SS0E21820001 / Stuttgart Auto Pte Ltd SUBMITTED BY: STUTTGART AUTO PTE LTD - TANJONG PENJURU VERSION: 1 (02/08/2021 16:26 (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.

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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 02/08/2021 16:26 (SGT) Date of Accident 29/07/2021 01:15 (SGT) Exact Location of Accident Near 209 New Upper Changi Rd, Singapore 460209 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Porsche

Vehicle Registration Number SKQ505R

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TEO CHEE KIONG Company Reg No SXXXX346G **Email Address** realmworld2002@yahoo.com.sg Mobile Phone No (Phone) +65-96163336 Alternative Phone No +65-96163336

VEHICLE PARTICULARS

Manufacturer

Model Boxster 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 1999

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number Cover Note Number

DRIVER

Name of Driver TEO I-JEN NRIC No. SXXXX144H Date Of Birth 08/02/1999 Occupation Indoor Date Of Driving Pass 07/04/2018 Driving experience 3 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-96163336 Alt. Phone Number Email Address realmworld2002@yahoo.com.sg Address 168 JALAN ANGIN DAUT Address complement Postcode 489194 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 Chain Collision 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle 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? 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT SEE ATTACHED POLICE REPORT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number YN5612G Vehicle Manufacturer Vehicle Model Vehicle Variant

Goods vehicle

Vehicle Colour
Vehicle Category

Name of Driver				_
Contact Number			 	_
Address			 	_
Address complement	 			_
Postcode				_
Insurance Company Name	 			_
Nature Of Damage				_
Details of property damaged in accident		 		_
No. Of Passenger (Including Driver)				_

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- 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 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 available aforesaid.
- 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 (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 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 of 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, headling and/or dealing with my dalms. (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 shird 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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future dialms.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Polityholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

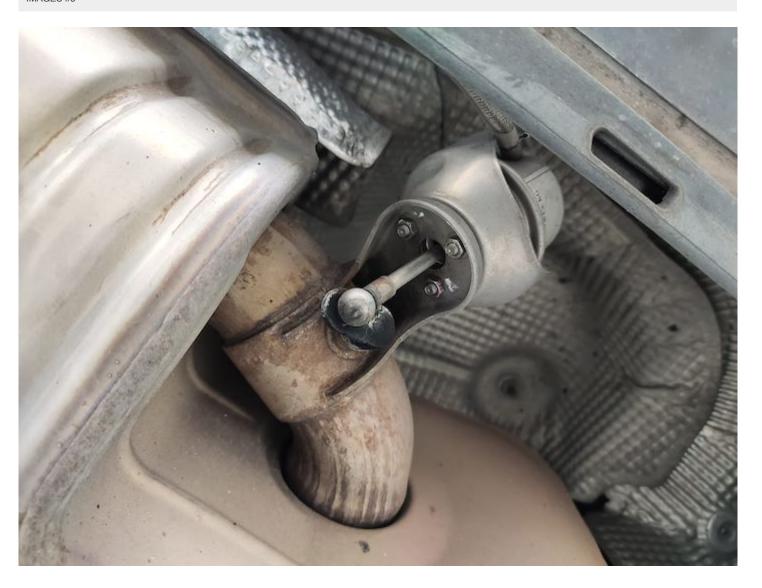
Reporting Centre Personnel's Signature

NRIC/FIN No.:

SKETCH PLAN	C - SHB 3538 E
	A - SKQ SOER
	B - YN 56129
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	D - SLE 8663R
ar per police report.	
DECLARATION	ATTG ON
I/We declare the foregoing particulars are true in every rus	(0)

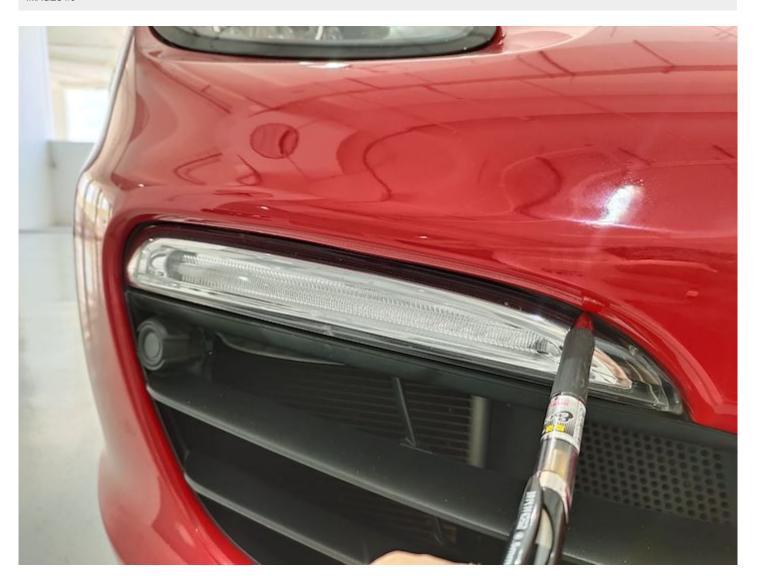


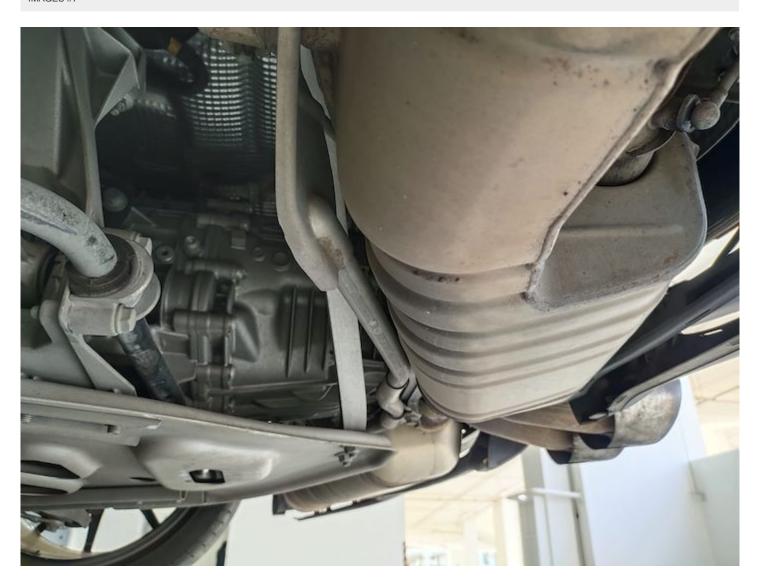






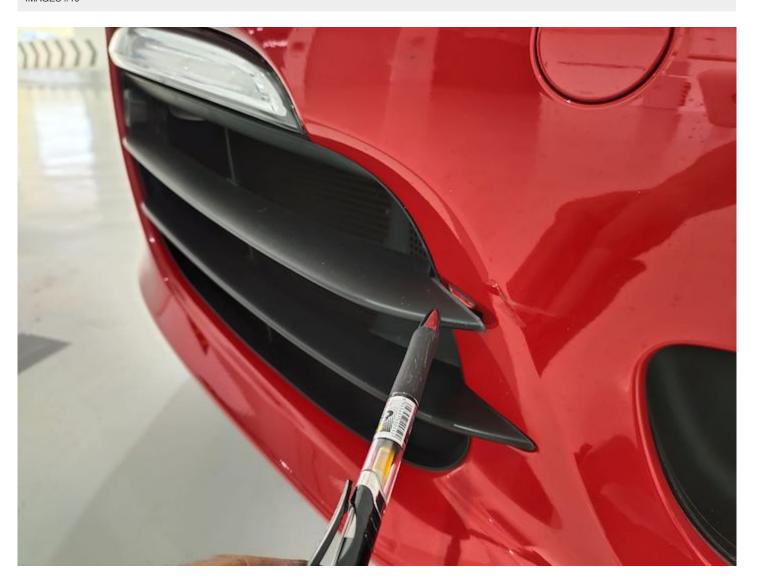


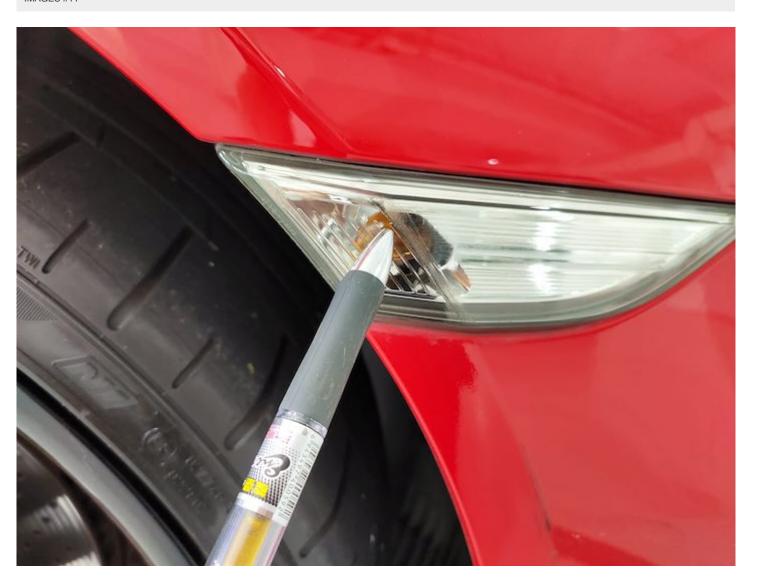


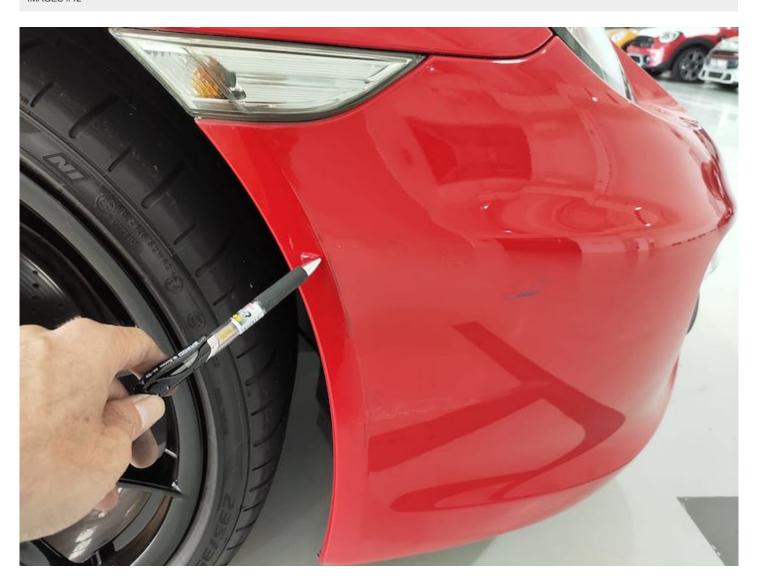


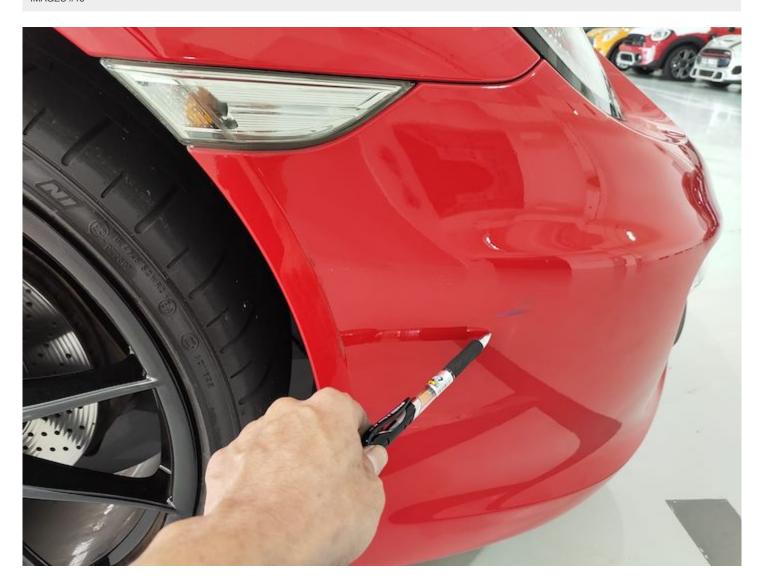






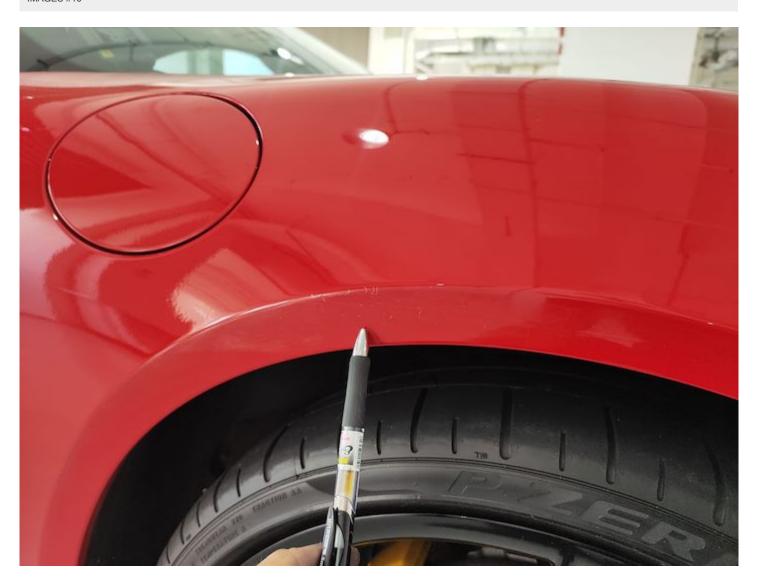






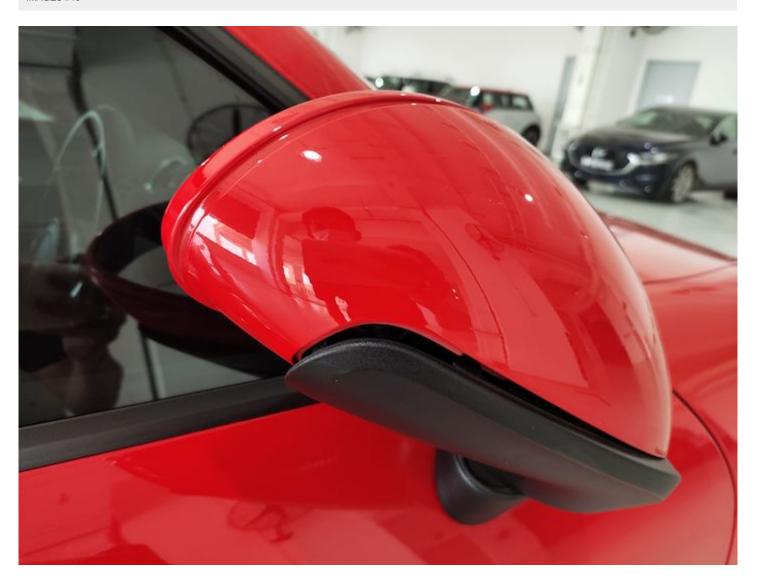


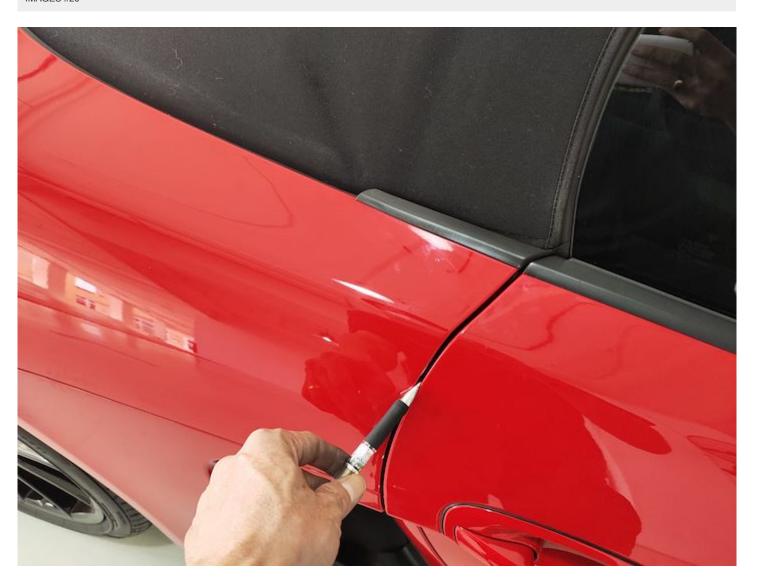


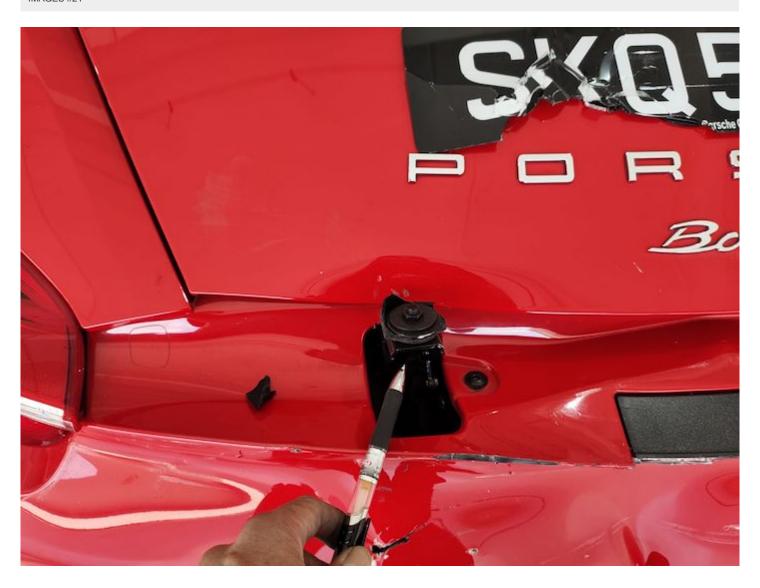
























Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20210730/7012

					ACC	

Date/Tir 30/07/20	ne Report 021 15:46	Made:	Vide Report No.: G/20210729/0022	Station Diary No.
Informa	nt's Partic	ulars		
	Informant		Address: 16B JALAN ANGIN LAUT SI	NGAPORE 490404
ID Type NRIC N	/ ID No.: D / S99061	44H	Contact No.: Home/Office:	
National SINGAP	ity: ORE CITIZ	EN	Email: IJEN99@GMAIL.COM	Mobile: 90690550
Sex: Male	Age: 22	Date of Birth: 08/02/1999	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupati Student	on:		Driving Licence Information: Class: 3	Date of Expiry:

General Infor	mation of the Accident			
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident; 29/07/2021 01:1	Type of Location X-Junction
	CHANGI ROAD			
Weather: Clear		Road Surface:		Road Speed Limit:
Traffic Flow:		Dry		60 Km/h
One Way		Traffic Control: Traffic Light - Wor	king	Traffic Volume: Light
Type of Collisi Between Movi	on: ng Vehicles - Head To Re			Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make	Model	Color	Can 100	
SHB3538E	Car		1170001	CUIOI	Conditio	No of
						0
SKQ505R	Car	PORSCHE	BOXSTER (981) PDK	Red	Slightly Damaged	1
SLE8663R	Car					
YN5612G	Loren			10		U
11130120	Lorry					0



T/20210730/7012

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

2 of 3 Report No. T/20210730/7012

CONTINUATION OF REPORT

Vehicle No.	Insurance Company	The second second second	10-22	
		Insurance No	Effective	Expiry Date
ORGOOT	AXA INSURANCE SINGAPORE PTE	CN129640	29/05/2021	28/05/2022

Any Pedestrian No. of Pedestria	ns Injured: NII		16	1		
Driver			Use of Pe	edestriar	1 Cross	ing: NA
Name	TEO I-JEN			ID No		S9906144H
Related Vehicle	SKQ505R (Car)			Conta	ct No.	90690550
Hospitat/Clinic	CHANGI GENERAL	. HOSPITAI		Class Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL
Date	29/07/2021		Date	LAPITY		inno.
No. of Days gran	led Medical Leave	15	Degree of		29/07/ Slight	2021

Brief Details

I was driving down New Upp Changi Road, direction towards Bedok, at a speed of about 50km/h. From a distance ahead, I already saw that the traffic light was red (Cross junction between Chai Chee Road) and hence I slowed down as I was approaching the traffic light. During this time, I looked at my rear-view mirror and there was a lorry that was travelling at around the same speed as I was. The lorry was at a safe distance behind me. Just as I was about to come to a stop behind the stop line, I saw a bright flash of light around me and a loud crashing sound that occurred behind me. Within seconds, the next thing I knew, was another loud crashing sound, but this time, I was hit from the rear of the car and my car was pushed to the middle of the junction, where I pulled the car over and got out of it, before quickly getting to safety at the nearby pedestrian path.

As I looked at the situation on scene, I guessed that a black car might have hit onto the rear of the lorry (causing the initial loud sound) that led to the lorry losing control and subsequently crashed onto the rear of my car.



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



3 of 3 Report No. T/20210730/7012

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 / SUFIYAN BIN KHAIRI Contact No.: 65476390

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: 30/07/2021 15:48

Classification Of Case: