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SN08218K0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 20/08/2021 14:57 (SGT)
SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (20/08/2021 14:57 (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 9. Internation, provided in the part of the Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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

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 20/08/2021 14:57 (SGT) Date of Accident 17/08/2021 22:25 (SGT) Exact Location of Accident Lorong Chuan, Singapore Additional Location Information JUNCTION TOWARDS SERANGOON AVENUE 2 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private car

Auto

1595

Vehicle Registration Number SKT4913D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHEN SWEE HONG NRIC No SXXXX398D Email Address kenheng2299@gmail.com Mobile Phone No (Phone) +65-98502802 Alternative Phone No +65-93298167

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180 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

INSURANCE COMPANY

Transmission

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2100415945-06 Cover Note Number

DRIVER

CC

Name of Driver TAN SHION NRIC No SXXXX375G

Date Of Birth 12/07/1997 Occupation Indoor Date Of Driving Pass 27/07/2019 Driving experience 2 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-93298167 Alt. Phone Number Email Address tstshion31@gmail.com Address 765C MOUNTBATTEN ROAD Address complement Postcode 437855 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 - Cross Junction Weather Conditions DRIZZLING Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No 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 PASSENGER 1 Name PRISCILLA CHANG WEN JUN Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Ang Mo Kio Division Headquarters Police Station Phone No (Phone) +65-18002180000 Alt. Police Station Phone No (Fax) +65-64814246 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT F/20210818/7037 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident WITH OWNER Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1**

SKP4065Y

Vehicle Registration Number

Vehicle Manufacturer	
Vehicle Model	-
Vehicle Variant	7.5
Vehicle Colour	-
Vehicle Category	:
Name of Driver	Private car
	-
Contact Number	-
Address	720
Address complement	-
Postcode	-
	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	
No. Of Passenger (Including Driver)	177.K
Andreading Stitlet)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YP3958L
Vehicle Manufacturer	1F3936L
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	₩3
Vehicle Category	2 5
Name of Driver	Commercial vehicle
	=
Contact Number	*1
Address	:•
Address complement	-
Postcode	(<u>=</u>
Insurance Company Name	
Nature Of Damage	·T
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender	TAN SHION
Phone No	Male (Phone) LEE 03200167
Address	(Phone) +65-93298167
Address Complement	-
Post Code	
Approximate Age Years Old	-
Injuries Sustained	SUICHT IN HIDY
Injured person in which vehicle?	SLIGHT INJURY
Were seat belts worn?	SKT4913D
Was this injured conveyed to hospital by ambulance?	Yes
, and a nospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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.
- 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)

lunderstand, 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 Sig Time Sketch Plan		& Time	Justine (If driver is not the policyholder) / Date Junyou Journel Shill	Personnel
	1 1		A3	A=SKT4913D B=SKP4065Y C=YP3958L

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kejer	TO	police	Report No. F/20210818/7037.
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			Section 1

Declaration

 $\label{two-declare} \mbox{\sc We declare the foregoing particulars are true in every respect.}$

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

Email: Sm@idac.com.sg Tel no: 6555 6888 *If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.
Date of Accident: 17/08/2021 (dd/mm/yy) Time of Accident: 12 : 15 (24-HR-FORMAT)
Vehicle No. : SKT 4913D Vehicle Make & Model / Engine (cc): Mercedes Benz (180 1.6 Private Hire: (V (N))
Exact location of Accident: June Hun of Lot Chuan toward Seranguon Ave 2 Policyholder's Name / IC No.: Chen Swee Hong 514353980. ROCCUEN (Company) 9
Policyholder's Name / IC No.: Chen Swee Hons 51435318D. ROCALEN (Company)
Driver's Name / IC No.: 1011 Shibh Sqip (As Above) Driver's Contact No.: 93198167 Company Contact No / Owner Contact No: 98502802
Driver's Address: BIK 2324 Serangeon Ave 2 \$16-125 S(551232)
Owner Email address: kenneng 229 @ Gmail. Com Insurance Company: ALG
Owner Email address: kenneng 229 @ Gmail.com Insurance Company: 416 Driver Email address: tstshion 31 @ gmail.com.
Relationship between Owner & Driver: (Please CIRCLE one only) Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:
What do you wish to claim? (Please TICK one only)
Own Insurance / Other Vehicle (The one you want to claim against) / Reporting (For Record Purpose)
Exact purpose for which the vehicle Was being used at time of accident? Occupation (nature of job) Indoor/ Outdoor
Private use / Work purpose *No. of Passengers (Including Driver):
*Passenger Name: Chang Wen Jun Pris Cilla Gender: Male (Female x() *Passenger Name: Gender: Male / Female x()
Weather condition & Road conditions? (On the day of accident)
Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others:
Was there any video captured by your Car Camera? Yes / No Remarks: With Trasse poince
Anv Injuries: Yes/ No (If YES) Injured Person' Name! Tanshian (2) Priscilla Chans Wen Jun
Injuries Sustain: Body Injured Person in Which Vehicle: SKT 4913 17
Police Report filed: Yes / No (If YES) Which Police Station: Online
The Other Party(s) Details:
1. Driver's Name / IC No: Vehicle No: Skp 4065 Y
Driver's Contact No:Insurance Company :
2. Driver's Name / IC No (If Any):
Driver's Contact No:Insurance Company :
*Independent Witness (If Any): Contact No:
Confact No.

es (





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Report No. F/20210818/7037

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No:1800-2180000

Date/Time Report Made	Vide Report No.		e o company de la company de constituent à la company de constituent de company de constituent d	Station Diary No
18/08/2021 16:41				
Name Of Informant	Address			
TAN SHION	765C MOUNTBATTEN ROAD SINGAPORE 437855			APORE 437855
ID Type / ID No.	Contact No.			
NRIC NO / S9747375G	Home/C	Office:	Mobile:	
especial control of the control of t			93298167	
Nationality	Email Address			THE STREET OF STREET STREET STREET
SINGAPORE CITIZEN	TSTSHION31@GMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
Student	Male	24	12/07/1997	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
17/08/2021 22:20 - 17/08/2021 22:25	SERANGOON AVENUE 2			
Brief details.		THE STATE OF THE PROPERTY OF THE STATE OF TH	Note: The control of	ang makawakan san Bisasaham kanya si sama a tambigi Aradi mili jangsani a Galley

On the mention date and time, 17/8/2021 2220hrs, my vehicle(SKT4913D) I was the driver and my friend Priscilla was the front passenger when we were making a right turn onto Serangoon ave 2 on green arrow before approaching I was ramped by vehicle(SKP4065Y) on high speed and then vehicle(SKP4065Y) collided head on with lorry(YP3958L) after he ramped onto mine vehicle(SKT4913D). It happened so fast.

I was unwell and felt pain on my neck, back, concussion and I feel nausea so I went to Parkway East Hospital 321 joo Chiat place #01-00 Singapore 427990 I was given 3 days MC from 18/8/2021-20/8/2021

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 18/08/2021 16:41		
Officer In-Charge Of Case:	Classification Of Case:		
Authentication Stamp			





7/20210818/7037

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20210818/7037

A contract		1	Coravano
Inc	11.1	C	VO

Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/08/2021 16:41
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



CERTIFICATE OF INSURANCE

MERCEDES BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Chen Swee Hong

Period of Insurance

Engine No. Chassis No. : 11 Jun 2021 To 10 Jun 2022 : 27491030376740

: WDD2050402R062099

Vehicle No.

: SKT4913D

Policy No.

: 2100415945-06

Endorsement No. Issued Date

: 23 Apr 2021

ABOUT THE COVER

Make/Model

: MERCEDES BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE

Engine Capacity/Tonnage : 1,595,00 CC Driver Restriction

Sum Insured : Market Value

Off Peak Car : No

First Year of Registration : 2016 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

The Policytoster
 Any other person with its driving on the Policytoster's proof or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if helithe meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Limitation as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for him or reward, driving fution, driving test; racing; pace-making, reliability trial or eny purpose in correction with any samples in connection with any triale or business or use for eny purpose in connection with Motor Triale;

Loss of Use 2000cc

**Limitations fendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 9s of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019; are not to be sincluded under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Chen Swee Hong - \$800 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Cycle & Carriage Euros Service Center (For accident reporting only) Add: 330 Util Road 3 Singapore 408650 62061818
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency holline at +65 8338 8200. Atternatively, you may refer to AlG website www.aig.sg or AlG SG Mobile App. Simply search and download "AlG SG" from Turies or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Dalmier Financial Services Africa & Asia Pacific Lid

We hereby cordy that the policy to which this Cardicase of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Trird Party Risks and Compensation) Act (Cap. 189), Pag ty of the Road Transport Act., 1987 (Maleysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Trird Party Risks) Rules, 1969 (Maleysia).

0500660430

CYCLE & CARRIAGE - ANDREA

239 ALEXANDRA ROAD

SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generaled document does not require a signature

AGA: IP, Salar

13 Secretary Way 609-16 ANS BUSING \$079150 [T-1056119 3908] prices and 32