SB05219O0001 / BIS Automobiles Pte Ltd ENTRY DATE & TIME: 24/09/2021 10:43 (SGT) SUBMITTED BY: Vikneswaran Naidu VERSION: 1 (24/09/2021 10:43 (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.

- 4. The issue and acceptance of this is form by instrained 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 24/09/2021 10:43 (SGT) Date of Accident 23/09/2021 18:20 (SGT) Exact Location of Accident Near 50 Tampines North Drive 2, Singapore 528766 Additional Location Information Onwards to SLE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFU3733S

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KOO WENG YEW ALAN NRIC No S6911343E Email Address alankoowy@singnet.com.sg Mobile Phone No (Phone) +65-98334784 Alternative Phone No +65-98334784

VEHICLE PARTICULARS

Manufacturer **BMW** Model X6 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? Yes Vehicle Category Private car Transmission Auto CC 3000

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 1900199316-01 Cover Note Number

DRIVER

Name of Driver KOO WENG YEW ALAN NRIC No S6911343E



Date Of Birth 03/04/1969 Occupation Indoor Date Of Driving Pass 05/06/1991 Driving experience 30 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-98334784 Alt. Phone Number +65-98334784 Email Address alankoowy@singnet.com.sg Address 61 CHOA CHU KANG LOOP #08-06 Address complement Postcode 689668 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 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? Yes **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Jurong Division Headquarters Police Station Phone No (Phone) +65-18007910000 Alt. Police Station Phone No (Fax) +65-68965647 Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN & POLICE REPORT 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 NONE BMW SD CARD Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SDH9669Y Vehicle Manufacturer Mercedes

Vehicle Model
Vehicle Variant
Vehicle Colour

Vehicle Category	NA / Unknown
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SJQ7190E Honda -
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMM7052G
Vehicle Manufacturer	Honda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	_
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	_
, 3	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SMD5517
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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' 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' 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 Signature / Date & Time

24/9/21 9:350

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

Witnessed by Reporting Centre Personnel

(0/1980610)

Sketch Plan

Please	refer	de	Police	laport	No: 3/	202109	23/70-	76.
				11	1			
						1.2		

Declaration

We declare the foregoing particulars are true in every respect.

