

## 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	05/08/2020 11:53
Date Of Accident	05/08/2020 08:40
Exact Location Of Accident	KPE (ECP)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJD5226T
-----------------------------	----------

### Insured/Policyholder

Name Of Registered Owner	VITE MOTORS SINGAPORE LLP
Co Reg No	TXXXXX764L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92375989
Alternative Phone No	OFFICE-92375989

### Vehicle Particulars

Manufacturer	HONDA
Model	ODYSSEY
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 CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5095733355-02 (TP)
Cover Note Number	

### Driver

Name of Driver	TOMMY YU TSENG
NRIC No	SXXXX505I
Date Of Birth	09/11/1980
Occupation	INDOOR
Date Of Driving Pass	05/01/2018
Driving Experience	2 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98009480
Fax Number	
Contact Number	OTHERS-98009480
EMail Address	TOMMY_YU_TSANG@YAHOO.COM

Address 31 HOUGANG AVE 7 #14-05  
Postcode 538800  
Was driver an employee of the Insured's Company NO  
If No, Relationship of the Driver with the Insured OTHER - HIRER  
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? NO  
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) 2  
Passenger 1  
NAME: : GENEVIEVE  
GENDER: : FEMALE

#### 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

REFER TO STATEMENT ATTACHED.

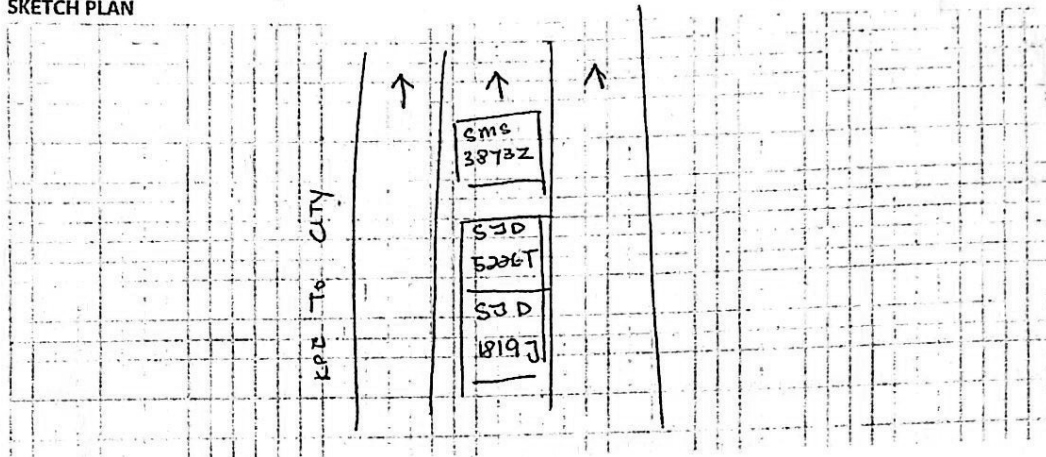
#### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Remarks/ Reasons: SYSTEM UNABLE TO UPLOAD  
Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJD1819J  
Vehicle Make/Model/Colour SUBARU  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number SXXXX972E  
Contact Number 96427631  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on the far left lane on KPE (ECP). I intended to move to the middle lane thus I put on the right signal light for a few seconds before I slowly move my car to the right (middle) lane when I notice the car behind is within around <sup>20-3</sup> cars distance. As I slowly moving to the middle lane, the car in front stop which resulted in me ~~start~~ slowing down and gradually stop. Then suddenly the car behind rear-ended me.

DECLARATION

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

05 AUG 2020

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.: