

SS1Y21A10008 / SME MOTOR PTE LTD
ENTRY DATE & TIME: 01/10/2021 17:34 (SGT)
SUBMITTED BY: Chia Pei Ying
VERSION: 1 (01/10/2021 17:34 (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 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	01/10/2021 17:34 (SGT)
Date of Accident	30/09/2021 18:00 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX6173P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN CHEE WEI
NRIC No	S8725581F
Email Address	cheewei.tan87@gmail.com
Mobile Phone No	(Phone) +65-83385334
Alternative Phone No	+65-83385334

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	2
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	1496

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10552292R00
Cover Note Number	-

DRIVER

Name of Driver	TAN CHEE WEI
NRIC No	S8725581F

Date Of Birth	13/08/1987
Occupation	Indoor
Date Of Driving Pass	03/04/2014
Driving experience	7 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83385334
Alt. Phone Number	+65-83385334
Email Address	cheewei.tan87@gmail.com
Address	BLK 293C BUKIT BATOK STREET 21 #08-524
Address complement	-
Postcode	653293
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	DRIZZLING
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	EUGENIA GOH
Gender	Female

PASSENGER 2

Name	KIERAN TAN
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/20211001/7016.

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	SJQ6300L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	THADDAEUS
Contact Number	(Phone) +65-93849439
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SNB1258R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-98487171
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE C
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKX9547Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-96969465
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE D
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SKZ8520X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-91279181

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE E
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN CHEE WEI
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMX6173P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	EUGENIA GOH
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMX6173P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	KIERAN TAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMX6173P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



SKETCH PLAN

IMPORTANT NOTICE

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7. 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.
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.
- (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 claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) 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.

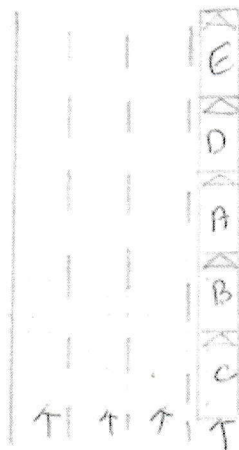
Policyholder's Signature
Date & Time: 1/10/2021
3:30pm

Driver's Signature
(If driver is not the policyholder)
Date & Time: 1/10/2021
3:30pm

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Vehicle A: SMX6173P
 B: SJR6300L
 C: SNB1258R
 D: SKX9547Z
 E: SKZ8520X





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report attached no. 7/2021/1001/7016

DECLARATION

I/We declare the foregoing particulars are true in every respect.


 Policyholder's Signature
 Date & Time: 1/10/2021
 7:30pm
GARMC SketchPlatform V3


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 1/10/2021
 5:30pm


 Reporting Centre Personnel's Signature
 Name:
 NRIC/ID No.:



**SINGAPORE
POLICE FORCE**



T/20211001/7016

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

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Report No. T/20211001/7016

CONTINUATION OF REPORT

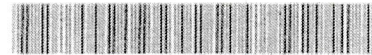
Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMX6173P	Car	MAZDA	MAZDA2 SEDAN 1.5 AT STANDARD PLUS EU6	Red		0
SNB1258R	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMX6173P	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10552292R00	09/05/2021	08/05/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	THADDAEUS		ID No.	NIL
Related Vehicle	SJQ6300L (Car)		Contact No.	93849439
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
Driver				
Name	KO SWEE SENG		ID No.	NIL
Related Vehicle	SKX9547Z (Car)		Contact No.	96969465
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/20211001/7016

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

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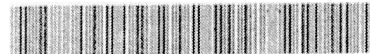
Report No. T/20211001/7016

CONTINUATION OF REPORT

Driver			
Name	CLARENCE	ID No.	NIL
Related Vehicle	SKZ8520X (Car)	Contact No.	91279181
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	KIERAN TAN	ID No.	T1924859Z
Related Vehicle	SMX6173P (Car)	Contact No.	NIL
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	EUGENIA GOH	ID No.	S9209059J
Related Vehicle	SMX6173P (Car)	Contact No.	97808645
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	30/09/2021	Date	30/09/2021
No. of Days granted Medical Leave	05	Degree of	Slight
Driver			
Name	TAN CHEE WEI	ID No.	S8725581F
Related Vehicle	SMX6173P (Car)	Contact No.	83385334
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	30/09/2021	Date	30/09/2021
No. of Days granted Medical Leave	05	Degree of	Slight



SINGAPORE
POLICE FORCE



T/20211001/7016

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

Report No. T/20211001/7016

CONTINUATION OF REPORT

Driver			
Name	SOH	ID No.	NIL
Related Vehicle	SNB1258R (Car)	Contact No.	98487171
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.

I'm involved in a 5-cars collision accident, being the 3rd car out of the 5 cars.

I'm the driver of my car, with my pregnant wife and toddler both sitting at the back seat (toddler inside his child seat).

I was travelling on the right most lane along AYE towards Tuas, under a bridge/flyover with the next exit being exit 9 NUS.

The car in front of me (2nd car) had came to a sudden stop.

I had maintained sufficient safety distance from it and managed to halt about 4 to 5 metres from the car ahead.

Suddenly, the offending car (4th car behind me) came at a fast speed and rear ended into my car.

As a result of the impact, my car was pushed forward to hit the front car (2nd car). My car suffered severe damages from the rear and front.

I have a video (~60MB) to support my car halting from the 2nd car and 4th car coming at a fast speed to rear end my car, as well as supporting photos (38.8MB) to show the damages of the cars. Please see my personal onedrive link to the file: <https://1drv.ms/u/s!Ajwz1yxfj7wjpm55DbxVAqVhzJIV?e=DQMZff>

The LTA Marshall appeared quickly to help usher traffic and help to quickly resolve the accident by providing the available steps.

We also noted a particular workshop, Fastech Auto Pte Ltd, had 2 of its staffs (Mr Jason Chua and Mr Ang Eik Peng) at the accident site, at almost the same time when the LTA Marshall appeared to offer assistance (including repairing at their workshop).

In the exchange of details assisted by LTA Marshall, I have obtained the passengers details as given below:

1st Car (SKZ8520X) - Clarence 91279181

2nd Car (SKX9547Z) - Ko Swee Seng 96969465

3rd Car (SMX6173P) - Chee Wei 83385334 (this is me)

4th Car (SJQ6300L) - Thaddaeus 93849439

5th Car (SNB1258R) - Soh 98487171

After which, the LTA Marshall prompted us to move the cars to the nearest exit. However, as I was not confident to drive the heavily damaged vehicle, Mr Jason Chua from Fastech assisted me to drive the car to the road shoulder of Exit 9 where I met up with my parents-in-law to help smoothen the car and assist me in the accident reporting. As I opted for the



SINGAPORE
POLICE FORCE



T/20211001/7016

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Report No. T/20211001/7016

CONTINUATION OF REPORT

advice from my in laws, i did not employ the services of Fastech (who had also offered me a replacement car on the spot) but instead have a recommended workshop tow my damaged vehicle away. Mr Jason Chua and Mr Ang subsequently left. It is also noteworthy that while waiting for the tow truck services, another colleague from Fastech (Mr Robin Ong) had appeared to offer similar workshop services.

As the impact was huge and that the passengers were of higher risk (pregnant wife and toddler), we subsequently visited the A&E at Mt Alvernia Hospital to seek medical attention around 7.30pm. While there were no visible injuries on the three of us, my wife and myself experienced pain from various parts of the body (such as, but not limited to, neck pain, right abdominal/back pain, arms pain and knees pain). My toddler being unable to clearly express himself was not able to pinpoint clearly areas of pain but become lethargic (unlike his usual self) after the accident.

The doctor has ordered for an ultrasound scan for my mentioned abdominal/back pain but was not able to check on my wife's fetus status as the hospital did not have capability to handle pregnancy of her stage at after-office hours. The doctor had subsequently issued 5 days MC for both me and my wife, and had instructed us to monitor our health, in particular my toddler.



SINGAPORE
POLICE FORCE



T/20211001/7016

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Report No. T/20211001/7016

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 / TP1B /
TAY CHUN KEEN
Contact No.: 65476436

Signature Of Informant:

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

Date/Time:
01/10/2021 13:58

Classification Of Case: