SS0221BA0002 / S & H Motor Pte Ltd ENTRY DATE & TIME: 10/11/2021 15:33 (SGT) SUBMITTED BY: Wong Kee Nyuk VERSION: 1 (10/11/2021 15:33 (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 10/11/2021 15:33 (SGT) Date of Accident 08/11/2021 13:30 (SGT) Exact Location of Accident Toh Tuck Ave, Singapore Additional Location Information Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Honda

Vehicle Registration Number SMI 8327

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Lee Kum Yoke NRIC No. S0083062C Email Address mark.tay.wa@gmail.com Mobile Phone No (Phone) +65-92988066 Alternative Phone No (Home) +65-92988066

#### VEHICLE PARTICULARS

Manufacturer

Model Shuttle 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 1500

#### **INSURANCE COMPANY**

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 5109168215-02 Cover Note Number

#### DRIVER

Name of Driver Mark Tay Wei An NRIC No. S7222780H

Date Of Birth 28/06/1972 Occupation Outdoor Date Of Driving Pass 02/10/1990 Driving experience 31 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-92988066 Alt. Phone Number Email Address mark.tay.wa@gmail.com Address 7 Burgundy Drive Address complement Postcode 658810 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 Side Swipe 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? 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? Nο PASSENGER 1 Name unknown Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? 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? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT refer attached 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** 

SHC1221L

Hyundai

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	Mr Tan
Contact Number	(Phone) +65-83168611
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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	's Signature / Da		er's Signature (#	Charles bot the	nolinyholder) /	Date Witn	essed by Rep	orting Centre

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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>.
- 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 GA 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 ladgement 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 Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



















POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20211110/7017

D Type	NRIC NO	ID No	S7222780H	
Gender	Male	Age	49	
Race	Chinese	Language	English	
Occupation	Real estate agent	Address	7 BURGUNDY DRIVE	
Occupation			SINGAPORE 658810	
Mobile No	92988066	Is Informant A	Yes	
WODING INO	52555555	Victim?		
Person Name	Liew Lay Peng			
ID Type	NRIC NO	ID No	S8089775H	
Gender	Female	Age	41	
Race	Chinese	Language	English	
Address	7 Burgundy Drive #00-00	Mobile No	88333200	
	SINGAPORE 658810			
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Relation To	Wife			

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.			
Date/Time: 10/11/2021 12:27			
Classification Of Case:			
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Report No. J/20211110/7017

## POLICE REPORT (NP299)

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

Tel No:1800-7910000

rel No:1800-7910000	h D	No		Station Diary No.	
Date/Time Report Made 10/11/2021 12:27	Vide Report No.				
Name Of Informant	Address 7 BURGUNDY DRIVE SINGAPORE 658810				
MARK TAY WEI AN ID Type / ID No. NRIC NO / S7222780H	Contact I Home/Of	No.	Mobile: 92988066		
Nationality SINGAPORE CITIZEN	Email Address MARK.TAY.WA@GMAIL.COM			Race	
Occupation	Sex Male	Age 49	Date of Birth 28/06/1972	Chinese	
Real estate agent Institution/School Name	Language English				
Date/Time Of Incident 08/11/2021 13:30 - 08/11/2021 13:35	Location Of Incident 7 BURGUNDY DRIVE SINGAPORE 658810				
Brief details.					

I was in the centre lane along Toh Tuck Ave travelling towards Bkt Batok East Ave 3 within the speed limit and keeping to my lane, Suddenly vehicle B changed lane abruptly and collided with my car right side. Me and my wife, Liew Lay Peng who was the passenger in the vehicle, sustained injuries from the incident

Subjects Involved Victim Person Name MARK TAY WELAN			
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: 10/11/2021 12:27		
Officer In-Charge Of Case:	Classification Of Case:		

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