

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 Submission 10/05/2021 15:15 (SGT)
Date of Accident 10/05/2021 10:55 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information (SLE)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX9175P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner KENNETH TEO KAI JUN
NRIC No SXXXX641F
Email Address kennethkj21@gmail.com
Mobile Phone No (Phone) +65-81003505
Alternative Phone No +65-81003505

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Evo-10
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
Vehicle Category Private car
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number V0027195
Cover Note Number -

DRIVER

Name of Driver KENNETH TEO KAI JUN
NRIC No SXXXX641F

Date Of Birth	16/06/1996
Occupation	Indoor
Date Of Driving Pass	13/01/2017
Driving experience	4 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81003505
Alt. Phone Number	+65-81003505
Email Address	kennethtkj21@gmail.com
Address	BLK 103B CANBERRA STREET #08-141
Address complement	-
Postcode	752103
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	NATALIE WONG HOI YAN
Gender	Female

PASSENGER 2

Name	CHRISTINA WONG HOI KHAY
Gender	Female

PASSENGER 3

Name	ANG CHANG WANG
Gender	Male

PASSENGER 4

Name	ZHAO QIAN LIN HAROLD
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20210510/7021.

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	SHC1511A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

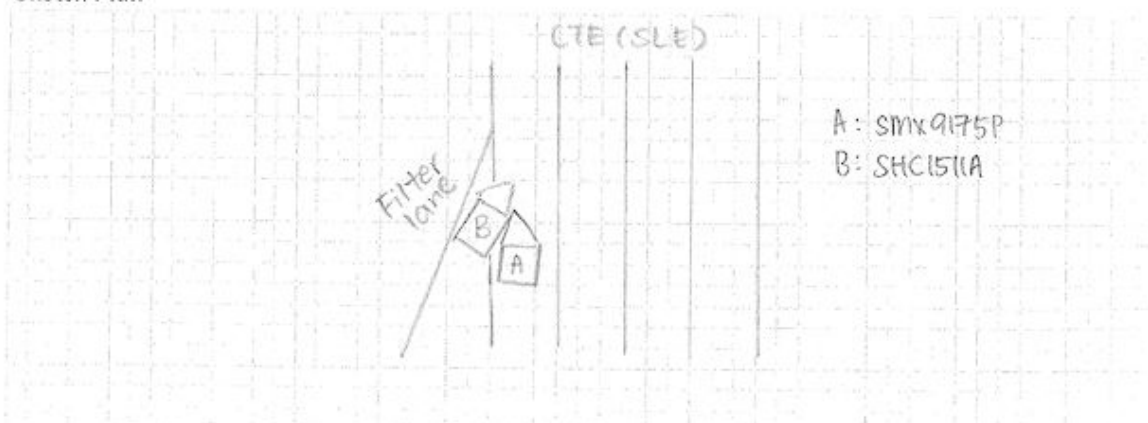
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand,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


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

REFER TO:
POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel













**SINGAPORE
POLICE FORCE**



T/20210510/7021

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

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Report No. T/20210510/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/05/2021 14:00		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TEO KAI JUN KENNETH			Address: 103B CANBERRA STREET #08-141 SINGAPORE 752103		
ID Type / ID No.: NRIC NO / S9621641F			Contact No.: Home/Office: Mobile: 81003505		
Nationality: SINGAPORE CITIZEN			Email: KENNETHTKJ21@GMAIL.COM		
Sex: Male	Age: 24	Date of Birth: 16/06/1996	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/05/2021 10:55	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC1511A	Car				Slightly Damaged	0
SMX9175P	Car	MITSUBISHI	EVO 10 GSR 2.0 M	White	Seriously Damaged	5



**SINGAPORE
POLICE FORCE**



T/20210510/7021

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

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Report No. T/20210510/7021

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMX9175P	QBE Insurance (Singapore) Pte Ltd	V0027195	04/02/2021	03/02/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TEO KAI JUN KENNETH	ID No.	S9621641F
Related Vehicle	SMX9175P (Car)	Contact No.	81003505
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	05	Degree of	Slight
Passenger			
Name	NATALIE WONG HOI YAN	ID No.	S9627520Z
Related Vehicle	SMX9175P (Car)	Contact No.	84985650
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	05	Degree of	Slight
Passenger			
Name	ZHAO QIAN LIN HAROLD	ID No.	S9237237E
Related Vehicle	SMX9175P (Car)	Contact No.	96533448
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL



**SINGAPORE
POLICE FORCE**



T/20210510/7021

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

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Report No. T/20210510/7021

CONTINUATION OF REPORT

Passenger				
Name	SISTER HUSBAND		ID No.	NIL
Related Vehicle	SMX9175P (Car)		Contact No.	96895719
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Passenger				
Name	CHRISTINA WONG HOI KHAY		ID No.	S94367711
Related Vehicle	SMX9175P (Car)		Contact No.	87261651
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

Brief Details.

On stated time and date, I am the driver of vehicle bearing carplate number SMX9175P travelling at CTE towards SLE before ang mo kio ave 5. I have 4 passenger on board with me.

My vehicle is at the 4th lane. Suddenly the vehicle bearing carplate number SHC1511A coming from out from the filter lane on the left and cut into my lane and collided into my vehicle.

Due to the accident, my passenger and I suffered injuries and consult a doctor. Natalie Wong and I get 5 days MC. The rest of the passengers have not seen a doctor.



SINGAPORE POLICE FORCE

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



T/20210510/7021

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Report No. T/20210510/7021

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD RIZWAN BIN KAMALUDIN
Contact No.: 65476185

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
10/05/2021 14:00

Classification Of Case:

QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Wallich Street #35-01 Guoco Tower, Singapore 078881

Tel: 65-6224 6633 Fax: 65-6533 3270

GST Registration No.: M200644018

www.qbe.com.sg



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Date of issue 09/02/2021

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No. 2021-V0027195-MVA-E001 Account Name MULTI-LINES AGENCIES**MCI Type MX1**

1. Index Mark and Registration Number of Vehicle or Chassis No: **SMX9175P**
2. Name of Policyholder **TEO KAI JUN KENNETH**
3. Effective date of Commencement of Insurance for the purposes of the Regulations. **04/02/2021**
4. Date of Expiry **03/02/2022**
5. Persons or Classes of persons entitled to drive.*

(a) The Policyholder.**The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement.****(b) Any person who is driving on the Policyholder's order or with his/her permission.**

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 the order of a Court of Law or by reason of any enactment or regulation in that behalf from the 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 the accident loss or damage.

6. Limitations as to use.*

Use only for social domestic and pleasure purposes and for the Policyholder's business.**The policy does not cover use for hire or reward, racing, pace-making, reliability trial, 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.**

7. Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings.

I/We hereby certify that the policy to which this certificate relates is issued in accordance with the provisions of the provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Hire Purchase : SSL HOLDINGS PTE LTD

Signed for and on behalf of
QBE Insurance (Singapore) Pte Ltd

Authorised Signature