SC1A215O0002 / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD
ENTRY DATE & TIME: 24/05/2021 10:47 (SGT)
SUBMITTED BY: TAN SHIEH YUEN
VERSION: 1 (24/05/2021 10:47 (SGT))

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.
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	24/05/2021 10:47 (SGT)
Date of Accident	22/05/2021 15:00 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE BEFORE BKE EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX9133X

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY HEE HUAT
NRIC No	SXXXX575H
Email Address	JEM-1958@HOTMAIL.COM
Mobile Phone No	(Phone) +65-90228476
Alternative Phone No	+65-90228476

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800042163-02
Cover Note Number	-

DRIVER

Name of Driver	TAY JARON
NRIC No	SXXXX642C

Date Of Birth	17/11/1993
Occupation	Indoor
Date Of Driving Pass	08/12/2016
Driving experience	4 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90228476
Alt. Phone Number	-
Email Address	JEM-1958@HOTMAIL.COM
Address	BLK 234A SERANGOON AVENUE 2 #02-139
Address complement	-
Postcode	551234
Is the driver the policyholder?	No
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	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes

PASSENGER 1

Name	NUR SU'AIDAH BINTE SAHRUDIN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Serangoon Neighbourhood Police Centre
Police Station Address	50 Serangoon Avenue 2 #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

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	SMN4943A
Vehicle Manufacturer	Lexus
Vehicle Model	Es250
Vehicle Variant	-

Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	JONATHAN
Contact Number	(Phone) +65-81185138
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.

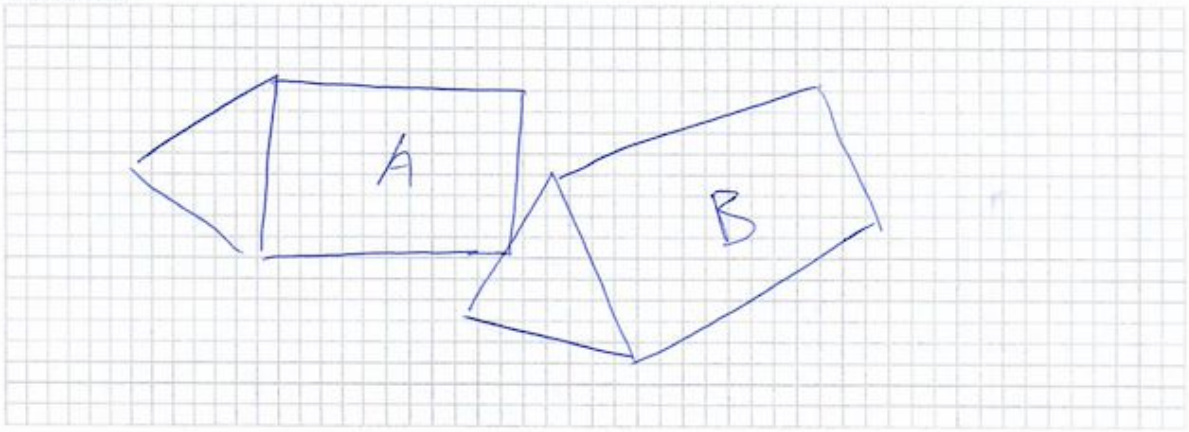
(collectively the "**Purposes**")

(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

was driving ~~on~~ along PIE towards Changi Airport. ~~Was at a bend~~ was at a bend and the accident occured after the bend. Vehicles was seen ~~from~~ Jam ~~back~~ braking. Right after the bend ~~when~~ when I saw it, I Jam my brakes an couldn't stop in time and hit a Car's (LEXUS ES250, SMN4943A) @ rear left side.

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 & Time

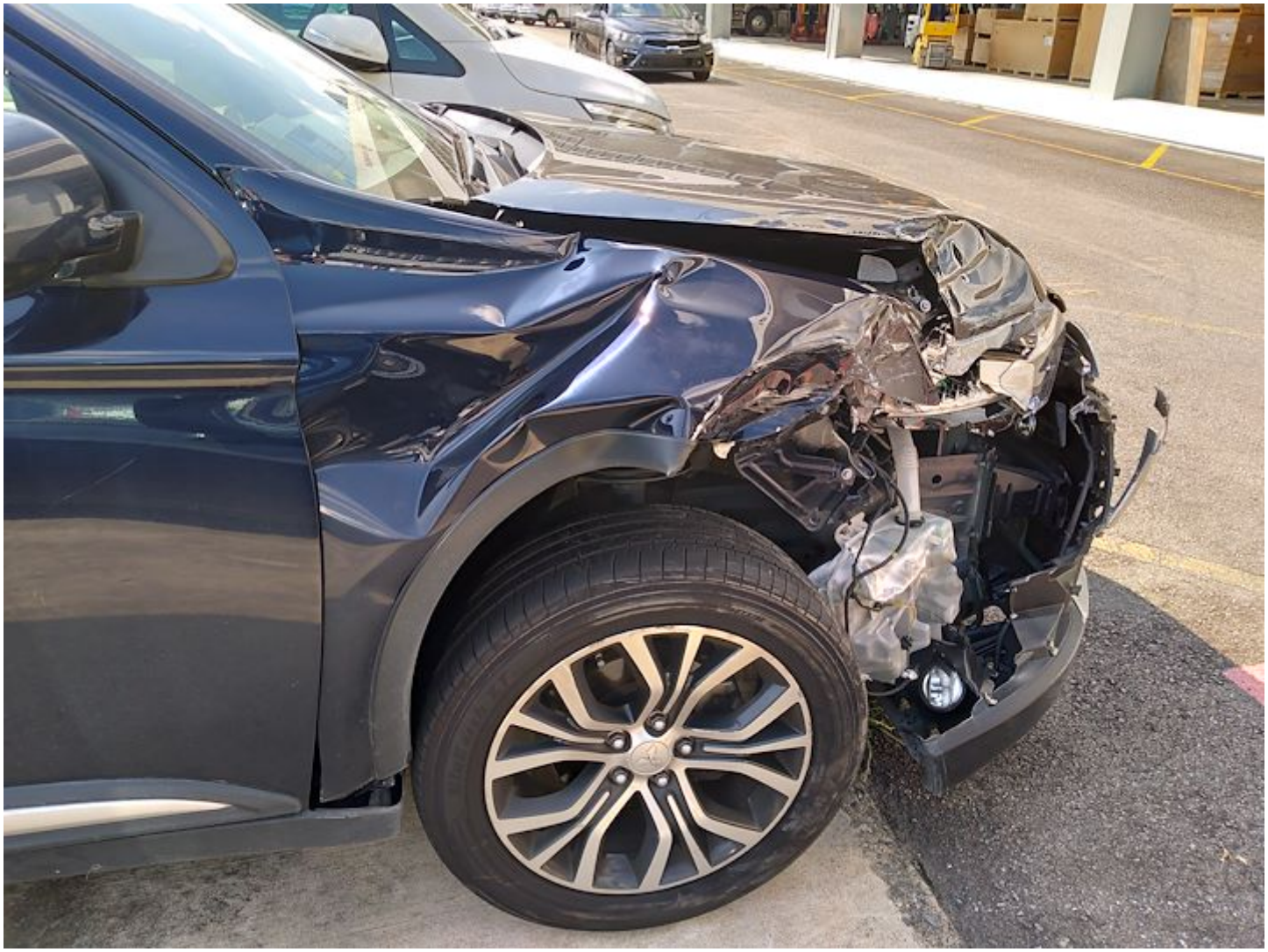
Witnessed by Reporting Centre Personnel

