#### 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 <u>truthful and accurate</u> 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.
- 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   | 26/09/2019 13:40                                   |
| Date Of Accident   | 25/09/2019 21:55                                   |
| Exact Location Of Accident   | ALONG WOODLAND CAUSEWAY BRIDGE                     |
| Country/State of Loss  | SINGAPORE  |
|  | DETAILS OF OWN VEHICLE                             |
| Vehicle Registration Number  | SGS6230E   |
| Insured/Policyholder   |  |
| Name Of Registered Owner   | TAN KAH HOON                                       |
| NRIC No  | S1118710B  |
| Email Address  | ASIALENTECH@SINGNET.COM.SG                         |
| Mobile Phone No  | (LOCAL) +65-98804599                               |
| Alternative Phone No   | OFFICE-98804599                                    |
| Vehicle Particulars  |  |
| Manufacturer   | TOYOTA   |
| Model  | CAMRY 2.4  |
| Exact Purpose for which vehicle was being used at time of accident           | PRIVATE  |
| 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  | P10145515R00                                       |
| Cover Note Number  |  |

# Driver

Name of Driver TAN KAH HOON
NRIC No S1118710B
Date Of Birth 11/02/1955
Occupation INDOOR
Date Of Driving Pass 27/01/1976

Driving Experience 43 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98804599

Fax Number

Contact Number OFFICE-98804599

EMail Address ASIALENTECH@SINGNET.COM.SG

12 WEST COAST CRESCENT Address

#05-06 128042

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

2

NO

1

**General Information of the Accident** 

**COLLISION - HEAD TO REAR** Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Postcode

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name **CLEMENTI N.P.C** 

ROAD: 20 CLEMENTI AVE 5, POSTCODE: 129858, COUNTRY: Police Station Address

**SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### **Circumstances of Accident**

PLEASE REFER TO POLICE REPORT FOR ACCIDENT DETAIL.

Attachment(s)

Are accident photos available for attachment? YES YES

Was there any video captured by Car Camera?

Remarks/ Reasons: UPON REQUEST FROM OWNER

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SGT7492D

Vehicle Make/Model/Colour SUZUKI SWIFT YELLOW

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

Passenger 1 NAME:

GENDER: :

## Sketch Plan Pg. 1

| SKETCH PLAN   |                                     |  |
|---|-------------------------------------|--|
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
| DESCRIBE CIRCUMSTANCES OF TI                            |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   | Mease refer to                      | Police Reports                         |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
|   |                                     |  |
| DECLARATION   |                                     |  |
| I/We declare the foregoing particulars                  | are true in every respect.          |  |
| X - (   |                                     |  |
|   |                                     |  |
| Policyholder's Signature                                | Driver's Signature                  | Reporting Centre Personnel's Signature |
| Date & Time: 26/9/1049                                  | (If driver is not the policyholder) | Name:                                  |
| Policyholder's Signature Date & Time: 26/9/2019 (1:1-pm | Date & Time:                        | NRIC/FIN No.:                          |

#### Sketch Plan Pg. 2

#### **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
Date & Time: 26/9/2019

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

process SearchPears of a 193

# POLICE REPORT 1 Pg. 1





Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

1 of 3

# Report No. T/20190925/2236

| Date/Time Report Made: 25/09/2019 23:21 |                          |                           | Vide Report No.:                           | Station Diary No.:<br>158  |  |
|---|--------------------------|---------------------------|--|--|--|
| Informar                                | nt's Particu             | ilars                     |  |  |  |
| Name of TAN KAH                         | Informant:<br>HOON       |                           | Address:<br>12 WEST COAST CRESCEN          | T #05-06 SINGAPORE 128042  |  |
| ID Type /<br>NRIC NC                    | / ID No.:<br>) / S111871 | 10B                       | Contact No.: Home/Office: Mobile: 98804599 |  |  |
| Nationali<br>SINGAP                     | ty:<br>ORE CITIZ         | EN                        | Email:                                     | a a concording to the second of the second o |  |
| Sex:<br>Male                            | Age:<br>64               | Date of Birth: 11/02/1955 | Type of Informant:<br>Driver               |  |  |
| Race:<br>Chinese                        | *****                    |                           | Language:<br>English                       | Institution / School Name:   |  |
| Occupati<br>Retiree                     | on:                      |                           | Driving Licence Information:<br>Class: 3   | Date of Expiry:  |  |

| General Informa                            | ition of the Accident       |                       |   |     |                                    |  |
|--|-----------------------------|-----------------------|---|-----|------------------------------------|--|
| Type of<br>Accident:                       | Non-Injury<br>Others        | Drink<br>Drive:<br>No | Date/Time of<br>Accident:<br>25/09/2019 21:58 | 5   | Type of Location:<br>Straight Road |  |
| Location:<br>Along Road 1<br>Woodlands Cro | ssing<br>ds Causeway Bridge |                       |   |     |                                    |  |
| Weather:<br>Clear                          |                             | Road Surface:<br>Dry  |   | Roa | d Speed Limit:                     |  |
|  |                             | Traffic Control:      | fic Control:                                  |     | Traffic Volume:<br>Heavy           |  |
| Type of Collisio<br>Between Movin          | n:<br>g Vehicles - Head To  | Rear                  |   | , , | one conveyed by<br>oulance:        |  |

| Details of V | ehicle Involve | d      |                                 |        |                     |                 |
|--------------|----------------|--------|---------------------------------|--------|---------------------|-----------------|
| Vehicle No.  | Туре           | Make   | Model                           | Color  | Condition           | No of Passenger |
| SGS6230E     | Car            | TOYOTA | CAMRY 2.4<br>AUTO ABS<br>AIRBAG | Silver | Slightly<br>Damaged | 0               |
| SGT7492D     | Car .          | SUZUKI | SWIFT                           | Yellow |                     | 1               |

| Details of Ve | ehicle Insurance         |              |            |             |
|---------------|--------------------------|--------------|------------|-------------|
| Vehicle No.   | Insurance Company        | Insurance No | Effective  | Expiry Date |
| SGS6230E      | AUTO & GENERAL INSURANCE | P10145515R00 | 02/04/2019 | 19/03/2020  |
|               | (SINGAPORE) PTE. LIMITED |              |            |             |

#### POLICE REPORT 1 Pg. 2





Police Station Of Origin: Clementi N.P.C 2 of 3 Report No. T/20190925/2236

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999 CONTINUATION OF REPORT

| Details of Perso  | n Involved        |     |            |                                     |           |                                 |
|-------------------|-------------------|-----|------------|-------------------------------------|-----------|---------------------------------|
| Any Pedestrian Ir | nvolved: No       |     |            |                                     |           |                                 |
| No. of Pedestrian | s Injured: NIL    |     | Use of Ped | lestrian                            | Cross     | ing: NA                         |
| Driver            |                   |     |            |                                     |           |                                 |
| Name              | TAN KAH HOON      |     |            | ID No                               |           | S1118710B                       |
| Related Vehicle   | SGS6230E (Car)    |     |            | Conta                               | ct No.    | 98804599                        |
| Hospital/Clinic   | NIL               |     |            | Class<br>Drivin<br>Licend<br>Expiry | g<br>ce & | Class: 3<br>Date of Expiry: NIL |
| Date Treatment    | NIL               |     | Date Disc  | harge                               | NIL       |                                 |
| No. of Days gran  | ted Medical Leave | NIL | Degree of  |                                     | NIL       |                                 |

#### Brief Details.

On 25/09/2019 at about 2120hrs, I cleared Malaysian immigration and exit towards Singapore Woodlands Checkpoint. I travelled on the extreme left lane, near the waterpipes laying and railway tracks. I was then travelling alone in my car, a silver Toyota Camry (SGS6230E).

