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 | 15/07/2020 11:07 |
| Date Of Accident | 14/07/2020 09:20 |
| Exact Location Of Accident | SERANGOON RD TWDS PIE (TUAS) |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SMQ6009T |
| Insured/Policyholder | |
| Name Of Registered Owner | SMOKEVOXY |
| Co Reg No | 5XXXX826D |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | VOXY HYBRID 1.8V AT ABS D/AIRBAG 2WD |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE USE |
| 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 HIRE |
| Insurance Company | |
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5114412079 |
| Cover Note Number | |
| Driver | |
| Name of Dairen | TANLES OF AT (CUENTIN) |

Name of Driver TAN LEE GEAT (CHEN LIYI)

NRIC No SXXXX116Z
Date Of Birth 15/11/1981
Occupation OUTDOOR
Date Of Driving Pass 31/03/2006

Driving Experience 14 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97410856

Fax Number

Contact Number OFFICE-97410856

EMail Address NOEMAIL

BLK 804A KEAT HONG CLOSE Address

#13-08 681804

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

CHAIN COLLISION 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? YES

Was any injured conveyed to hospital by

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) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

3

NO

NO

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

Police Station Address **SINGAPORE**

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20200714/7019.

Was there any video captured by Car Camera?

Attachment(s)

Are accident photos available for attachment? YES YES

Remarks/ Reasons: VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS5154P

Vehicle Make/Model/Colour SUBARU FORESTER

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Page 2 of 20

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGD2326T

Vehicle Make/Model/Colour NISSAN SUNNY

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN LEE GEAT (CHEN LIYI)

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? SMQ6009T
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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- 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 aforesald.
 - B. Consent under the Personal Data Protection Act (PDPA)

l 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;
 - (iii) Investigating the accident and/or my dalms;
 - (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/mall packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes"
- 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 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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection. ivestigation and management in present and all future claims.
- 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.

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Policyholder Date & Time:

mean respective as a sec-

Oriver's Signature (If ciriver is not the policyholder)

Date & Time:

Name NAIC/FIN Ha:

Reporting Centre Personnel's Signatur

Accident Sketch Plan

| | SKETCH PLAN | 1111119TE/GH | PIE TUAS 11 | TE/SLE | 11111111111 |
|--------------|--------------------|---------------------------------|-------------|-------------------|------------------------------|
| A: SMGGOOTT | :111111 | 6 | | | HHHHH |
| 3: SLS 5154P | 1111111 | 1111111111 | | | |
| L: SG023267 | -1-1-1-1-1-1 | | NI | | |
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| | DESCRIBE CIRCUMSTA | NCES OF THE ACCIDENT | | | - faster destadades de la Ta |
| | Refer to 1 | poisce report | | - | |
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| DECL | ARATION | | | | |
| | | iculars are true in every respe | ct. | | 51 |
| 6 | OTE VOT | Lk | | | |
| Palicy | 0 | Driver's Signature | | Reportion Control | Personnel's Signature |
| Date & | Time | (If driver is not the poli- | cylinider) | Name: | - Anne |

White College Print Vil

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20200714/7019

REPORT OF A TRAFFIC ACCIDENT

| | ne Report M 20 17:50 | Made: | Vide Report No.: A/20200714/0026 | Station Diary No.: |
|--|-------------------------|------------------------------|---|----------------------------|
| Informa | nt's Partic | ulars | | |
| Name of TAN LEE | Informant: GEAT | | Address: APT BLK 804A KEAT HONG 681804 | CLOSE #13-08 SINGAPORE |
| ID Type / ID No.: NRIC NO / S8138116Z | | 16Z | Contact No.: Home/Office: | Mobile: 97410856 |
| Nationali SINGAP | ty: ORE CITIZ | :EN | Email: SMOKEOUTS@YMAIL.COM | |
| Sex: Male | Age: 38 | Date of Birth: 15/11/1981 | Type of Informant: Driver | |
| Race: Chinese | | | Language: English | Institution / School Name: |
| Occupation: Grab Driver | | | Driving Licence Information: Class: | Date of Expiry: |

| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 14/07/2020 09:20 | Type of Location Straight Road |
|-----------------------------------|------------------------------|------------------------------------|---|-----------------------------------|
| Location: SERANGOO | N ROAD | Road Surface: | | Road Speed Limit: |
| | | | | |
| | | | | |
| Clear Traffic Flow: One Way | | Traffic Control: Not Controlled | | Traffic Volume: Moderate |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|--------|-------|-------|----------------------|----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenge |
| SGD2326T | Car | NISSAN | | | Seriously Damaged | 0 |
| SLS5154P | Car | SUBARU | | White | Seriously Damaged | 1 |
| SMQ6009T | Car | | | Black | Seriously Damaged | 0 |

| Details of Person Involved | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20200714/7019

CONTINUATION OF REPORT

| Driver | | | | all lives | 1000 | |
|------------------|--------------------------------------|--|----------|-------------------------------------|--------|-----------------------------------|
| Name | TAN LEE GEAT | | | ID No | | S8138116Z |
| Related Vehicle | SMQ6009T (Car) | | | Conta | ct No. | 97410856 |
| Hospital/Clinic | NIL | | | Class Drivin Licent Expiry | g | Class: NIL Date of Expiry: NIL |
| Date Treatment | 14/07/2020 Date D | | | harge | 14/07 | 7/2020 |
| No. of Days gran | No. of Days granted Medical Leave 05 | | Degree o | Degree of Injury Sligh | | t |

Brief Details.

I was travelling along serangoon Road towards PIE tuas on Lane 2, suddenly the vehicle in front slow down and stop, I follow suit. But the vehicle behind me bearing vehicle number SLS5154P could not brake in time and collided onto my vehicle rear portion. The impact was so great that my in car camera also flew off. The impact causes my vehicle to propel forward and hit onto vehicle SGD2326T. We alighted exchange particulars and the last vehicle passenger is injured and got conveyed to the hospital by ambulance. I wish to state that I manage to brake in time in stationary position before SLS5154P hit onto my rear. I suffer some cuts and bruises after the accident and was treated by the paramedic. I consulted a doctor at intermedical 24hr clinic and was referred to Amk polyclinic for an x-ray.

Police Report





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

3 of 3 Report No. T/20200714/7019

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

Authentication Stamp

NP168

| 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: 14/07/2020 17:50 |
| Officer In Charge Of Case: TP / TPIB / ABDUL MUHAIMIN BIN HUSSAIN Contact No.: 65476845 | Classification Of Case: |























