

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	10/10/2020 12:50
Date Of Accident	10/10/2020 07:00
Exact Location Of Accident	ALONG HOUGANG AVE 4 TOWARDS IMH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR7087R
Insured/Policyholder	
Name Of Registered Owner	TAN GEK KEOW
NRIC No	S7304070A
Email Address	LKK_88@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-81285417
Alternative Phone No	OFFICE-96353701

Vehicle Particulars

Manufacturer	KIA
Model	PICANTO-1.1 (A)
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?	YES
If No, Please state action to be taken	
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	P10346138R00
Cover Note Number	15/04/2020 - 14/04/2021

Driver

Name of Driver	LIM KIM KOON
NRIC No	S1666043D
Date Of Birth	06/03/1964
Occupation	INDOOR
Date Of Driving Pass	06/05/1985
Driving Experience	35 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96353701
Fax Number	
Contact Number	OTHERS-81285417
EEmail Address	LKK_88@YAHOO.COM.SG

Address	574 HOUGANG ST 51 #17-07
Postcode	530574
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	COLLIDED INTO PROPERTY
Weather Conditions	RAINING
Road Surface	WET

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)	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
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 TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	RAILING
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

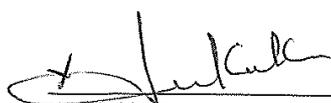
SKETCH PLAN

IMPORTANT NOTICE

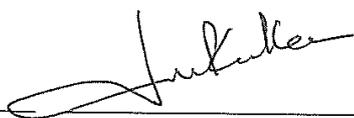
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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) 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:

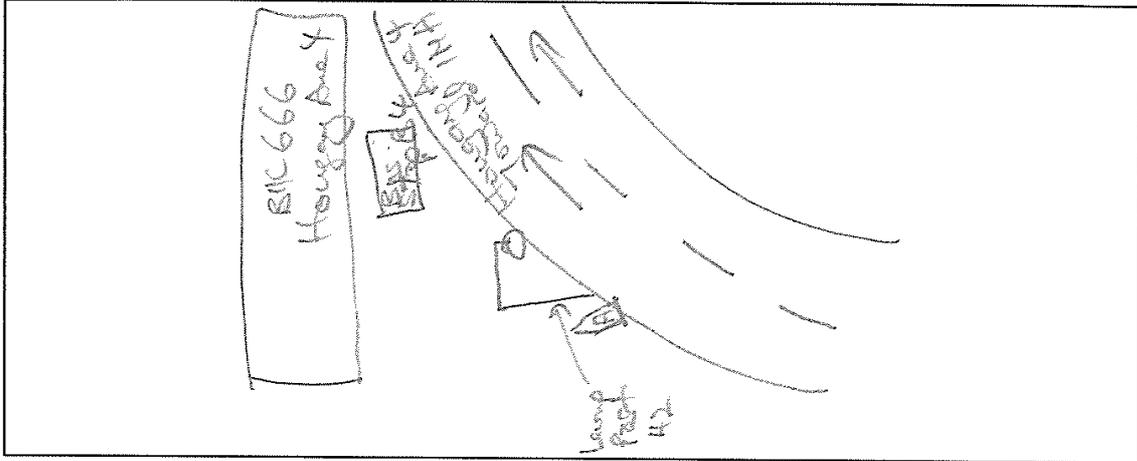


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 10/10/2020 Time: 0700 Location: Hougang Ave 4 to IHH
 My Vehicle A: STR7087R Vehicle B: — Vehicle C: —

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks : Please forward a copy of my efile accident report to:
 My workshop :
 Email address :
 & myself :
 Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time: 10/10/2020
1129h4

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

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





**SINGAPORE
POLICE FORCE**



T/20201010/7004

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

2 of 3

Report No. T/20201010/7004

CONTINUATION OF REPORT

Driver			
Name	LIM KIM KOON		ID No. S1666043D
Related Vehicle	SJR7087R (Car)		Contact No. 96353701
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 2B,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 10/10/2020@7am, while driving along Hougang Ave 4 towards IMH (besides Bus stop NOT of Blk 666 Hougang Ave 4), at the gradient, my car suddenly spinned (right car tyre might be punctured) & mount onto the left side of the road kerb and hit onto the lamp posts 42.

Damaged: Lamp Post 42 box, my car: Right tyre punctual, right rear door, rear window, front right bumper



**SINGAPORE
POLICE FORCE**



T/20201010/7004

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

3 of 3
Report No. T/20201010/7004

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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: 10/10/2020 09:54
Officer In Charge Of Case: TP / TPHQ / NUR ADELINA BINTE MOHAMMAD FUAT Contact No.: 65476066	Classification Of Case:
Authentication Stamp NP168	

photo Pg. 1



photo Pg. 2



photo Pg. 3



Policy Schedule

 Comprehensive Car Policy
 Policy Number: P10346138R00

Your Policy Summary, Certificate of Insurance, Policy Schedule and Product Disclosure Document will form an insurance contract with us for your policy. Do let us know straightaway if any of the details shown here need to be amended.

Period of Insurance

Policy Number	: P10346138R00	Policy Issued On	: 05/03/2020
Policy Start Date	: 15/04/2020 (00:00)	Policy End Date	: 14/04/2021 (23:59)

Cover

Type of Cover	: Comprehensive / Named Driver Plan
Optional Cover(s)	: Please refer to Policy Summary for any optional cover(s) selected.

Excess *(All excess amounts are subject to GST, if applicable)*

Policy	:	S\$ 600.00
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Additional Excess *(All excess amounts are subject to GST, if applicable)*

Windscreen	:	S\$ 100.00
Named Driver below 25 years old	:	S\$ 500.00
Named Driver with less than 2 years' valid driving licence	:	S\$ 500.00

Premiums

Gross Premium	:	S\$ 315.35
7% GST	:	S\$ 22.08
Total Premium Payable	:	S\$ 337.43

Policyholder

Name	:	Tan Gek Keow
Address	:	574 574 Hougang St 51 #17-07 Singapore 530574
Email Address	:	lkk_88@yahoo.com.sg
Mobile Number	:	96353701

Main Driver

Name	:	Lim Kim Koon
Date of Birth	:	06/03/1964
Gender / Marital Status	:	Male / Married
Occupation	:	Professional
Certificate of Merit	:	No
Licence Held For	:	More than 5 years
No. of Claims/Accidents (Last 3 Yrs)	:	0 At-Fault and 0 Not At-Fault

Vehicle Insured

Vehicle Registration Number	:	SJR7087R
Chassis Number	:	-
Make & Model	:	Kia Picanto 1.1
Vehicle Colour	:	Orange
Year of First Registration	:	2009
Sum Insured	:	Market Value
Off-Peak Car	:	No
NCD	:	50%
Vehicle Usage	:	Private and Commuting
Modifications Declared	:	None

Driver Plan

Named Driver Plan. Only drivers named as a Main / Named Driver in the policy will be covered. The Excess amount(s) described above may apply, in accordance with the Product Disclosure Document.

Named Driver(s)

None

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10346138R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10346138R00 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	:	SJR7087R
Chassis Number	:	-
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	15/04/2020 (00:00)
3) Date / Time of Expiry of Insurance	:	14/04/2021 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Tan Gek Keow
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Lim Kim Koon (06/03/1964)
Named Driver(s) / Date of Birth	:	No driver is named.
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.		
8) Finance Company	:	NA

I / We hereby certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 05/03/2020

 Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance



Simon Birch

Identification Card Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1666043D



Name
LIM KIM KOON
林金錕

Race
CHINESE

Date of birth
06-03-1964

Country/Place of birth
SINGAPORE

Sex
M

S1666043D




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1666043D
Name: LIM KIM KOON

Birth Date: 06 Mar 1964
Issue Date: 08 Jan 2004

001080321H




STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

family/rel.
No injury.
No vehicle
1px

5641637



NRIC No. S1666043D



Date of issue
11-08-2016

Address
APT BLK 574 HOUGANG STREET 51
#17-07
SINGAPORE 530574

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	05 Mar 1985
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 May 1985

NP 428A

Licence No: S1666043D



STRICTLY
FOR WORKSHOP USAGE

USE FOR ACCIDENT
REPORTING ONLY

Accident Photo



Accident Photo



Accident Photo



Accident Photo



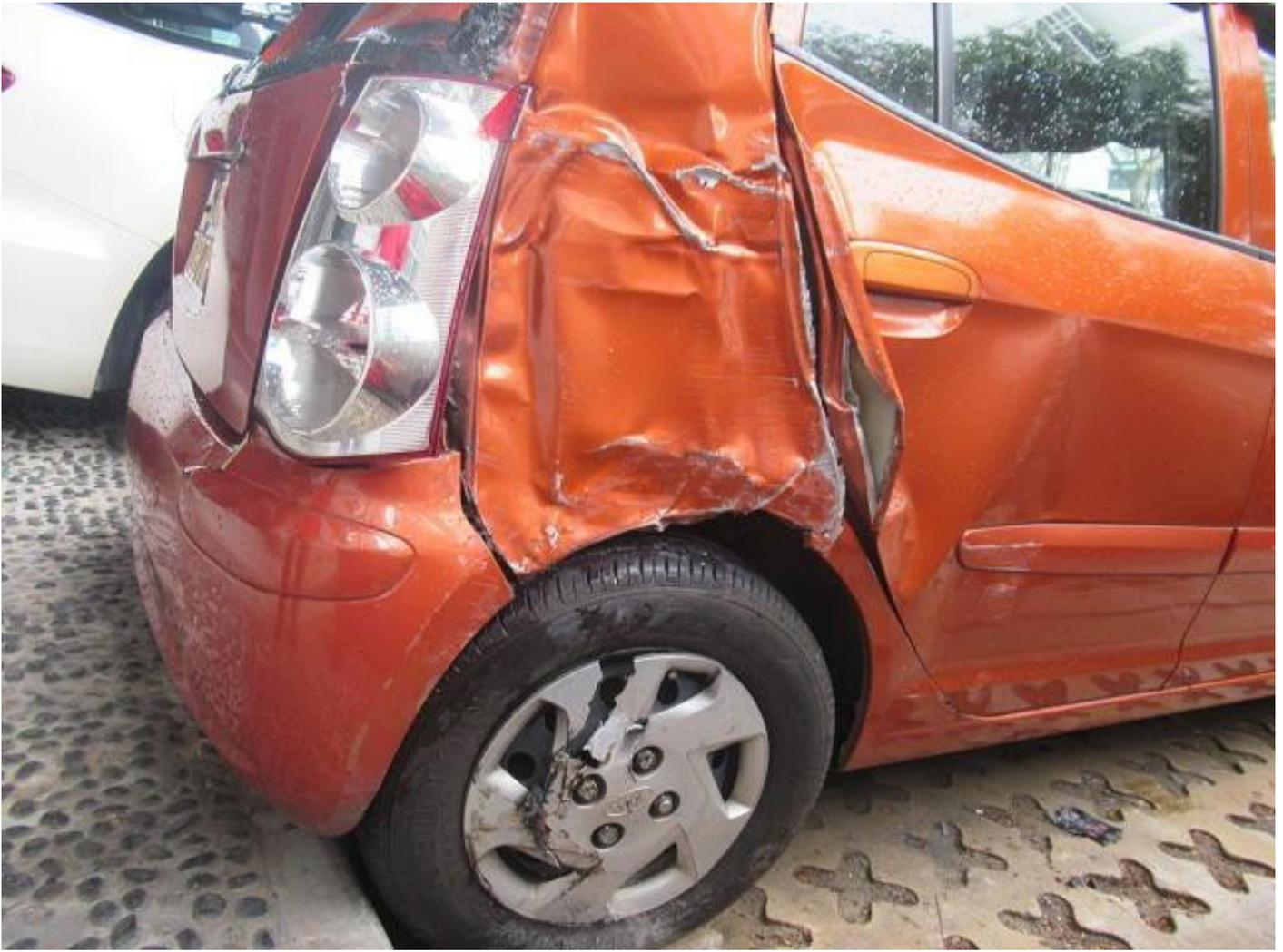
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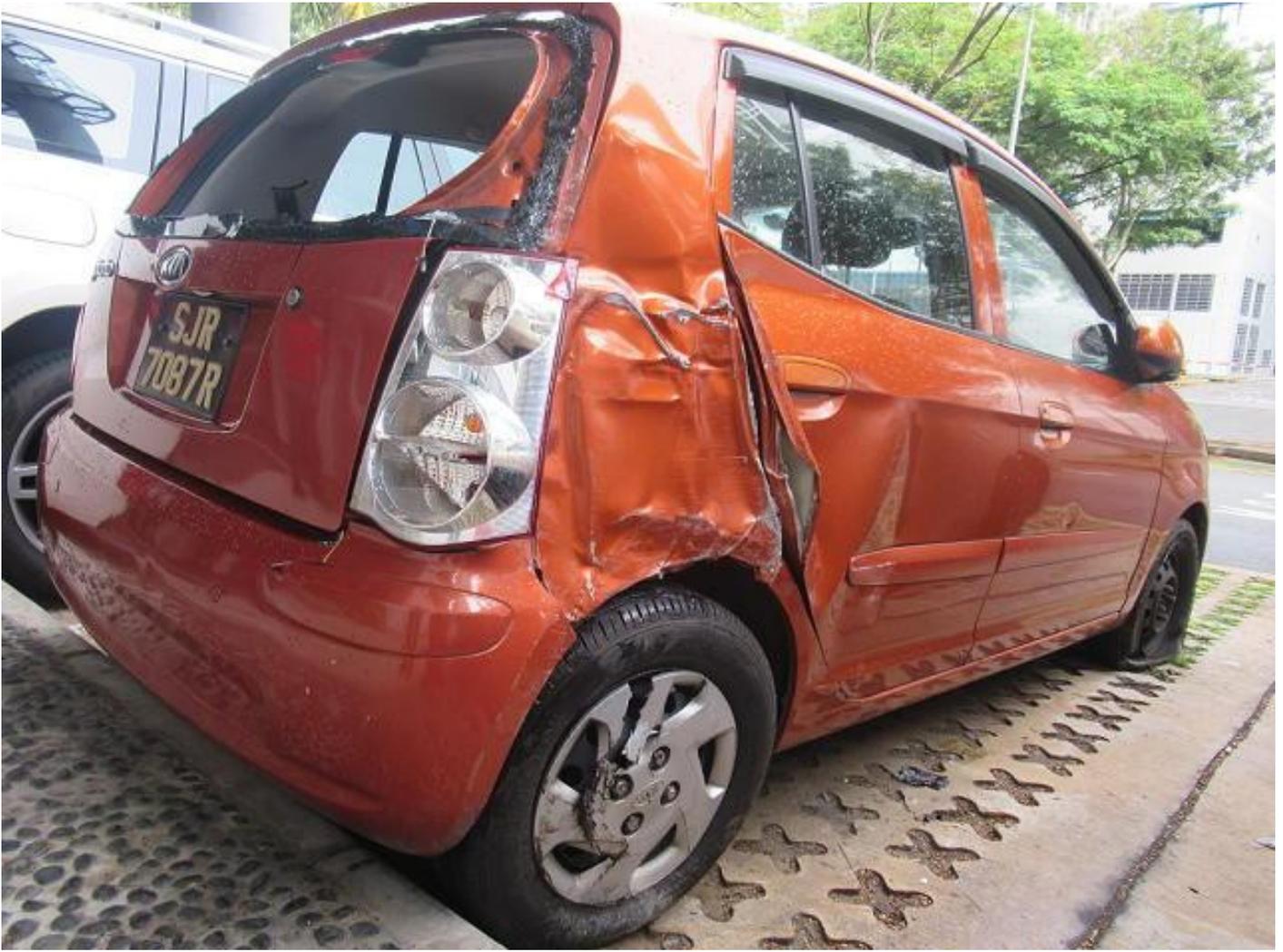
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Accident Photo