At about 2155hrs, my car was about 500m away to reach the immigration clearance at Woodlands Checkpoint. While my vehicle was stationary while awaiting for traffic ahead, out of a sudden, I felt a sudden jerk from the rear. I got off from my vehicle and discovered that a yellow Suzuki swift (SGT7492D) had collided into my rear bumper.

The driver of the Suzuki swift stepped out. I noticed that it was a male Chinese, appearing in his mid-30s sporting a bald head and bespectacled. I also noticed a lady passenger seated in the front seat. The driver came out, made assessment on his vehicle and in an arrogant manner, told me to settle this through insurance.

Although I proposed for a private settlement, the driver refused. He also refused to give his particulars when I prompted. Hence, I only took photographs of our vehicles and the damage to my car. The time of photo taken was about 2158hrs. My car suffered a hole on the left corner of the rear bumper in addition to scratches.

I am not injured. I only have a front-facing in-car camera installed in my car. I am lodging this report to facilitate insurance claims.

### POLICE REPORT 1 Pg. 3

CONTINUATION OF REPORT



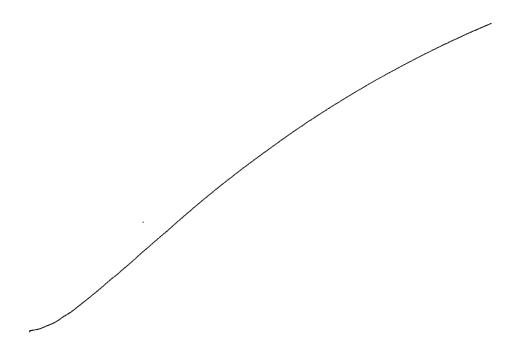


T/20190925/2236

Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999 3 of 3 Report No. T/20190925/2236

## Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

| Signature Of Officer Recordin<br>D /<br>Staff Sgt HIZAMI BIN MOHAN  |  | Signature Of Infórmant:        |             |
|---|--|--------------------------------|-------------|
| Signature Of Interpreter:<br>Not applicable                         |  | Date/Time:<br>25/09/2019 23:21 |             |
| Officer In Charge Of Case:<br>TP / GIA /<br>Staff Sgt WONG SIEU LUI |  | Classification Of Case:        | <del></del> |
| Contact No.: 65476151   | SINGAPORE POLICE FORCE   | SN 37                          |             |
| Authentication Stamp<br>NP168                                       | A STATE OF THE STA | #                              |             |
|   | SIG  | NATURE                         |             |

#### POLICE REPORT 2 Pg. 1





Police Station Of Origin: Clementi N.P.C

Report No. T/20190925/2236

2 of 3

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999 CONTINUATION OF REPORT

| Details of Perso  | n Involved        |     |            |                                     |        |                                 |
|-------------------|-------------------|-----|------------|-------------------------------------|--------|---------------------------------|
| Any Pedestrian Ir | nvolved: No       |     |            |                                     |        |                                 |
| No. of Pedestrian | s Injured: NIL    |     | Use of Peo | lestrian                            | Cross  | ing: NA                         |
| Driver            |                   |     |            |                                     |        |                                 |
| Name              | TAN KAH HOON      |     |            | ID No                               |        | S1118710B                       |
| Related Vehicle   | SGS6230E (Car)    |     |            | Conta                               | ct No. | 98804599                        |
| Hospital/Clinic   | NIL               |     |            | Class<br>Drivin<br>Licend<br>Expire | g      | Class: 3<br>Date of Expiry: NIL |
| Date Treatment    | NIL               |     | Date Disc  |                                     | NIL    |                                 |
|                   | ted Medical Leave | NIL | Degree of  |                                     | NIL    |                                 |

#### Brief Details.

On 25/09/2019 at about 2120hrs, I cleared Malaysian immigration and exit towards Singapore Woodlands Checkpoint. I travelled on the extreme left lane, near the waterpipes laying and railway tracks. I was then travelling alone in my car, a silver Toyota Camry (SGS6230E).