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4



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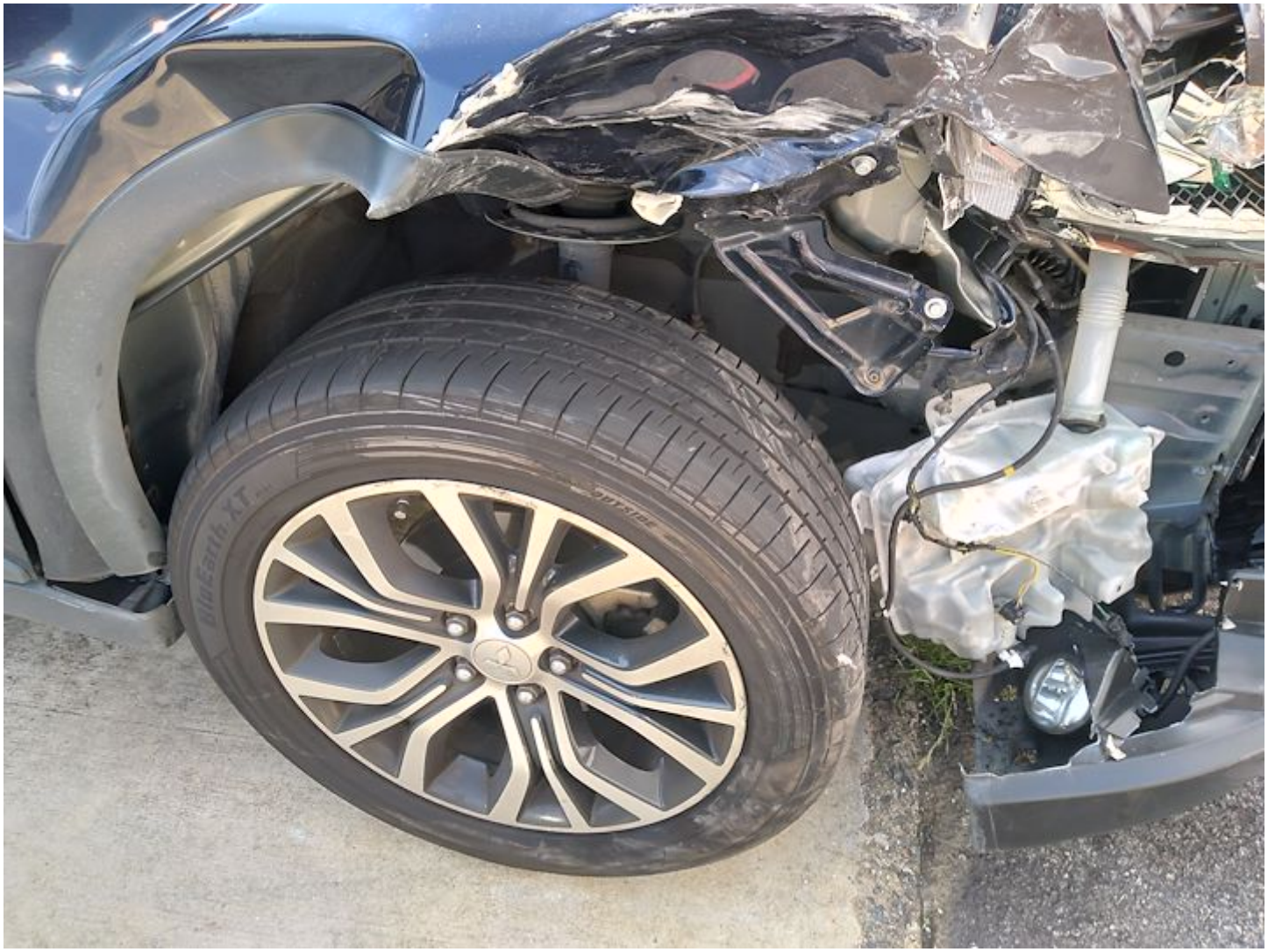
IMAGES #6

IMAGES #7



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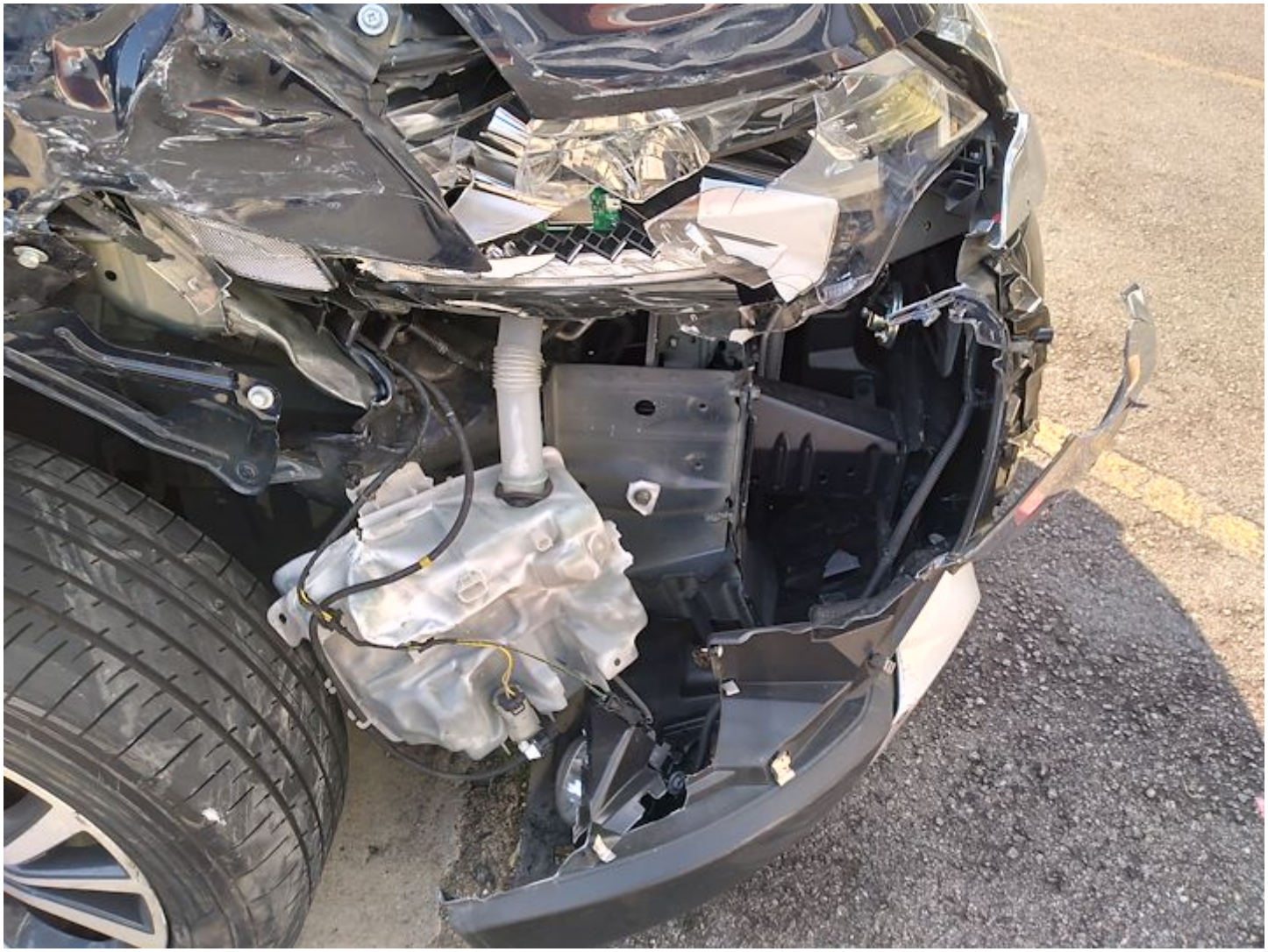

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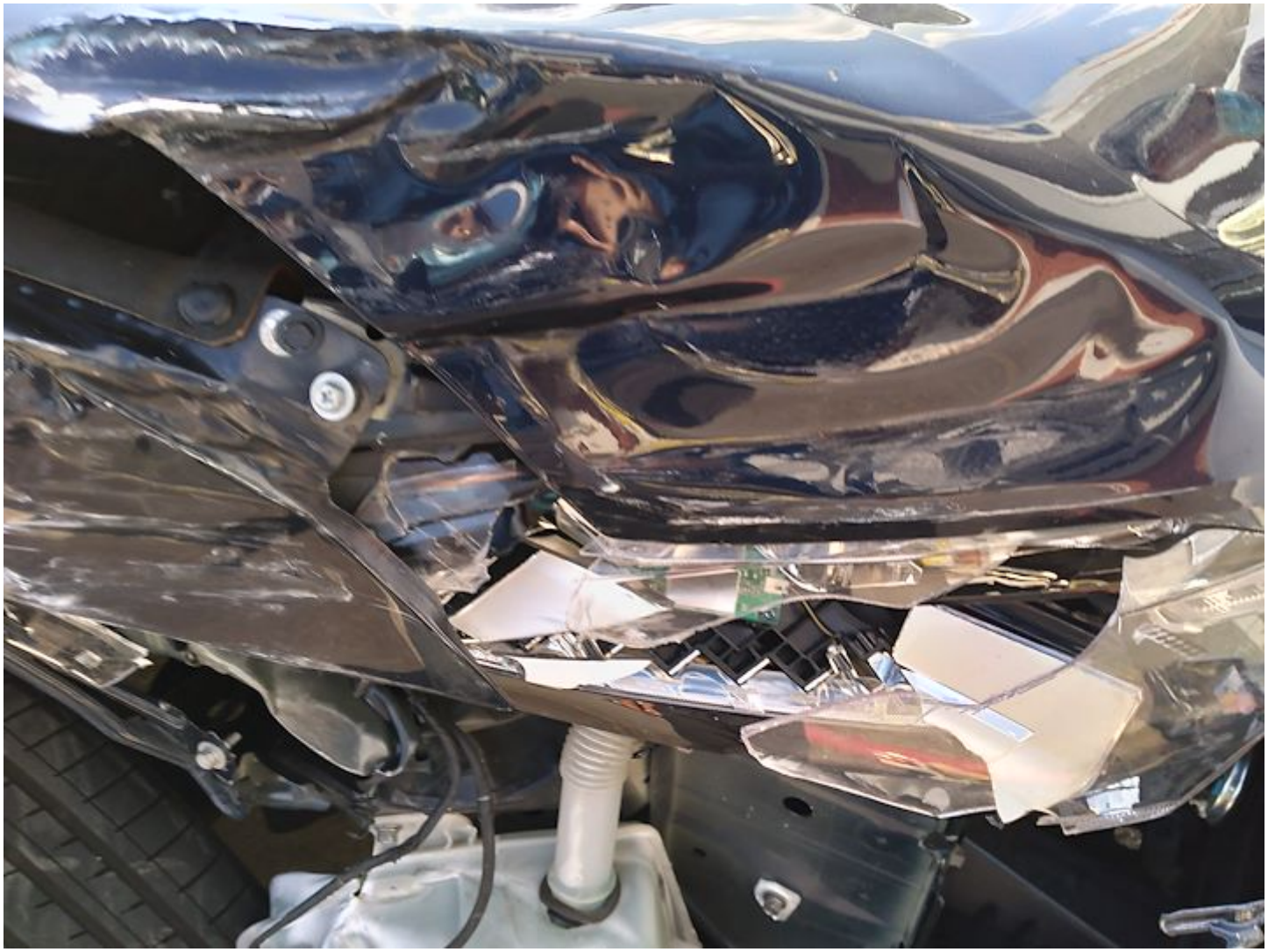
IMAGES #13



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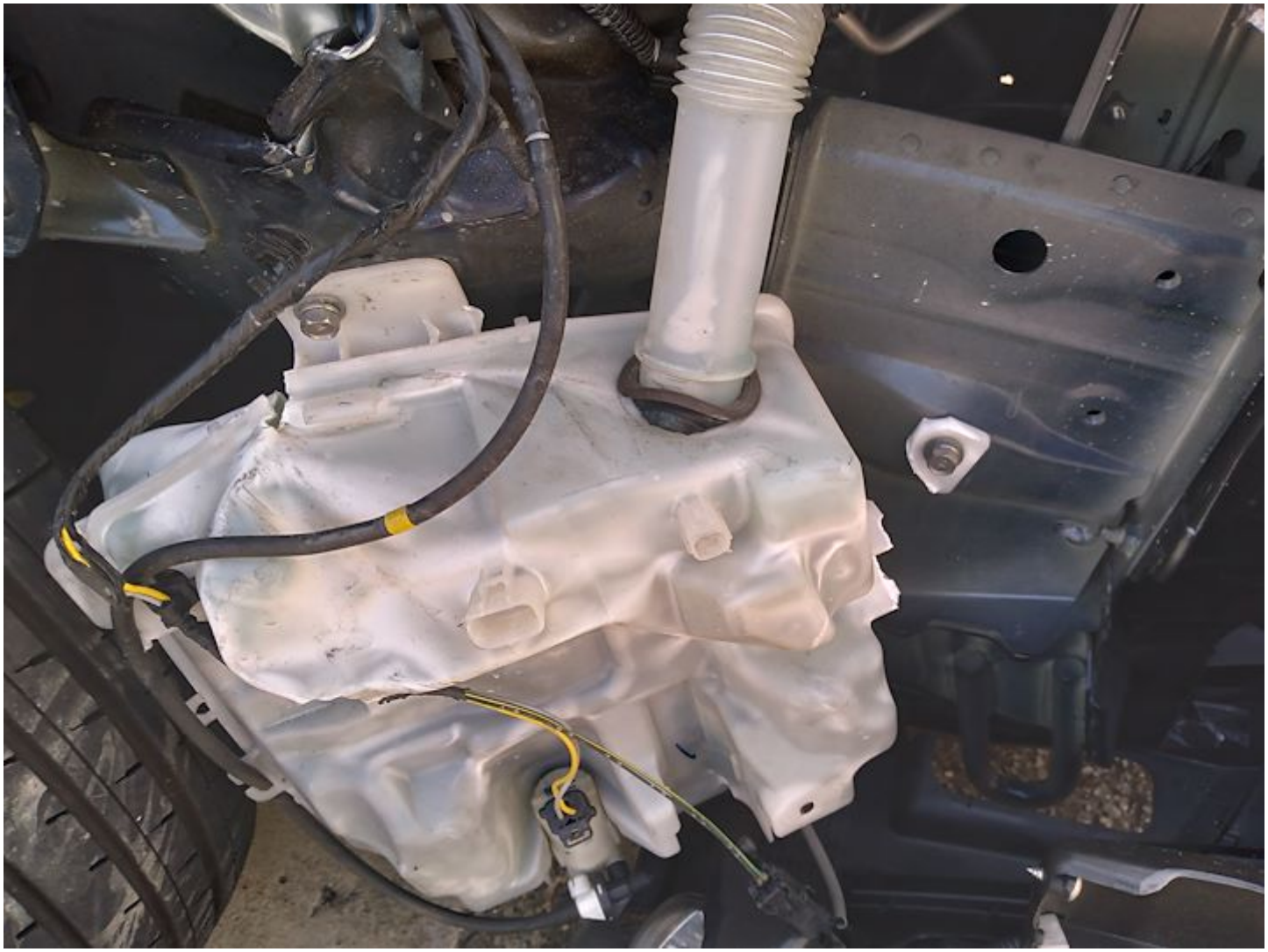

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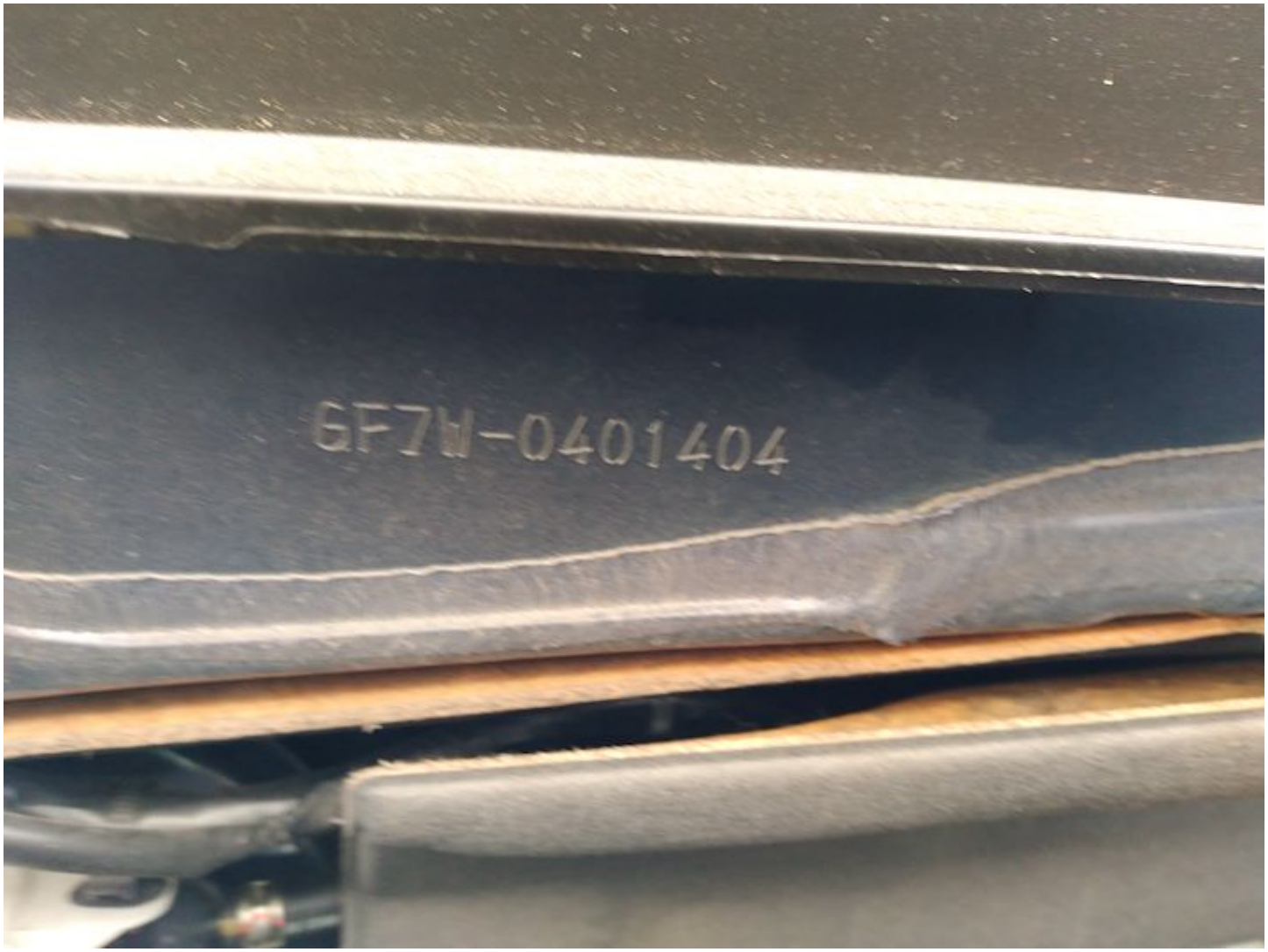
IMAGES #18

IMAGES #19

IMAGES #20

IMAGES #21



IMAGES #22

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Tay Jaron, Contact: 9877 7539,

NRIC/~~FIN~~ S9343642C, has reported to the Police a non-injury traffic accident which occurred along PIE before BKE, on 22/05/2021 at 1500hrs involving the following vehicles:

1. SJX9133X – Complainant (Driver)
2. SMN4943A – Mr Jonathan 8118 5138

2 If this accident was reported to the Police within 24 hours of its occurrence, Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(3) Janice Tan

Serangoon NPC
No: 58 Serangoon Ave 2
#01-02 Singapore 556129
Tel: 1800 486 0999

Date: 23/05/2021 Time: 1340hrs

S/D Ref: 13

Police Post/Unit: Serangoon Neighbourhood Police Centre

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

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