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 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.

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 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 01/04/2021 16:33 (SGT) Date of Accident 31/03/2021 18:37 (SGT) Exact Location of Accident Outram Rd, Singapore 169608 Additional Location Information OPEN CARPARK AT SINGAPORE GENERAL HOSPITAL Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Suzuki

Vehicle Registration Number SKX6692G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MRS GOH THONG NGEE NEE TAN YEE MAIN NRIC No. SXXXX098D Email Address GOH.MAI@GMAIL.COM Mobile Phone No (Phone) +65-96755761 Alternative Phone No (Office) +65-96755761

VEHICLE PARTICULARS

Manufacturer

Model Swift 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 - Reporting only Vehicle Category Private car Transmission Auto CC 1400

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 5095553919-03 Cover Note Number

DRIVER

Name of Driver **GOH ZHAOHAN** NRIC No. SXXXX359B

Date Of Birth 29/11/1989 Occupation Indoor Date Of Driving Pass 15/09/2009 Driving experience 11 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-81392219 Alt. Phone Number Email Address GOH.MAI@GMAIL.COM Address 11 WATTEN TERRACE Address complement Postcode 287235 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver 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 the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE SKETCH PLAN & UPLOADED ACCIDENT STATEMENT. 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 SME245E Vehicle Manufacturer **BMW** Vehicle Model Vehicle Variant

Private car

Name of Driver	
Contact Number	
Address	
Address complement	

Vehicle Colour
Vehicle Category

Postcode	-
nsurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

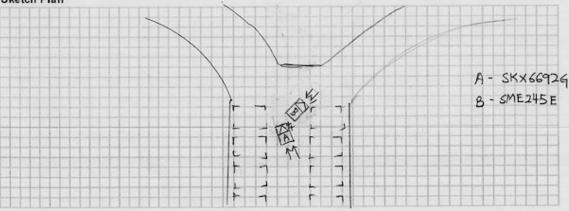
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Please refer to the arid	ent Statement	
upload	ed	
Declaration		
Deciaration		
We declare the foregoing particula	rs are true in every respect.	
		PREMIL
		()
Sul 1/4/21		ARE CO
Policyholder's Signature / Date &	Principal Control (Marian)	W
Policyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel

Vehicle (covered by policy and) damaged in accident: SKX6692G (the "Covered Vehicle")

<u>Driver of the Covered Vehicle</u>: Goh Zhaohan, NRIC S8943359B (named in policy) (the "Named Driver"; or "Driver of the Covered Vehicle").

Other vehicle involved in accident: SME245E (Model: Black BMW X1) (the "BMW")

<u>Driver</u>: Mr Lim K K (91180012, kkl1m@hotmail.com) (the "Driver of the BMW")

Location of accident: Macalister Car Park H (Open Alsr Carpark)

Time of accident: Around 1837H, 31 March 2021

Details of accident:

- 1. Video documentation is available of this incident, time-stamped at 1837H, 31 March 2021.
- At or around 1837H, 31 March 2021, the Covered Vehicle was being driven by the Named Driver, and headed out of the Macalister Car Park H, following behind the BMW. The BMW reached a stop line at a Y junction and turned towards the right fork of the Y junction, partially and without signalling prior, before coming to a full stop. The Named Driver was unsure of the BMW's intentions but also came to a full stop.
- 3. The Named Driver was misled by the BMW's lack of signalling, and judged that the BMW was about to turn right. The Named Driver therefore proceeded behind the BMW towards the left fork of the Y junction. The Driver of the BMW engaged the reverse gear almost immediately after. The Named Driver immediately braked, veered left, and sounded the horn to avoid a collision, but was unable to avoid the BMW which had also begun to reverse. The back end of the BMW hit the area of the Covered Vehicle over the right front wheel.
- Both Drivers got out to document the position of the cars with their camera handphones. They
 mutually agreed to park elsewhere in Macalister Car Park H to further assess the damage and
 exchange contact details.
- 5. The Covered Vehicle suffered crush damage and paint work damage above its right front wheel. The BMW allegedly suffered superficial paint work defects over the back end of the trunk, which however are not clearly visible on brief examination and photodocumentation. Both Vehicles were deemed road-safe by their respective owners, who drove off after their exchange.

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