At about 2155hrs, my car was about 500m away to reach the immigration clearance at Woodlands Checkpoint. While my vehicle was stationary while awaiting for traffic ahead, out of a sudden, I felt a sudden jerk from the rear. I got off from my vehicle and discovered that a yellow Suzuki swift (SGT7492D) had collided into my rear bumper.

The driver of the Suzuki swift stepped out. I noticed that it was a male Chinese, appearing in his mid-30s sporting a bald head and bespectacled. I also noticed a lady passenger seated in the front seat. The driver came out, made assessment on his vehicle and in an arrogant manner, told me to settle this through insurance.

Although I proposed for a private settlement, the driver refused. He also refused to give his particulars when I prompted. Hence, I only took photographs of our vehicles and the damage to my car. The time of photo taken was about 2158hrs. My car suffered a hole on the left corner of the rear bumper in addition to scratches.

I am not injured. I only have a front-facing in-car camera installed in my car. I am lodging this report to facilitate insurance claims.

### POLICE REPORT 3 Pg. 1

CONTINUATION OF REPORT





T/20190925/2236

Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

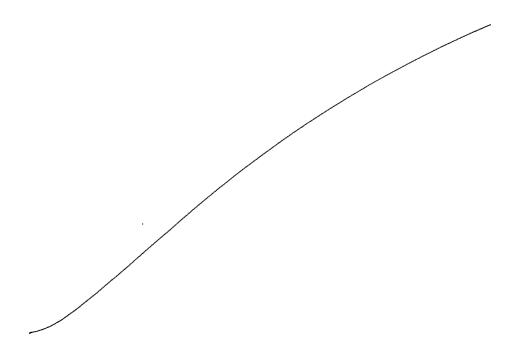
Tel No: 1800-8729999

Report No. T/20190925/2236

3 of 3

### Sketch Plan

Informant is not able to provide sketch plan



IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

| Signature Of Officer Recordin<br>D /<br>Staff Sgt HIZAMI BIN MOHAN  | 11/                    | Signature Of Informant:        |  |
|---|------------------------|--------------------------------|--|
| Signature Of Interpreter:<br>Not applicable                         |                        | Date/Time:<br>25/09/2019 23:21 |  |
| Officer In Charge Of Case:<br>TP / GIA /<br>Staff Sgt WONG SIEU LUI |                        | Classification Of Case:        |  |
| Contact No.: 65476151   | SINGAPORE POLICE FORCE | SN 37                          |  |
| Authentication Stamp NP168  | - Andrews              | #                              |  |
|   | SIG                    | NATURE                         |  |

### Identification Card Pg. 1

# REPUBLIC OF SINGAPURE

# IDENTITY CARD NO. \$1118710B





Name

# TAN KAH HOON

陳嘉訓

Race

CHINESE

Date of birth

Sex M

8111**871**08

11-02-1955
Country/Place of birth

SINGAPORE

5461244



NRIC No. S 1118710E



Date of issue

28-04-2015

Addrage

12 WEST COAST CRESCENT #05-06 SINGAPORE 128042







#### Certificate of Insurance

Third Party Only Car Policy Policy Number: P10145515R00

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 P10145515R00 (Third Party Only / Named Driver Plan)

1) Vehicle Registration Number

SGS6230E

Chassis Number

MR053BK4007008268

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

02/04/2019 (00:00)

3) Date / Time of Expiry of Insurance

19/03/2020 (23:59)

4) Excess (i

...

(i) Policy (ii) Windscreen

Not applicable Not applicable

5) Policyholder

Tan Kah Hoon

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

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

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 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

: Tan Kah Hoon (11/02/1955)

Named Driver(s) / Date of Birth

No driver is named.

#### 7) Limitation as to use\*

Use only for social, domestic and pleasure purposes. 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.

8) Finance Company

NA

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) 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 26/02/2019

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

Simon Birch

Auto & General 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 budgetdirect.com.sg



# **Accident Photo**



# **Accident Photo**



# **Accident Photo**