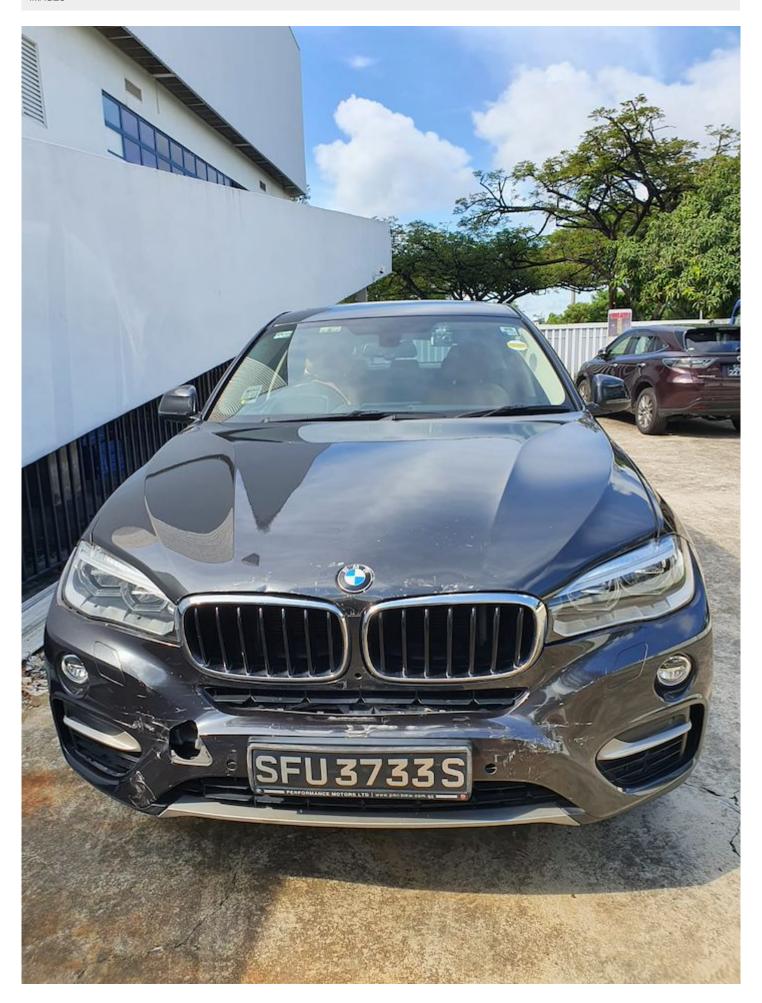
Policyholder's Signature / Date &

Time

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

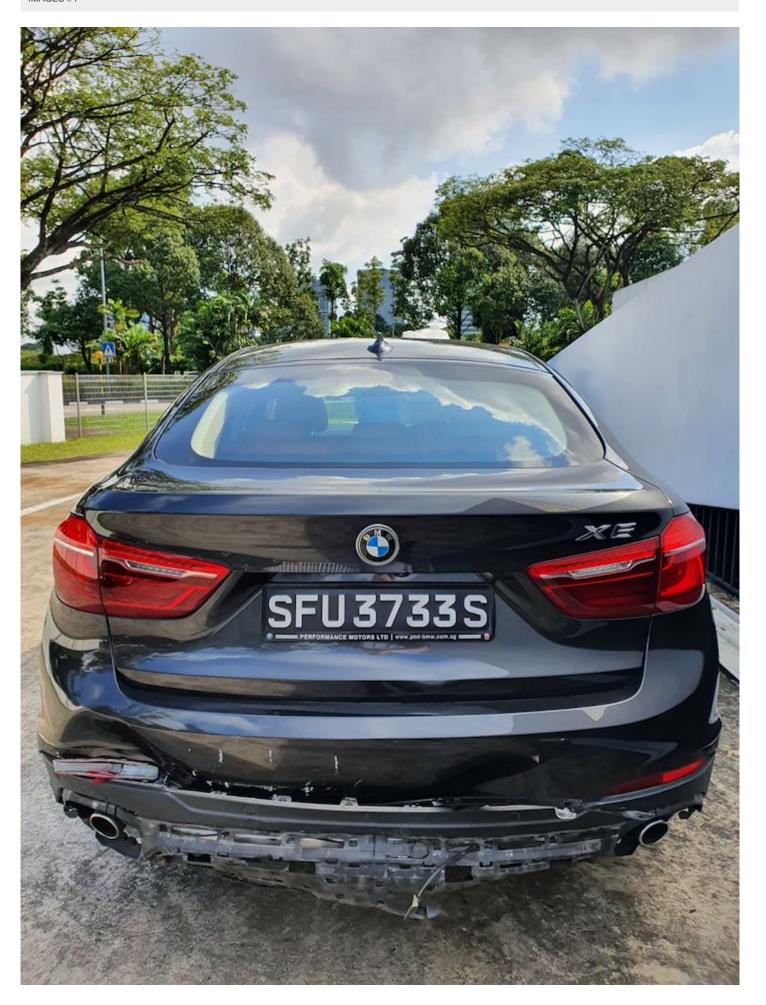
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Witnessed by Reporting Centre Personnel







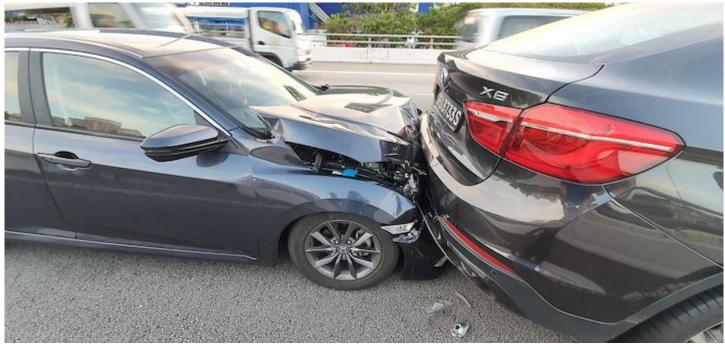


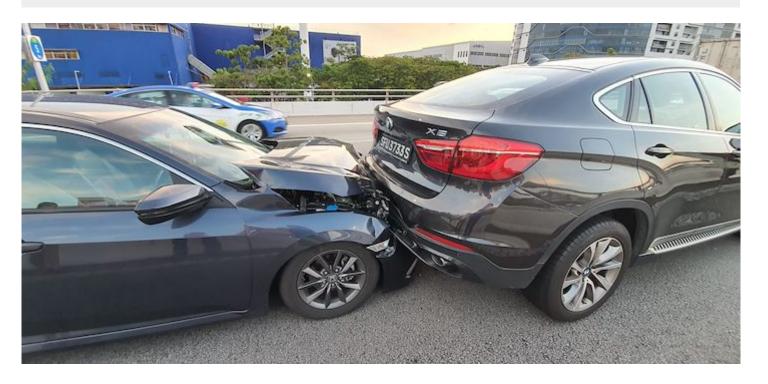
















1 of 2

Report No. J/20210923/7076

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No:1800-7910000

Date/Time Report Made 23/09/2021 23:59	Vide Report No.			Station Diary No.	
Name Of Informant KOO WENG YEW ALAN	Address 61 CHOA CHU KANG LOOP #08-06 S 689668			SINGAPORE	
ID Type / ID No. NRIC NO / S6911343E	Contact No. Home/Office: Mobile: 98334784				
Nationality SINGAPORE CITIZEN	Email Address alankoowy@singnet.com.sg				
Occupation	Sex	Age	Date of Birth	Race	
ICA	Male	52	03/04/1969	Chinese	
Institution/School Name	Language English				
Date/Time Of Incident 23/09/2021 18:20 - 23/09/2021 20:30	Location Of Incident 61 CHOA CHU KANG LOOP #08-06 SINGAPORE 689668				

Brief details.

On 23 Sep 2021 at about 6.20 pm, I was involved in a car accident involving 4 other cars at TPE towards SLE somewhere near the landmark of IKEA. The car in front of me jam brake and I braked my car but did not stop in time. As a result, my car hit the car in front. At the same time, the car that was behind me did not manage to stop and subsequently hit my car. There was no injury to me as well as the other 4 drivers. The Police came and advised all of us to settle within ourselves as there is no injury at all.

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: 23/09/2021 23:59
Officer In-Charge Of Case:	Classification Of Case:





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20210923/7076

Suspect					
Person Name	Chung Woel Chyang				
ID Type	NRIC NO	ID No	S1730443G		
Gender	Male	Age	56-56		
Race	Chinese	Language	English		
Occupation	Worker not reporting any occupation	Address	192 Pasir Ris Street 12 #13-14 SINGAPORE 510192		
Mobile No	97501667	Complexion	Fair		
Build	Slim	Height About	170cm		
Attire Last Worn	Shirt	Hair Colour	Black		
Hair Style	Short-Straight	Relation To	Nil		

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: 23/09/2021 23:59
Officer In-Charge Of Case:	Classification Of Case: