SN0921CM0005 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 22/12/2021 13:25 (SGT) SUBMITTED BY: Renee VERSION: 1 (22/12/2021 13:25 (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 22/12/2021 13:25 (SGT) Date of Accident 20/12/2021 16:55 (SGT) Exact Location of Accident Singapore Additional Location Information PRIME BIZHUB, 21 WOODLAND CLOSE (CARPARK) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SI G14G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **GOH SIOK LIN LINDA** NRIC No SXXXX019B Email Address davelingsy@gmail.com Mobile Phone No (Phone) +65-92909070 Alternative Phone No +65-90622070

VEHICLE PARTICULARS

Manufacturer

Toyota Model Harrier Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1986

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Policy Number D21MPC0008604 Cover Note Number

DRIVER

Name of Driver LING SEE YONG NRIC No. SXXXX207Z

Date Of Birth 13/03/1975 Occupation Indoor Date Of Driving Pass 25/02/1992 Driving experience 29 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-90622070 Alt. Phone Number Email Address davelingsy@gmail.com Address 3 JALAN TARI ZAPIN Address complement Postcode 799050 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Spouse 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 Collided into Parked Vehicle 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? Nο 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 **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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE POLICE REPORT: T/20211221/7022 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 WITH WORKSHOP Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SND1440U
Vehicle Manufacturer	Hyundai
Vehicle Model	Avante
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-97733922
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.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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' 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 &

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

Witnessed by Reporting Centre Personnel

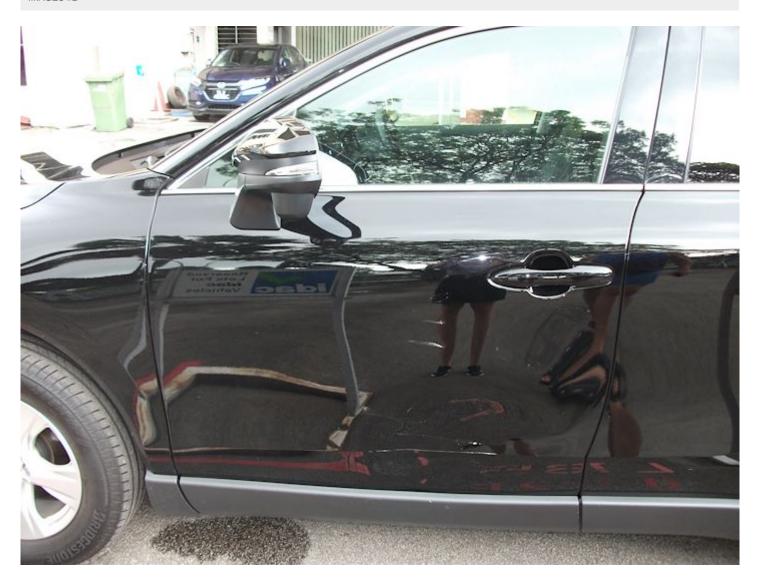
Sketch Plan

B = SNO 1440 U

close (car park)

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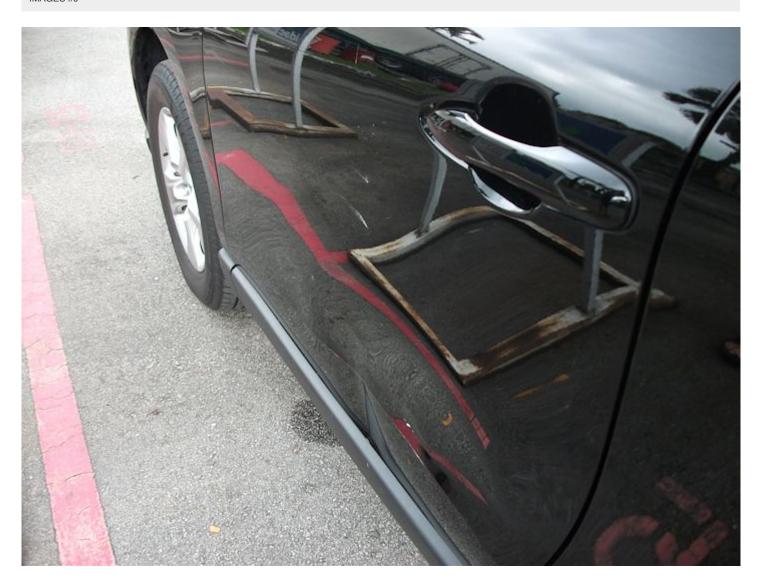


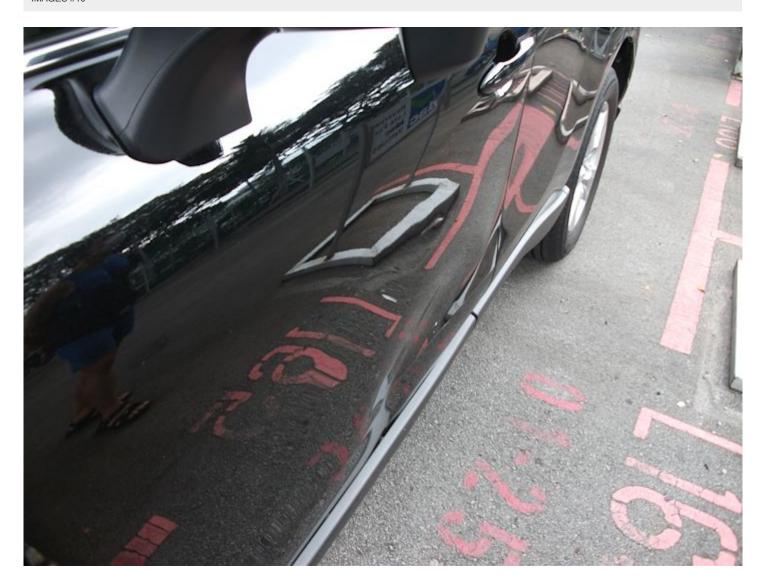


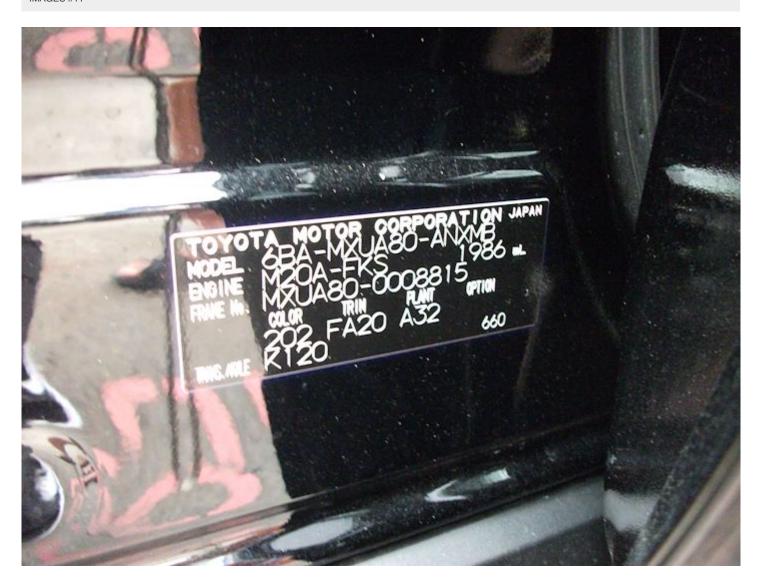


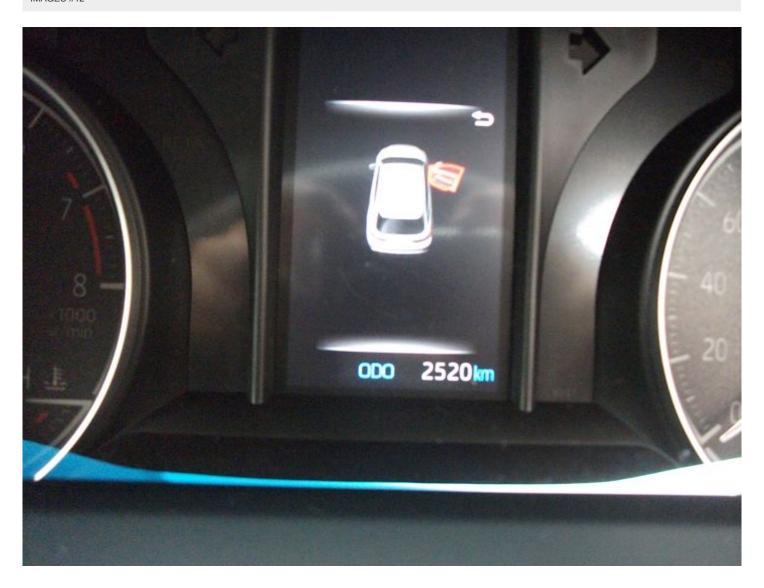
















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20211221/7022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/12/2021 16:08		Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars	BERT PERSONAL MENTAL ME		
Name of Informant: LING SEE YONG			Address: 3 JALAN TARI ZAPIN SINGAPORE 799050		
ID Type / ID No.: NRIC NO / S7508207Z		Contact No.: Home/Office:	Mobile: 90622070		
Nationality: SINGAPORE CITIZEN		Email: DAVELINGSY@GMAIL.COM			
Sex: Age: Date of Birth: Male 46 13/03/1975		Type of Informant: CO DRIVER			
Race: Chinese		Language: English	Institution / School Name:		
Occupation: Managing director/Chief executive officer			Driving Licence Inform Class:	ation: Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/12/2021 16:55	Type of Location Car Park
Location: WOODLAND	S CLOSE			
11.222.21				
		Road Surface: Dry		Road Speed Limit: 20 Km/h
			2	

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLG14G	Car	ТОУОТА	HARRIER 2.0S A	Black	Slightly Damaged	0
SND1440U	Car	HYUNDAI	AVANTE	Beige	Slightly Damaged	2





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20211221/7022

CONTINUATION OF REPORT

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SLG14G	INDIA INTERNATIONAL INSURANCE PTE LTD	D21MPC0008604	28/10/2021	27/10/2022		
SND1440U	UNKNOWN	UNKNOW	20/12/2021	20/12/2022		

Details of Perso	n Involved				
Any Pedestrian I	nvolved: No				
No. of Pedestriar	s Injured: NIL		Use of Pedestrian Crossing: NA		
CO DRIVER					
Name	LING SEE YONG		ID No.	S7508207Z	
Related Vehicle	NIL			Contact No.	90622070
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	7.10.0	Date	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL	

Brief Details.

Toyota Harrier 2.0A, SLG14G was park inside the car park lot at Prime Bizhub, address 21 Woodland Close Singapore 737854, on 20 Dec 2021 from 1030 hrs till 2355 hrs midnight.

At 1656 hrs, a Hyundai Avante, SND1440U, was reversing into the empty parking lot on the left side of SLG14G. SND1440U while reversing, hit the front left passenger's door of SLS14G. The driver of SND1440U came down to inspect both vehicles and leave a note with contact number on SLG14G front wind screen.

The process was captured by SLG14G in car recording camera. Available upon request.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20211221/7022

CONTINUATION OF REPORT

Sketch Plan			
Informant is	not able to	provide	sketch

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: 21/12/2021 16:08
Officer In Charge Of Case: TP / TPIB / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

NP168