

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 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.

ACCIDENT STATEMENT

Date Of Report	18/11/2019 16:28
Date Of Accident	16/11/2019 12:30
Exact Location Of Accident	INFRT OF BLK 37 ROUNDABOUT MARSILING DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY9267M
Insured/Policyholder	
Name Of Registered Owner	LEE ZHEN XIONG MOSES
NRIC No	S8200051H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88111175
Alternative Phone No	OTHERS-88111175

Vehicle Particulars

Manufacturer	KIA
Model	CERATO
Exact Purpose for which vehicle was being used at time of accident	WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108783101
Cover Note Number	

Driver

Name of Driver	LIONEL LEE ZE KAI
NRIC No	S8200051H
Date Of Birth	07/01/1982
Occupation	OUTDOOR
Date Of Driving Pass	02/07/2007
Driving Experience	12 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88111175
Fax Number	
Contact Number	OTHERS-88111175
EEmail Address	NOEMAIL

Address	7 SELETAR ROAD #02-20
Postcode	807014
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	CAPTURED BY 3RD PARTY IN-CAR CAMERA
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLZ9252B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YAP CHEE KIAN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LIONEL LEE ZE KAI
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SJY9267M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN


IMPORTANT NOTICE

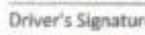
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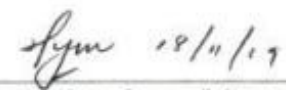
8. Consent under the Personal Data Protection Act (PDPA)

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.

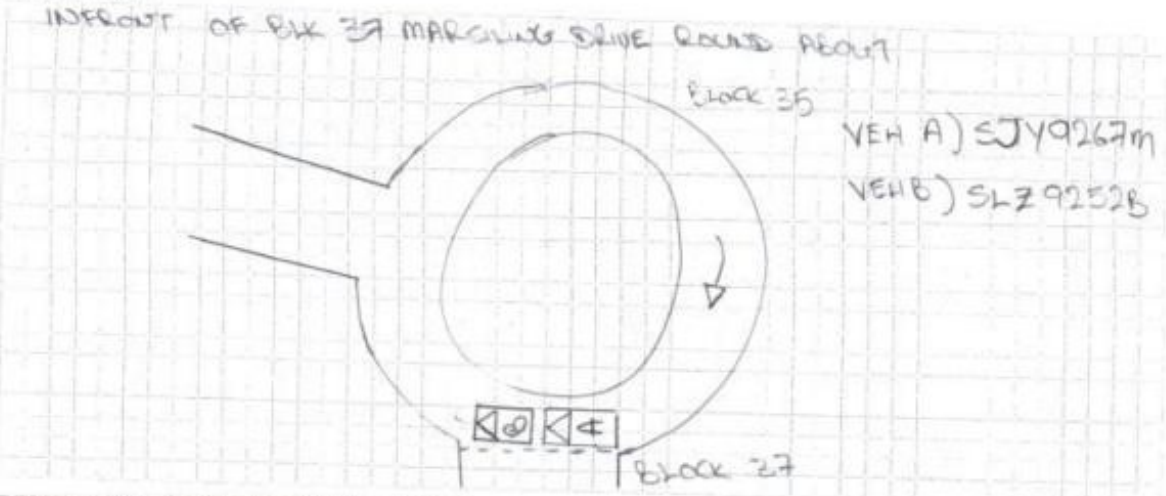

Policyholder's Signature
Date & Time:


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


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

Individual Statement

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I JUST DROP MY PASSENGER OFF AT BLOCK 35 INSIDE THE ROUND ABOUT, WHILE I WAS ABOUT TO EXIT THE ROUND ABOUT IN FRONT OF BLOCK 37, I BRAKE AS VEH B WAS STATIONARY IN FRONT OF ME, SUDDENLY VEH B REVERSE AND HIT ONTO THE FRONT PORTION OF MY VEH. I WISH TO NOTE THAT THE INCIDENT WAS CAPTURED BY A THIRD PARTY VEH IN-CAR CAMERA.

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.:

Signature and date: 18/1/19

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



DEED POLL

MIA 1-25A

DEED POLL

BY THIS DEED, I, the undersigned Lionel Lee Ze Kai 李泽楷 holder of NRIC No. S8200051H and residing at Blk 368 Corporation Drive #08-457 Singapore 610368, formerly known as Lee Zhen Xiong, Moses (Li Zhenxiong, Moses) 李振雄, do hereby renounce and abandon the use of my former name Lee Zhen Xiong, Moses (Li Zhenxiong, Moses) 李振雄 and in lieu thereof do assume as from the date hereof the name Lionel Lee Ze Kai 李泽楷.

AND in pursuance the above renunciation and abandonment of my former name I HEREBY DECLARE that I shall at all times hereafter in all records, deeds and instruments in writing and in all actions and proceedings and in all dealings and transactions and upon all occasions whatsoever use and sign the said name Lionel Lee Ze Kai 李泽楷 as my name in lieu of the said name of Lee Zhen Xiong, Moses (Li Zhenxiong, Moses) 李振雄 so renounced as aforesaid.

AND I hereby authorise and request that all persons do designate and address me by such name of Lionel Lee Ze Kai 李泽楷

IN WITNESS WHEREOF, I have hereunto signed my assumed name of Lionel Lee Ze Kai 李泽楷 and my relinquished name of Lee Zhen Xiong, Moses (Li Zhenxiong, Moses) 李振雄 and have set my seal here in Singapore this 25th day of June, TWO THOUSAND NINETEEN (2019).

SIGNED SEALED and DELIVERED

by the above named Lionel Lee Ze Kai 李泽楷
formerly known as Lee Zhen Xiong, Moses (Li Zhenxiong, Moses) 李振雄
in the presence of :-

HUA YEW FAI TERENCE
Advocate & Solicitor
Singapore