

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 21/10/2021 17:21 (SGT)
Date of Accident 20/10/2021 20:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information BKE TOWARDS SLE ARTER MANDAI ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ3940M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ACE FLEET MANAGEMENT PTE LTD
Company Reg No 2XXXXX914N
Email Address LEECHUANHENG@GMAIL.COM
Mobile Phone No (Phone) +65-92323494
Alternative Phone No +65-92323494

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1800

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number M0017102
Cover Note Number -

DRIVER

Name of Driver LEE CHUAN HENG (LI QUAN XING)
NRIC No SXXXX574E

Date Of Birth	13/05/1972
Occupation	Indoor
Date Of Driving Pass	25/03/1992
Driving experience	29 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91801141
Alt. Phone Number	-
Email Address	LEECHUANHENG@GMAIL.COM
Address	BLK 513 WOODLANDS DRIVE 14 #06-209
Address complement	-
Postcode	730513
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	3
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
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

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	SLN4526H
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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	SGQ8171P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEE CHUAN HENG
Gender	Male
Phone No	(Phone) +65-91801141
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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

COMFORTBELGRO ENGINEERING PTE LTD

EXTERNAL BUSINESS DIV, UPP BRIDGE

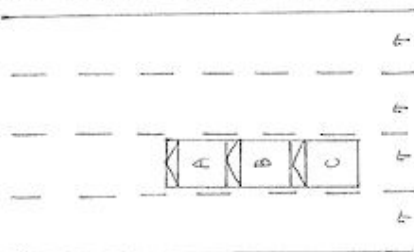
NAME & SIGNATURE: _____

DESIGNATION: _____ DATE: _____

Witnessed by Reporting Centre Personnel

Sketch Plan

BKE towards SLE after Mandai Road



Vehicle A - SLZ 3940M

Vehicle B - SLN 4526H

Vehicle C - SGQ 8171P

Describe Circumstances of the Accident

Refer to the police report no. T/2021021/7012.

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

COMFORTDELGRO ENGINEERING PTE LTD
EXTERNAL BUSINESS DIV, UBI BRANCH
NAME & SIGNATURE: _____
DESIGNATION: _____ DATE: _____

Witnessed by Reporting Centre Personnel



M2400
70000210
Cov. Type: Comprehensive

CERTIFICATE OF INSURANCE

• MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) • MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 • ROAD TRANSPORT ACT, 1987 (MALAYSIA) • MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. M0017102

- | | | | |
|--|------------------------------|--------------------|-----------------------------|
| 1. Index Mark and Registration Number of Vehicle | SL23940M | | |
| 2. Name of Policyholder | Ace Fleet Management Pte Ltd | | |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 31/07/2021 | Excess: Sect I | S\$ 2,000 |
| | | Excess: Section II | S\$ 1,500 |
| 4. Date of Expiry of Insurance | 30/07/2022 | | |
| 5. Persons or Classes of Persons entitled to drive | | Engine No | : 22R0A83374 |
| | | Chassis No | : ZVW400028058 |
| | | Hire Purchase | : Maybank Singapore Limited |

(A) THE POLICYHOLDER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER:
(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(ii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / UA or SDIC websites (www.gia.org.sg or www.ua.org.sg or www.sdic.org.sg).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

For and on behalf of **Etiqa Insurance Pte. Ltd.**
Approved Insurer

GDPRB1 27/07/2021 12:44:56



Authorised Signature























**SINGAPORE
POLICE FORCE**



T/20211021/7012

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

1 of 3
Report No. T/20211021/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/10/2021 12:37		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LEE CHUAN HENG			Address: 513 WOODLANDS DRIVE 14 #06-209 SINGAPORE 730513		
ID Type / ID No.: NRIC NO / S7221574E			Contact No.: Home/Office: Mobile: 91801141		
Nationality: SINGAPORE CITIZEN			Email: LEECHUANHENG@GMAIL.COM		
Sex: Male	Age: 49	Date of Birth: 13/05/1972	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: IT Support			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/10/2021 20:00	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGQ8171P	Car					0
SLN4526H	Car					0
SLZ3940M	Car					0



**SINGAPORE
POLICE FORCE**



T/20211021/7012

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

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Report No. T/20211021/7012

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE CHUAN HENG	ID No.	S7221574E
Related Vehicle	SLZ3940M (Car)	Contact No.	91801141
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	21/10/2021	Date	21/10/2021
No. of Days granted Medical Leave	05	Degree of	Slight

Brief Details.

On 20/10/2021 at about 2000hrs, I was driving my vehicle bearing plate number SLZ3940M was travelling straight along BKE towards SLE after Mandai Road on lane 3. As vehicle in front of me slowed down and came to a stop, I followed suit. Seconds later, I felt an impact from my rear portion, vehicle bearing plate number SLN4526H collided onto the rear portion of my vehicle causing damages. I then alighted and realised that I was involving in a chain collision consisting of 3 vehicle. The last vehicle bearing plate number SGQ8171P. I then felt unwell and went to consult the doctor at Norwood Medical Clinic, I was given 5 days of MC.



**SINGAPORE
POLICE FORCE**

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



T/20211021/7012

3 of 3

Report No. T/20211021/7012

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 / TP1B /
MUHAMMAD AFIQ BIN RAHMAT
Contact No.: 65476171

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

Date/Time:
21/10/2021 12:37

Classification Of Case:

NP168