

MSME18041548 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 27/03/2018 17:40
 SUBMITTED BY: Chia Pei Ying

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 Authorised 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 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.

ACCIDENT STATEMENT

Date Of Report 27/03/2018 17:40
 Date Of Accident 27/03/2018 00:10
 Exact Location Of Accident BUKIT TIMAH ROAD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GW4474K
Insured/Policyholder
 Name Of Registered Owner HOSTECH PTE LTD
 Co Reg No 201103943K
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-62538893

Vehicle Particulars

Manufacturer TOYOTA
 Model LITEACE
 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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company AXA INSURANCE PTE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number GA305375
 Cover Note Number

Driver

Name of Driver LEE WEI XIANG MARTIN
 NRIC No S8415480F
 Date Of Birth 30/05/1984
 Occupation INDOOR
 Date Of Driving Pass 27/12/2007
 Driving Experience 10 YEARS AND 3 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-91197695
 Fax Number
 Contact Number
 Email Address NOEMAIL

Address BLK 30A HOLLAND CLOSE #13-203
 Postcode 271030
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 -
 Insurance Company of Driver's Own Vehicle -
 -
 -

General Information of the Accident

Type Of Accident SIDE SWIPE
 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? NO
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 2
 Passenger 1 NAME: : LUKE YEO
 GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name CLEMENTI POLICE DIVISIONAL HQ (D DIVISION)
 Police Station Address ROAD: 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-7740000 - FAX NO: 67741705
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: D/20180327/7001.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC669K
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category TAXI
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN


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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 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:

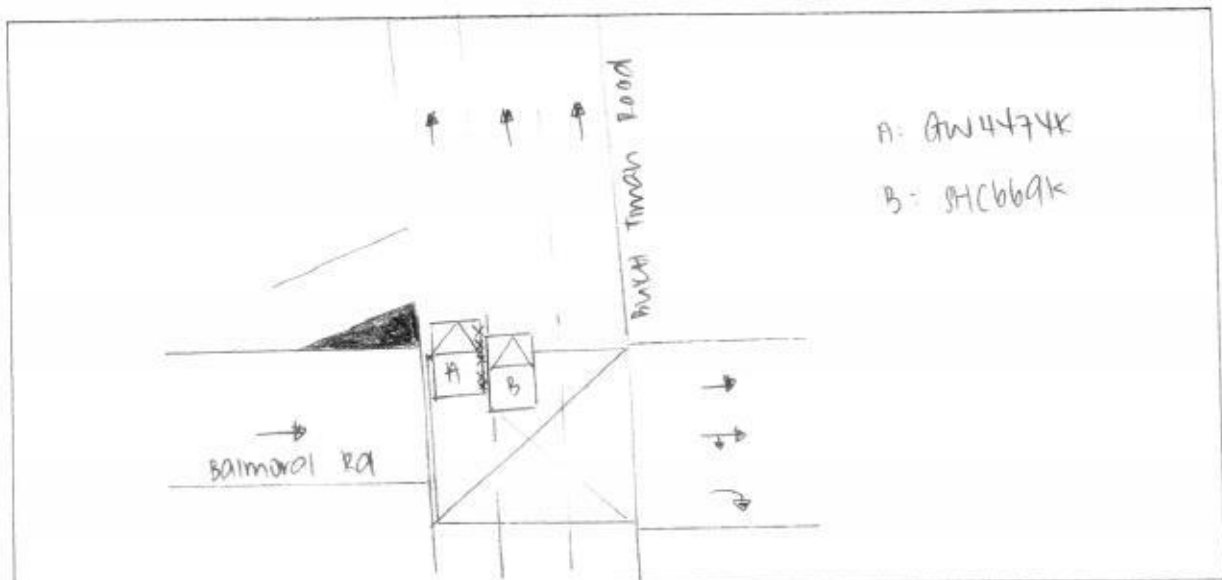
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

— PLEASE REFER TO POLICE REPORT NO. D/20180327/701 —

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:

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



D/20180327/7001

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POLICE REPORT (NP299)

Report No. D/20180327/7001

Police Station Of Origin
Clementi Police Divisional HQ
20 Clementi Avenue 5 SINGAPORE 129858
Tel No:1800-7740000

| | | |
|--|--|-------------------|
| Date/Time Report Made 27/03/2018 01:33 | Vide Report No. | Station Diary No. |
| Name Of Informant LEE WEI XIANG, MARTIN | Address APT BLK 30A HOLLAND CLOSE #13-203 SINGAPORE 271030 | |
| ID Type / ID No. NRIC NO / S8415480F | Contact No. Home/Office: Mobile: 91197695 | |
| Nationality SINGAPORE CITIZEN | Email Address martinlwx@gmail.com | |
| Occupation SERVICE ENGINEER | Sex Male | Age 33 |
| Institution/School Name | Date of Birth 30/05/1984 | Race Chinese |
| | Language English | |
| Date/Time Of Incident 27/03/2018 00:10 | Location Of Incident BUKIT TIMAH ROAD NIL | |

Brief details.

On 27/03/2017 at about 0010hrs, I was driving my company's vehicle bearing plate number GW4474K along Bukit Timah Road traveling towards Farrer Road.

Whilst still along Bukit Timah Road, at the bent near to Balmoral Road, I noticed that a taxi vehicle which was on the lane to my right was driving too close into my lane. I honk at the driver with the intention of letting him know about the danger.

| | |
|--|--|
| 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: 27/03/2018 01:33 |
| Officer In-Charge Of Case: | Classification Of Case: |

Authentication Stamp



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20180327/7001

All of a sudden, the taxi driver collided onto the driver side of my vehicle. However, the driver did not stop and continued driving. I wish to add that I was driving along the extreme left lane at that point of time.

At the traffic junction between Bukit Timah Road and Whitley Road, both our vehicles came to a stop as the traffic was not in our favour.

I wind down my window and spoke to the driver, who only apologised profusely and informed that his left side mirror was damage. I told him to move to the side of the road so that we can talk about the incident however he drove off right after the traffic light turned green.

His car plate number is SHC669K.

I do not have any in-car camera installed. Neither my passenger nor I sustained any injuries.

I have since already informed my company about it.

As a result of the collision, my vehicle suffered several scratches and dents to the driver side of it.

| | |
|---|---|
| Subjects Involved | |
| Victim | |
| Person Name | LEE WEI XIANG, MARTIN |
| 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: 27/03/2018 01:33 |
| Officer In-Charge Of Case: | Classification Of Case: |
| Authentication Stamp | |



**SINGAPORE
POLICE FORCE**



D/20180327/7001

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20180327/7001

| | | | |
|---------------------------|--|--------------|-----------|
| ID Type | NRIC NO | ID No | S8415480F |
| Gender | Male | Age | 33 |
| Race | Chinese | Language | English |
| Occupation | SERVICE ENGINEER | Address Type | |
| Address | APT BLK 30A HOLLAND CLOSE #13-203 SINGAPORE 271030 | Mobile No | 91197695 |
| Is Informant A Victim? | Yes | | |
| | | | |
| Person Name | LEE WEI XIANG, MARTIN (Informant) | | |
| | | | |

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

27/03/2018 01:33

Classification Of Case: