AMES/2005/2003-01 | Kan Fook Sing Motor Workshop - Defu ENTRY DATE & TIME 06/07/2020 10:09 SUBMITTED BY: Yen Boo

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 06/07/2020 16:17

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 witholding of material facts may allow insurance companies to 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

aforesain.	commission from the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available
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ACCIDENT STATEMENT	
06/07/2020 10:09	
with appearing a real property and the second secon	
	ACCIDENT STATEMENT 06/07/2020 10:09 29/06/2020 17:30 CTE LAMP POST NUMBER 237 SINGAPORE

	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP4818S	

Insured/Policyholder

Name Of Registered Owner

TAN KIM HOCK WILLIAM

NRIC No

SXXXX377F

Email Address

MIRAIELE@SINGNET.COM.SG

Mobile Phone No

(LOCAL) +65-96648701

Alternative Phone No.

OTHERS-96648701

Vehicle Particulars

Manufacturer MERCEDES-BENZ Model V260 AVG L

Exact Purpose for which vehicle was being used at time of accident

for repair to your vehicle?

Are you claiming under your own insurance policy

If No. Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

Insurance Company

Name of Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage

COMPREHENSIVE

NO

Fleet Policy

1900088511-01

Policy Number

25/04/2020 TO 24/04/2021

Cover Note Number Driver

Name of Driver

TAN KIM HOCK WILLIAM

NRIC No

SXXXX377F

Date Of Birth

28/01/1969

INDOOR

Occupation

16/04/1987

Date Of Driving Pass

33 YEARS AND 2 MONTHS

Driving Experience

MALE

Gender

Mobile Number

(LOCAL) +65-96648701

Fax Number

OTHERS-96648701

Contact Number

MIRAIELE@SINGNET.COM.SG

EMail Address

27L NIM ROAD SINGAPORE 805006 Address

Postcode

Was driver an employee of the Insured's Company

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO

involved in the accident

3

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)

NO

soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver)

Details of Police Action

YES

Was the accident reported to the police? If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

refer with attach police report.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YP1635G

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

TAY AH SIOK

NRIC/Passport Number

SXXXX240A

Contact Number

88148233

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLB4299B

Vehicle Make/Model/Colour

TOYOTA SIENTA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver NRIC/Passport Number PHUA CHYE YONG

SXXXX416D

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

TAN KIM HOCK WILLIAM

Approximate Age

Injuries Sustain

SENGKANG GENERAL HOSPITAL PTE LTD - 14DAYS MC

Injured person in which vehicle?

SKP4818S

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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- 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
- 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.
- 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
- 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)
 - (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 1
- (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
- my Persona. Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents[including their lawyers/faw 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)

Reporting Centre Personnel's Signature Name

NRIC/FIN No.

Ä. SKP48183. B. YP1635G C. SLB 4289B.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

uga	40	18ghce	m	 	
\bigcirc			0		
	-				
				INSURER	
				VEHICLE	
				 DOA	
				CLAIM T	YPE
				WORKS	HOP

DECLARATION

I/We declare the foregoing particulars are true every respect.

Endoystender's Segresture

(15 25hm.

Pagestra Certie Per core 1 50, 40.19

NEXT NO





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 4 Report No. T/20200703/7010

REPORT O	FATR	AFFIC A	CCIDENT

Date/Tit 03/07/2	me Report I 020 15:53	Made:	Vide Report No.: Station Diam		
Informa	nt's Partic	ulars			
	f Informant: M HOCK W		Address: 27L NIM ROAD SINGAPORE	805006	
ID Type NRIC N	/ ID No.: O / S69033	77F	Contact No.: Home/Office:	Mobile: 96648701	
National SINGAF	lity: PORE CITIZ	ΈN	Email: MIRAIELE@SINGNET.COM.	SG	
Sex: Male	Age: 51	Date of Birth: 28/01/1969	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupati Self Emp			Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/06/2020 17:30	Type of Location: Straight Road	
Location: CENTRAL EX Lamp Post Nu Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume: Heavy	
ype of Collisi	on: ng Vehicles - Head To R			Anyone conveyed by ambulance:	

Details of V	T	Make	Model	Color	Condition	No of Passenge
Vehicle No. SKP4818S	Type Car	MERCEDES BENZ	V260	Silver	Seriously Damaged	0
SLB4299B	Car	TOYOTA	Senta	Green	Slightly Damaged	1
YP1635G	Lorry	ISUZU		Blue	Slightly Damaged	1

	ehicle Insurance	I No	Effective	Excitoy-
Vehicle No.	Institute Company	Insurance No	Linguage	
SKP4818S	AIG ASIA PACIFIC INSURANCE PTE.			





2 of 4

Report No. T/20200703/7010

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

	n Involved: No				
No. of Pedestr	ians Injured: NIL	Use of Pe	doctria	o Cross	sing: NA
Driver	injured. IVIE	T USE OF FE	euestria	1 0100	Jii.g.
Name	TAN KIM HOCK WILLIAM		ID No).	S6903377F
Related Vehicle	e SKP4818S (Car)		Conta	act No.	96648701
Hospital/Clinic	SENGKANG GENERAL HOS	PITAL PTE.	Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	29/06/2020	Date Disc	h	1 00/00	10000
No. of Days gra	nted Medical Leave 14	Degree o	finium	Serio	5/2020
Driver		T Degree 0	injury	Serio	us
Name	PHUA CHYE YONG		ID No		S1648416D
Related Vehicle	SLB4299B (Car)		Conta	ct No.	NIL
lospital/Clinic	NIL		Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
ate Treatment	NIL	Date Disc	hargo	NIL	
o. of Days gran	ted Medical Leave NIL	Degree of		NIL	
river		1 Dogice of	injury	INIL	
ame	TAY AH SIOK		ID No.	0	S1300240A
elated Vehicle	YP1635G (Lorry)		Conta	ct No.	88148233
spital/Clinic	NIL		Class Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
e Treatment	NIL	Date Disch	narge T	NIL	
	d Medical Leave NIL		Injury	NIL	

Brief Details.

DN

On the 29.06.2020 at about 5.30pm, I was travelling in my vehicle bearing resgistration number SKP4818S along CTE heading towards Braddell Exit(about 350 metres away from the exit), closed to lamp post 237. A Lorry bearing registration number YP1635G driven by Mr Tay Ah Siok (h/p: 88148233) bearing IC S1300240A, collied with my vehicle from the rear. As a result, it cause my vehicle to collided with a vehicle in front of me, aToyota Senta bearing registration number SLB4299B which driven by Mr Phua Chye Yong bearing IC S1648416D.

The lorry YP1635G also collided with vehicle on its right side. There are a total of 3 person (inculding me) injured. I went to Sengkang General Hospital by myself on the 29.06.2020 at about







3 of 4

Report No. T/20200703/7010

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

7pm and was discharged on the 30.06.2020. I was given 14 days MC. I sustained injuries such as Whiplashed.





4 of 4

Report No. T/20200703/7010

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan	-

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPHQ / SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476394

Authentication Stamp

NP168

Signature Of Informant:

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

Date/Time: 03/07/2020 15:53

Classification Of Case: