SACC21560003 / AMK Autopoint Pio Lid ENTRY DATE & TIME OSCISCIO21 15:03 (SGT) SUBMITTED BY: Joide Tan VERSION: 1 (06/05/2021 12:03 (SGT))

SINGAPORE ACCIDENT STATEMENT

In Please report careable the details of the accident to speed up the distins process.

The Figure report careable the details of the accident to speed up the distins process.

This form must be complained by the Policyholder and/or the Authorised Cross.

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

resource.

It is a superior acceptance of this Form by inquirance companies is not an admission of policy liability on the part of the insurance companies.

4. The issue and adequated of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any hisse reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Reports Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that oppose of this report will be a fee, be made available upon application by inserested parties.
7. By the ladgement of this report to the insurers, you handly consent to the archiving of this report at the centre and to copies of the report being made available.

ACCIDENT STATEMENT

Date of Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

05/05/2021 15:03 (SGT) 05/05/2021 14:50 (SGT) PIE, Singapore

PIE, AFTER ENGINEO AVENUE TOWARDS TO A PAYOH EXIT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMJ9148S

INSUREDIPOLICYHOLDER

Is company? Name Of Registered Owner NRIC No. Email Address Mobile Phone No Alternative Phone No

No THONG WING KONG SXXXXX283D darrellshen9@gmail.com (Phone) +65-98911134 +65-96334813

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 Transmission

Toyota Vellfire

Private use

No - Claiming third party Private car Auto 2493

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

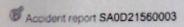
NTUC Income Insurance Co-operative Ltd Comprehensive No 5110357380-01

DRIVER

CC

Name of Driver NRIC No.

SHEN ZHI KAI, DARRELL SXXXXX845E



Date Of Birth Occupation Date Of Driving Pass Driving experience Gender

Mobile Number Alt. Phone Number Fmail Address Address

Address complement

Postcode

is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

12/04/1994 Indoor 28/07/2016

4 YEARS AND 10 MONTHS

Male

(Phone) +65-83997776

darrellshen@gmail.com

BLK 117C RIVERVALE DRIVE #10-56

543117 340 Relative

Nin

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear Raining

OTHER INFORMATION

Was any foreign vehicle involved in the accident? 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? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No Yes 3

No

Wet

No

PASSENGER 1

Name Gender CANDICE THONG

Female

PASSENGER 2

Mame Gender LEE THO! LAN Female

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

No No

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ACCIDENT STATEMENT AS ATTACHED.

ATTACHMENT(S)

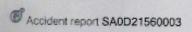
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

Yes No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

SMN3702K



Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
NRIC No
Contact Number
Address
Address
Address complement

Postcode Insurance Company Name Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver) Private car TAN YONG PIN SXXXX628C (Phone) +65-85183462

SKETCH PLAN

IMPORTANT NOTICE

- I Pipers count correctly the details of the accident to smeet up the claims process
- 2. Too Form must be completed by the Policybolder and/or the Authorised Driver
- Information provided must be as muthful and accurate as possible. Any willul in prepresendation or withholding of material facts may allow insurance companies to requilibre policy liability.
- 4. The issue and acceptance of this form by manuacc 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
- The report will be forwarded by the insurers of the SIA Records Management Centre established by the General Insurence Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon applications by interested parties.
- 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 evaluable aforesaid.
- 8. Consect under the Personal Data Protection Art (PDPA)

I understand, acknowledge, agree and consent that

- (a) My incurer, my workshop and the General Insurance Association of Singapore ("GAA") may/are permitted to collect, use, electore 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 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 purposets) of:
 - (i) processing, handing end/or dealing with my claims including the settlement of the claims and any necessary investigations triating to the claims.
 - (ii) investigating the arcident and/or my claims
 - (all 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, strokes, reports or nutices 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 admirestering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurers) who have insured vehicle[2] involved in this accident and the Insurers' lawyers/lew firms, may/ere premitted to collect, use, disclose and/or process my Personal information for one or more of the above Pursones; 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 invyers/law firms), which may be sited outside of Singapore, for one or express the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, must get on and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed.
 - 6) to all insurers and/or any other third parties that asked in evaluating, investigating, controlling or managing hand, regulators, law enforcement and government agenties as reasonably required for the purposes stated, or
 - full for complying with requirements under any regulations, laws or court orders.

Pedrybolder's Signature Date & Timus Driver's Signature
(If driver is not the policyhooder)

mes me ben may 2021

Reporting destre Personnel's Separation

AUR BUTOPOINT PIE LTD

PIE, townow-chapt chapt Arput

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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I was in \$ 10 lone 3 belod a van. Traffic was slow and had to stop as	
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