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.		
		ACCIDENT STATEMENT	
	Date Of Report	28/01/2020 18:26	
	Date Of Accident	26/01/2020 10:30	
	Exact Location Of Accident	INFRONT OF GEYLANG SERAI MARKET	
	Country/State of Loss	SINGAPORE	
	D	ETAILS OF OWN VEHICLE	
	Vehicle Registration Number	SLX3659L	
	Insured/Policyholder		
	Name Of Registered Owner	CHAN HWEE KENG	
	NRIC No	SXXXX728A	
	Email Address	SHKDIANA@YAHOO.COM.SG	
	Mobile Phone No	(LOCAL) +65-98751727	
	Alternative Phone No	OFFICE-93093083	
	Vehicle Particulars		
	Manufacturer	BMW	
	Model	216	
	Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE	
	Are you claiming under your own insurance policy for repair to your vehicle?	NO	
	ICAL DI COLO COLO COLO COLO COLO COLO COLO COL	TUDD DADTY	

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 P10154984R00

Cover Note Number

Driver

Name of Driver KOH SENG CHUAN

NRIC No SXXXX610F
Date Of Birth 21/10/1967
Occupation INDOOR
Date Of Driving Pass 21/10/2015

Driving Experience 4 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98751727

Fax Number

Contact Number OFFICE-93093083

EMail Address ALEXKOHSC@YAHOO.COM.SG

Address 9 HAI SING ROAD

Postcode 538913

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES
I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : CHAN HWEE KENG

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE CENTRE

NO

2

2

ROAD: 60 HOUGANG AVE 9, POSTCODE: 538775, COUNTRY:

Police Station Address SINGAPORE

Police Station Contact **TEL NO**: 1800-4890999 - **FAX NO**: 63128989

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACH.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBB9448Z

Vehicle Make/Model/Colour VAN NISSAN SILVER

Details Of Properties REAR

Vehicle Category COMMERCIAL VEHICLE
Name of Driver AMEER KHAN SURATTEE

NRIC/Passport Number SXXXX728A Contact Number 84488592

Address 16 MARINE TERRACE #05-52

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

440016 INDIA INTERNATIONAL INSURANCE PTE LTD

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.
- 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)

Lunderstand, 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:
 - 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: HALL

NRIC/FIN No.:

Sketch Plan Pg. 2 SKETCH PLAN 100 ILX 3659L CHIAT MAIG Q : VAN GBB 94482 **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT** hit from behind by Vehide silver Van (NKSAN) abt 10 30 am. at the

DECLARATION I/We declare the foregoing particulars are true in eyery respect.

Policyholder's Signature

Coffid VC SketchPlant tem; V3

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: SHUKHA121

NRIC/FIN No.:

















GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580

b Raffies Quay #18-UU Singapore 048580 Tell (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

	ADDENDUM				
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:				
	Original Report No	: MPML20012475	Vehicle Registration No: SLX3659L		
	Name(as shownin NRIC)	: CHAN HWEE KENG	(Individual RIC/FIN/Passport No:		
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate				
	Address	;	Singapore()		
	Contact (Tel)	•	Mobile No. :		
	Email Address				
	Date of Accident	: 26/01/2020	Time of Accident : 10:30AM		
		: INFRONT OF GEYLAN			
	Insurance Company: Auto & General Insurance (Singapore) Pte. Limited.				
/ D\		MATION/AMENDMENTS			
	To attach Notice	of Compliance - Notice	e of Reporting to Hougang NPC 8775, POSTCODE: 538775		
	Policyholder / Driver Date:	's Signature	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: Date: 29 1 2020		

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Koh Seng Chuan (S1817610F) residing at 9 Hai Seng Road Spore 538913 contact: 98751727 has reported to the Police a non-injury traffic accident which happened Infront of Geylang Serai Market on 26/01/2020 at 10:30am involving the following vehicles: SLX3659L, (White, BMW) and GBB9448Z (Silver, Nissan), Mr Ameer Khan (S1312789A), Blk 16 Marine Terrace #05-52 Spore 440016 contact: 84488592.

2 If this accident was reported to the Police within 24 hours of its occurrence, Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

HOUGANG NPC 60 HOUGANG AVE SINGAPORE 5387

TEL 1800-4890999

Rank/Name of Issuing Officer: SGT(3) Yasmin Mazlan

Date: 26/01/2020 Time: 1030hrs

S/D Ref: 95

Police Post/Unit: Hougang NPC

Original - to be issued to informant Duplicate - to be submitted to Traffic Police

CONFIDENTIAL

Version as of 15 Jan 2002



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: \$66550020G / GST Reg. No.: M40001773\$

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM				
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:			
	Original Report No :	Vehicle Registration No: SLX 3659L		
	Name(as shownin NRIC) :	Kall SENG CHUAN NRIC/FIN/PassportNo: S1817610F		
	Name(asshownin NRIC): KOH SENG CHUAN NRIC/FIN/Passport No : S1817610 F (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate			
	Address :	834 HOUGANG CENTRAL \$ 08-564 Singapore()		
	Contact (Tel) :	Mobile No.: 98751727		
Email Address : alexkohsc@ yahoo com sg		alexkohsc@yahoo.com.sg		
Date of Accident : 26-01-2020 Time of Accident : 10:		2 6- 01 - 2020 Time of Accident : 10:30		
		INFRONT OF GEYLANG SEPAI MAPLET		
	Insurance Company:			
(B)	ADDITIONAL INFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or			
	make the following amendments:			
	As per	attached.		
	ALLO ALLES CONTROLLA DE CONTROL			
	White State Control of the Control o			
	NEWS AND THE SECTION OF THE SECTION			
	and the second s			
	•			
		The state of the s		
	Policyholder / Drive			
	Date:	Name: SHUICHAIZ! NRIC/FINNO:: 48868076P		
		Date: 5.03.2030		

Gradat widendesite to Mg

On 26 Jan 2020, I was driving along Joo Chiat Road with my wife at the front seat at about 10am+. My car was stationary at the traffic light junction in front of Geylang Serai Market as it was red light.

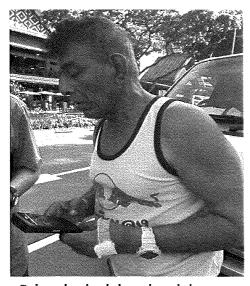
Suddenly we felt a great bang from the back of our car. It was such a great force that both myself and my wife were thrown forward and I hit onto the sterling wheel. We had a great shock and immediately went out from the car to find out what happened. We saw our car being hit by a van (vehicle no. GBB9448Z) behind us.

When the driver got off from the van, he looked blur and walked unsteadily. We asked him why he didn't stop, he just looked at us blankly. We asked from him his contact no. he also cannot articulate his contact no. clearly. Provided 3 sets of mobile no. of all are different when we repeat the nos. back to him. Thus my wife asked if he is drunk but he denied and scolded my wife. Given the circumstance and out of prudency, we have requested to take a photo of his NRIC which he provided. The ID doc shown his name as Ameer Khan Surattee, NRIC no. S1312789A. As he was unable to provide us with his mobile number clearly, we even helped him to obtain the number from the mobile that he was holding with his permission.

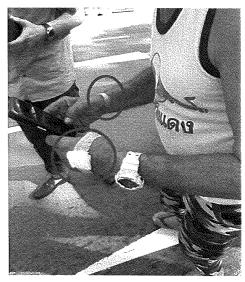
My wife also noticed that he has a few bandages on his hands, hence suspected that he could be under medication influences that why he looks dazed and unable to walk steadily.

Attached pls find additional photos of the driver and the bandages on his hands, in additional to those we have provided earlier.

Footnote: BMW has also extracted the recording footage from our car's CCTV and will be made available upon request.



Driver looked dazed and drowsy



Bandages and plaster on both of driver's hands