Streeture  | Reporting Centre Personnel's Signature |  |  |
| Policyholder's Signature<br>Date & Time:   | Driver's Signature<br>(If driver is not the policyholder)<br>Date & Time: | Name: NRIC/FIN No.:                    |  |  |

GIARMC SketchPlanForm\_V3

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# 1 of 1

Report No. E/20180128/2043

## POLICE REPORT (NP299)

Police Station Of Origin
Whampoa NPP
29 Jalan Bahagia #01-368 SINGAPORE

320029 Tel No: 1800-2507999

| Date/Time Report Made   | Vide Report No. Station Diary No. 14  |
|---|---|
| Name Of Informant LEE TONG CHUAN JOHNNY                         | Address APT BLK 77 LORONG LIMAU #16-39 SINGAPORE 320077 Contact No. Home/Office Mobile 98001639 |
| Nationality SINGAPORE CITIZEN Occupation ENGINEER               | Email Address  Sex Age Date of Birth Race  Male 62 20/12/1955 Chinese  Language                 |
| Institution/School Name  Date/Time Of Incident 27/01/2018 18:00 | English Location Of Incident LORONG 17 GEYLANG SINGAPORE near to number 43 Lorong 17 Geylang    |

## Brief details.

On 27/01/2018 at about 1800hrs, I was driving my vehicle SKX2441R along Lorong 17 Geylang Road, suddenly one tree branch fallen down and landed on top of my vehicle. There is police attended to me. I sustain injury on my forehead, my spectacle is damage and vehicle also damages. Vide to incident G/20180127/0197.

| Signature Of Officer Recording The Report:  E / Sgt 2 WINSOR LIM SHENG HWA  | Signature Of Informant:        |
|---|--------------------------------|
| Signature Of Interpreter.<br>Not applicable   | Date/Time:<br>28/01/2018 15:19 |
| Officer In-Charge Of Case:<br>E / Tanglin Police Divisional Investigation Brar<br>Insp A MUHAMMAD NURASRI BIN ISAK<br>Contact No.: 63910000 | ch / Classification Of Case:   |
| Authentication Stamp  | PORE SN 072                    |

SIGNATURE



## 3人洮过一劫

林礼颖 报道 chloelin@sph.com.sg

工程师载友人回家,车子 遭四层楼高大树砸中,树枝插 入前后挡风镜,三人受困10分 钟,奇迹般毫发无伤,逃过一

这起事件发生在昨晚6时 许,地点在沈氏通道前往芽笼 17巷的小路上,遭殃的是一辆 现代汽车。

车主李先生(62岁,工程师)受访时透露,当时他开车送女友人(50余岁)和对方的女儿(29岁)回家,突注意到一棵四层楼高大树有异状。

"我还来不及反应,下一 秒就听到一声轰然巨响,树干 从天而降,不偏不倚砸到我的 车子。" 李先生说,大树的撞击力 极强,不仅车顶凹陷,前后挡 风镜还遭树枝插入,整车都是 玻璃碎片。

"我们都吓傻了,回过神后,赶忙查看彼此有没有受伤,还好我们三人都没事,但是车门却被树枝卡住,怎么也打不开。"

由于担心车子会有着火的 危险,李先生用尽九牛二虎之 力才踢开驾驶座的车门,三人 才好不容易从驾驶座的门逃 生,前后受困10分钟。

看见爱车惨被砸扁,李先生连叹倒霉:"还差五分钟就能抵达目的地,没想到却遇到这一劫,还好人没事,但我的车子才刚买两年,如今被毁成车子才刚买两年。"

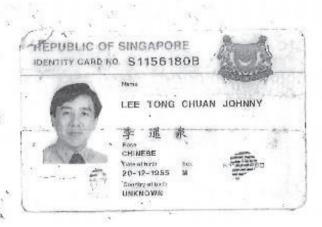
# 五六人伸援手

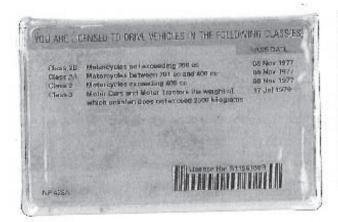
五六名热心公众现场伸出援手,帮忙搬开树枝帮三人脱困。 李先生说,树枝倒下后,车门被卡住打不开时,有五六名公 众马上来帮忙搬开树枝。

"我一边踢门,他们一边搬走树枝,好不容易才顺利脱困, 因此真的很感谢他们的帮忙。"

## **Driving License**











## Certificate of Insurance

Comprehensive Car Policy · Policy Number: P10029959R00

Motor Vehicles (Third Party Risks And Compensation) Act (Chapter 189) (Republic of Singapore), Motor Vehicles (Third-Party Risks And Compensation) Rules, 1996 Edition (Republic of Singapore), Road Transport Act, 1987 (Malaysia), Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10029959R00 (Comprehensive / Authorised Driver Plan)

1) Vehicle Registration Number

SKX2441R

Chassis Number

5) Policyholder

KMHDH41CMGU653446

Effective Date / Time of Commencement of Insurance for the Purpose of the Act

01/17/2017 (00:00)

3) Date / Time of Expiry of Insurance

30/11/2018 (23:59)

(i) Policy 4) Excess (II) Windscreen 5\$ 600,00 5\$ 100.00

LEF TONG CHUAN JOHNNY

6) Persons or Classes of Persons Entitled to Drive\*

Drivers named as a Main / Named Driver in this Certificate of Insurance and any other person provided he is driving on the Policyholder's order or with the Policyholder's permission. Household members of the Main Driver not named in this Certificate of Insurance will not be covered.

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 any reason of any enotor venicle or has been so permitted and is not disqualined by order or a Court 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 cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth

LEE TONG CHUAN JOHNNY (20/12/1955)

Named Driver(s) / Date of Birth

LEE WAN PIN (30/06/1988) LEE CHUNG YONG (11/08/1984)

7) Limitation as to use\*

Use only for social, domostic and pleasure purposes and for the occasional business purposes of the drivers listed above. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or 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.

B) Finance Company

I / We hereby certify that the policy to which Un's Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compunsation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on 29/11/2017

Auto & General Insurance (Singapore) Pte. Limited Trading as Budget Direct Insurance

Simon Birch

Auto & Géneral Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as Budget Direct Insurance 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924. Tel: 6221 2111. budgefdirect.com.sg