

SINGAPORE ACCIDENT STATEMENT

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

- 3. Information provided must be as trutiful and accurate as possible. All mission of 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 Submission	16/02/2021 17:59 (SGT)
Date of Accident	09/02/2021 18:20 (SGT)
Exact Location of Accident	Nicoll Hwy, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE Vehicle Registration Number SLL8060T INSUREDIPOLICYHOLDER Is company? Name Of Registered Cwner Leow Siang Hwee SXXXX862G SXXXX862G Leow Siang Hwee SXXXX862G SXXXX862G Nobile Plone No SXXXX862G Nobile Plone No (Phone) +65-8188488 Honda Vezel		
Insuration of Registered Owner Is company? Name Of Registered Owner NRIC No SXXXX862G Email Address Mobile Phone No Alternative Phone No Alternative Phone No Honda Vezel Fact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Insurance Company Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number Private Leow Slang Hwee SXXXX862G Leow Slang Hwee SXXXX862G Date Of Birth No SXXXX862G Date Of Birth Over State Owner No SXXXX862G SXXXX862G SUXXX862G SUXX862G SUXXX862G SUXX862G	DETAILS OF	OWN VEHICLE
Is company? Name Of Registered Owner NRIC No SXXXX862G Iouis8082@gmail.com (Phone) +65-81884888 Manufacturer Model Vericle Particulars Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Vehicle Category Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver NRIC No SXXXX862G SXXXX862G Date Of Birth No SXXXX862G SXXXX862G SXXXX862G Date Of Birth Outside Category Pivate Leow Siang Hwee SXXXX862G SXXXX862G SXXXX862G SXXXX862G SXXXX862G SXIII SIANG SAXXX862G SXXXX862G SVID101980	Vehicle Registration Number	SLL8060T
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Name of Registered Owner NRIC No SXXXX862G SEMAIL Address Iouls8082@gmail.com (Phone) +65-81884888 VEHICLE PARTICULARS Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Vehicle Category No - Claiming third party Private car Name of Insurance Company Name of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver NRIC No SXXXX862G Date Of Birth SXXXX862G SXXX862G SXXXX862G SXXXX86C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXX8C SXXXXX SXXXX SXXX SXXXX SXXXX SXXX SXXXX SXXXX SXXX SXXX SXXXX SXXX SXXX SXXX SXXX SXXX SXXX SXXX	Is company?	No
NRIC No Email Address louis8082@gmail.com Mobile Phone No Alternative Phone No VEHICLE PARTICULARS Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category INSURANCE COMPANY Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver	Name Of Registered Owner	Leow Siang Hwee
Email Address louls8082@gmail.com (Phone) +65-81884888 Alternative Phone No		
Mobile Phone No (Phone) +65-81884888 Alternative Phone No +65-81884888 VEHICLE PARTICULARS Manufacturer Honda Vezel Variant - Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Private car INSURANCE COMPANY Name of Insurance Company Direct Asia Comprehensive No Policy Number Cover Note Number - DRIVER Name of Driver Leow Slang Hwee SXXXX862G Date Of Birth SAME COVID'1980	Email Address	
Alternative Phone No +65-81884888 VEHICLE PARTICULARS Manufacturer Honda Vezel Variant -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 - Claiming third party Private car INSURANCE COMPANY Name of Insurance Company Direct Asia Comprehensive No MT/00459561/02 Policy Number Cover Note Number MT/00459561/02 DRIVER Name of Driver Leow Siang Hwee SXXXX862G Date Of Birth 20/10/1980	Mobile Phone No	
Manufacturer Honda Model Vezel Variant	Alternative Phone No	
Model Vezel Variant	VEHICLE PARTICULARS	
Model Vezel Variant - 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 - Claiming third party Private car INSURANCE COMPANY Name of Insurance Company Direct Asia Comprehensive Fleet Policy No Policy Number Cover Note Number MT/00459561/02 DRIVER Name of Driver Leow Slang Hwee SXXXX862G Date Of Birth 20/10/1980	Manufacturer	Honda
Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category INSURANCE COMPANY Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver Name of Driver Name of Driver Name of Driver NRIC No Date Of Birth 20/10/1980		
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accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category INSURANCE COMPANY Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver Name of Driver NRIC No Date Of Birth Private use No - Claiming third party Private car No - Claiming third party Private car No - Claiming third party Private car No - Claiming third party Private use	Exact purpose for which vehicle was being used at time of	
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your vehicle? Vehicle Category No - Claiming third party Private car INSURANCE COMPANY Name of Insurance Company No Coverage Comprehensive No No MT/00459561/02 DRIVER Name of Driver Name of Driver NRIC No SXXXX862G Date Of Birth DRIVER No - Claiming third party Private car Level Asia Comprehensive No MT/00459561/02 Leow Slang Hwee SXXXX862G Date Of Birth DRIVER	Are you claiming under your own insurance policy for repair to	
Name of Insurance Company Name of Coverage Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver	your vehicle?	No - Claiming third party
Name of Insurance Company Type of Coverage Comprehensive Fleet Policy No Policy Number Cover Note Number DRIVER Name of Driver NRIC No Date Of Birth Coverage Direct Asia Comprehensive No MT/00459561/02 Leow Siang Hwee SXXXX862G 20/10/1980	Venicle Category	Private car
Type of Coverage Fleet Policy No Policy Number Cover Note Number DRIVER Name of Driver NRIC No NRIC No Date Of Birth Cover Note Number Comprehensive NT/00459561/02 Leow Siang Hwee SXXXX862G 20/10/1980	INSURANCE COMPANY	
Type of Coverage Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver NRIC No Date Of Birth Description	Name of Insurance Company	Direct Asia
Fleet Policy Policy Number Cover Note Number DRIVER Name of Driver NRIC No Date Of Birth DRIVER No MT/00459561/02 Leow Siang Hwee SXXXX862G 20/10/1980	Type of Coverage	
Policy Number MT/00459561/02 Cover Note Number Leow Siang Hwee NRIC No SXXXX862G Date Of Birth 20/10/1980	Fleet Policy	
Cover Note Number DRIVER Name of Driver NRIC No SXXXX862G Date Of Birth 20/10/1980	Policy Number	
Name of Driver	Cover Note Number	m 170043530 1702
NRIC No SXXXX862G Date Of Birth 20/10/1980	DRIVER	
NRIC No SXXXX862G Date Of Birth 20/10/1980	Name of Driver	Leow Siang Hwee
Date Of Birth 20/10/1980		
Occupation		
	Occupation	
	(#U A = 1/4 1 CV (0004 00000	

Jate Of Driving Pass	19/12/2009
Driving experience	11 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81884888
Alt. Phone Number	+65-81884888
Email Address	louis8082@gmail.com
Address	37 Punggol Field
Address complement	#17-29
Postcode	828809
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	•
Does Driver Own Other Vehicles?	No
	110
Vehicle Registration Number of Other Vehicle Owned by Driver	
101 VIII O and he Driver	•
Insurance Company of Other Vehicle Owned by Driver	•
GENERAL INFORMATION OF THE ACCIDENT	
GENERAL INFORMATION OF THE AGGISETT	
Type of Accident	Collision - Change/cross lane
Weather Conditions	Raining
Road Surface	
Road Surface	Wet
OTHER INFORMATION	
OTTER OTHER TOTAL	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
	NO
Was any injured conveyed to hospital by ambulance?	•
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
Soliciding/offering accident claims assistance.	
DETAILS OF POLICE ACTION	
11 d 11 d 11 d 12 d 12 d 12 d 12 d 12 d	N-
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	•
CIRCUMSTANCES OF ACCIDENT	
Defeate alestel plan	
Refer to sketch plan.	
ATTACHMENT(S)	
ATTACHMENT(0)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No
was there any addit recorded i	110
DETAILS OF OTHER	VEHICLE PROPERTY 1
CARGO LONGO DE LA CASA DEL CASA DE LA CASA D	
Vehicle Registration Number	SKJ180E
Vehicle Manufacturer	•
Vehicle Model	
Vehicle Variant	
Venicie variant	<u>⊼</u>
Vehicle Colour	•
Vehicle Category	Private car
Name of Driver	Heng Pei Cheng
Contact Number	(Phone) +65-90088207
	() : •• •••••••
Address	□

Accident report SV0S212G0005

Address complement
Postcode
Insurance Company Name

SKETCH PLAN

IMPORTANT NOTICE

- 1. Pease report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any willulmsrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 ladgement 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 (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Polityholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time KPE

Witnessed by Reporting Centre Personnel

Sketch Plan

T. T. T. T. CONTROLLE
I would like to report unsafe driving behaviour and minor accident
INVOIVING ME AND ANDHUR PARALI (SKTISOE)
Date: 9+4 Feb 2021
Timl: 6.20pm
Location: Nicoll Highway towards KPE/TPE Tunnel entrance
While already forming up and walting in line to enter KPE Tunnel
A black mercedes cut quale and aggresively triod to get in between cars
- Other party falls to form up in the line
- Other party did not ensure it was safe to cut in before doing so.
- My car was not moving when a small impact was telt.
While cutting in, the other party front bumper brushed against my rear tender.
After getting off our car, the other party asked why i don't se more into the
next lane and let him cut in.
He then insist my damage is minor scratches while his car looks totally
scratchless, he suggested me to go back and use wax to polish off, which
l agreed to.
After taking photos and exchanging particulars, i let him know that i will go back and access my damage, if i don't call him means no problem.
and access my damage, if i don't call him means no problem.
did to because
- it was raining (Hard to access the damage with ramwater)
- buc cars are holding the traffic into the tunnel (rush bours)
From his front camera, it could be seen that I told him that I don't want to
hold the traffic (while pointing to the buck four twice), he gave me a part
on the back and off we go.
I then received an email from my insurer that their was incoming claim from
Third farty SEJIOPE from Cycle & Carriage.
It surprised me to receive a claum against me, which seeming by i was the
viction who was not going to pursue the mather, i was in lane all the while.
I was in lane all the while.
Mara is a selection of the selection of
Above is axact statement i made to TP to report unsafe driving behavior.

Declaration

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

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Tima

Witnessed by Reporting Centre Personnel