SJ0C21CK0001 / Juzz Performance Ptd Ltd ENTRY DATE & TIME: 20/12/2021 16:22 (SGT) SUBMITTED BY: JP User VERSION: 1 (2)/12/2021 16:22 (SGT))



SINGAPORE ACCIDENT STATEMENT

A

- IMPORTANT NOTICE

 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

 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 fiability.

 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 aport will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving o. This aport will be forwarded by the instress of the GIM Records management centre established by the forwarded by the instress of the centre 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

20/12/2021 16:22 (SGT) 20/12/2021 10:30 (SGT) Singapore Along Ubi Road 2 (Traffic Light Junction) Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLW7037K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No

No OH JUNWEI JAY (HU JUNWEI) SXXXX726E Junwei_Leo@hotmail.com (Phone) +65-83636638 +65-83636638

VEHICLE PARTICULARS

Manufacturer

Model Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Trans nission CC

Lexus

Gs300

3000

Private use

No - Claiming third party Private car Auto

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

ERGO Insurance Pte. Ltd. Comprehensive No

DMPG21000811

DRIVER

Name of Driver NRIC No

OH JUNWEI JAY (HU JUNWEI) SXXXX726E



Date Of Birth Occupation Date Of Driving Pass Driving experience Gender

Mobile Number Alt, Phone Number Email Address A idress

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any fureign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given?

If yes, against whom?

Punggol Neighbourhood Police Centre (Phone) +65-18006049999

(Fax) +65-64468015

20/08/1979

02/11/2009

+65-83636638

12 YEARS AND 1 MONTH

Junwei_Leo@hotmail.com

679B PUNGGOL DRIVE #11-866

(Phone) +65-83636638

SINGAPORE 822679

Collision - Head to Rear

Indoor

Male

Yes

No

Clear

Dry

No

Yes

No

Yes

1

No

2

Blk 21A Tebing Lane Singapore 828837

No

CIRCUMSTANCES OF ACCIDENT

I was travelling along Ubi Road 2. I was at the traffic light junction waiting to make a right turn, When suddenly Vehicle B (SNE177G) hit the rear of my vehicle. (Refer to Sketch Plan & Police Report)

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

No

No

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

SNE177G

Vehicle Category
Name of Dr.ver
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

Private car

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?

Were seat belts worn? Was this injured conveyed to hospital by ambulance?

OH JUN WEI JAY (HU JUNWEI) Male (Phone) +65-83636638

Refer to Police report. SLW7037K Yes

SKETCH PLAN

IMPORTANT NOTICE

- 1. Distribution comments the destructions of the government of the comments of
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- 3 Information provides must be as traffic and accurate as possible Any with merepresentation or wirned to of material facts may allow a suppresentations of a report attending to the facts.
- 4. The issue and acception to the form by acceptances as or an age as an electric confit to on the part of a respective companies.

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Describe Circumstance of the Accident

Skatch Plun

VEHICLE &

Declaration

*Wordestate the foregoing periodians are true in every respect.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

1 of 4 Report No. T/20211220/2058

REPORT	F A TRAFF	IC ACCIDENT			
Date/Time Report Made: 20/12/2021 15:32			Vide Report No.:	Station Diary No.: 57	
Informar	nt's Partic	ulars			
Name of OH JUN	Informant WEI JAY		Address: APT BLK 679B PUNG 822679	GGOL DRIVE #11-866 SINGAPORE	
ID Type / ID No.: NRIC NO / S7925726E		Contact No.: Home/Office;	Mobile: 83636638		
Nationality		EN	Email:		
Sex: Male	Age: 42	Date of Birth: 20/08/1979	Type of Informant: Driver		
Race: Chinese		Language:	Institution / School Name:		
Occupation. Business development manager		Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident	Injury Others	Drink Drive: No	Date/Time of Accident: 20/12/2021 10:3	Type of Location: X-Junction	
Location: UBI ROAD 2					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Wor	king	Traffic Volume: Moderate	
Type of Collisi	ion: e against stationary	vehicle		Anyone conveyed by ambulance:	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SLW7037K		TOYOTA	LEXUS GS300 AUTO	Silver	Slightly Damaged	0
SNE177G	Car				Slightly Damaged	0

Details of Vehicle Insurance	MERSES PROPERTY AND ASSESSED.		
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date



Report No. T/20211220/2058

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

CONTINUATION OF REPORT

Details of v	ehicle insurance	of entire the second se	To the second second	Expiry Date
Vehicle No.	Insurance Company	Insurance No	Effective	and the second second
	SHC INSURANCE PTE. LTD.	DMPG21000811	09/01/2021	08/01/2022

Any Pedestrian	Involved: No				In a NO	
No. of Pedestria	ns Injured: NIL	Use of Ped	estrian	Cross	ing. NA	
Driver	Contract of the contract of th		ID N.		S7925726E	
Name	OH JUN WEI JAY		ID No.		212721505	
Related Vehicle	SLW7037K (Car)		Contact No.		83636638	
Hospital/Clinic	BOK FAMILY CLINIC PTE LTD		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	20/12/2021	Date Disch	narge	20/12	2/2021	
No. of Days gran	ted Medical Leave 03	Degree of	Injury	Sligh		
Driver		-			the state of the s	
Vame	RYAN		ID No.		NIL	
Related Vehicle	SNE177G (Car)		Class of Driving Licence & Expiry Date		90666996	
lospital/Clinic	NIL				Class: NIL Date of Expiry: NIL	
ate Treatment	NIL	Date Disc	harge	NIL		
	ed Medical Leave NIL	Degree of	Injury	NIL		

Brief Details.

On 20/12/2021 at around 1030 hours, I was on the left lane of a 2 lane road along Ubi Road 2 intending to turn left onto Ubi Avenue 4.

Upon reaching the cross junction, I came to a complete stop as the turning light was not lit.

Shortly after, I felt an impact coming from the rear of my vehicle. The impact resulted in my car shifting forward. Fortunately no one was crossing the road at that point of time.

I then came out from my car and the said driver just kept mentioning that I should have moved forward because the green turning light was on. I wish to state that the turning light had just turn green and before I could move, the other driver had already hit onto the rear of my vehicle.

Nonetheless, we exchanged particulars before leaving on our separate ways.

Halfway through, I felt dizzy and discomfort on my neck area. As such, I then went to Bok Family Clinic



Police Station Of Origin; Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999



4 of 4

Report No. T/20211220/2058

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report
F /
Sr Staff Sgt CHIANG JING XUAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp
NP188

Signature Of Informant:

Date/Time:
20/12/2021 15:32

Classification Of Case:
SINCAPORE
SIN



Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999



Report No. T/20211220/2058

CONTINUATION OF REPORT

Pte Ltd located at 117 Bedok Reservoir Road #01-58 where I was then awarded 3 days MC by Dr Bok Teck Sun.

I have been driving for the past 10 years and I do not have an inbuilt camera in my car. I am also not sure if there are any CCTVs at the said location.