

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 27/11/2021 10:29 (SGT)
Date of Accident 25/11/2021 08:15 (SGT)
Exact Location of Accident SLE, Singapore
Additional Location Information ALONG SLE EXIT TO TPE (EXIT 1B)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDN8212G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ONG KIAN SWEE
NRIC No SXXXX409A
Email Address ks.ong888@hotmail.com
Mobile Phone No (Phone) +65-94570857
Alternative Phone No +65-94570857

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Asx
Variant -
Exact purpose for which vehicle was being used at time of 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 1998

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P10501421R00
Cover Note Number -

DRIVER

Name of Driver ONG KIAN SWEE
NRIC No SXXXX409A

| | |
|--|---------------------------------|
| Date Of Birth | 15/03/1965 |
| Occupation | Indoor |
| Date Of Driving Pass | 02/11/1983 |
| Driving experience | 38 YEARS |
| Gender | Male |
| Mobile Number | (Phone) +65-94570857 |
| Alt. Phone Number | +65-94570857 |
| Email Address | ks.ong888@hotmail.com |
| Address | BLK 857 WOODLANDS ST 83 #08-232 |
| Address complement | - |
| Postcode | 730857 |
| 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 | Collision - Head to Rear |
| Weather Conditions | Clear |
| Road Surface | Dry |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 2 |
| 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) | 1 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

DETAILS OF POLICE ACTION

| | |
|---|------------------------------------|
| Was the accident reported to the police? | Yes |
| Police Station Name | Woodlands Division Headquarters |
| Police Station Phone No | (Phone) +65-18004660000 |
| Police Station Address | 1 Woodlands St 12 Singapore 738622 |
| 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? | Yes |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|------------|
| Vehicle Registration Number | FBQ7101H |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Motorcycle |
| Name of Driver | TAN |

| | |
|---|----------------------|
| Contact Number | (Phone) +65-91633700 |
| 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

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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:

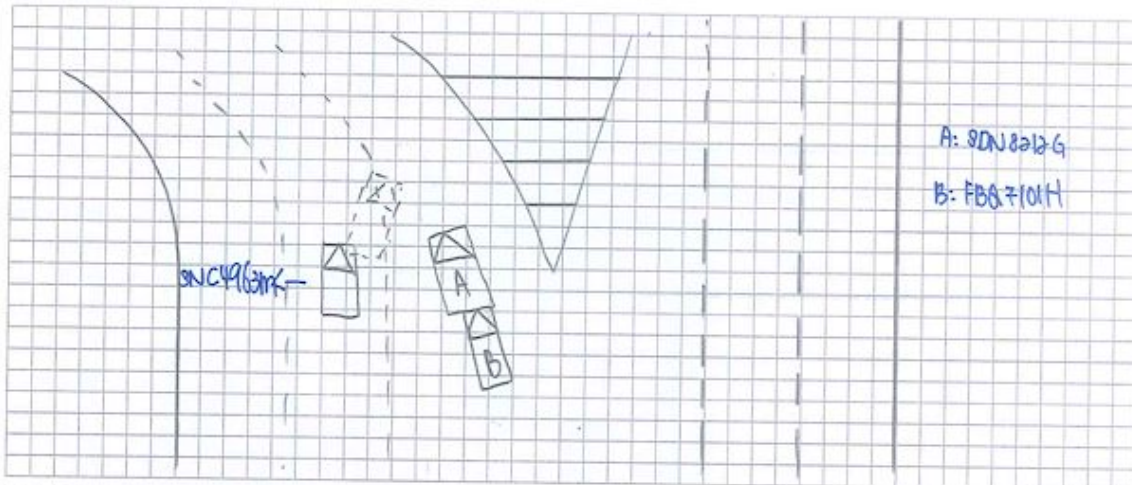
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Refer to Police Report

L/20211125/7048

DECLARATION

I/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:


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

It pays to choose

**Budget
Direct
insurance**

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10501421R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10501421R00 s(Comprehensive / Named Driver Plan)

| | | |
|---|---|-----------------------------------|
| 1) Vehicle Registration Number | : | SDN8212G |
| Chassis Number | : | - |
| 2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | : | 28/01/2021 (00:00) |
| 3) Date / Time of Expiry of Insurance | : | 27/01/2022 (23:59) |
| 4) Excess (i) Policy | : | S\$ 500.00 |
| (ii) Windscreen | : | S\$ 100.00 |
| 5) Policyholder | : | Ong Kian Swee |
| 6) Persons or Classes of Persons Entitled to Drive* | | |
| Drivers named as a Main / Named Driver in this Certificate of Insurance only. | | |
| 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 so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions. | | |
| Main Driver / Date of Birth | : | Ong Kian Swee(15/03/1965) |
| Named Driver(s) / Date of Birth | : | Ong Zhi Hao, Kenneth (07/09/1992) |
| 7) Limitation as to use* | | |
| Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or 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) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings. | | |
| 8) Finance Company | : | Maybank Singapore Limited |

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 30/12/2020

Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance


Simon Birch
 Chief Executive Officer

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg



































**SINGAPORE
POLICE FORCE**



L/20211125/7048

1 of 2

POLICE REPORT (NP299)

Report No. L/20211125/7048

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

| | | |
|--|---|---------------------|
| Date/Time Report Made 25/11/2021 23:02 | Vide Report No. | Station Diary No. |
| Name Of Informant ONG KIAN SWEE | Address 857 WOODLANDS STREET 83 #08-232 SINGAPORE 730857 | |
| ID Type / ID No. NRIC NO / S1729409A | Contact No. Home/Office: | Mobile: 94570857 |
| Nationality SINGAPORE CITIZEN | Email Address ks.ong888@hotmail.com | |
| Occupation Quality assurance manager | Sex Male | Age 56 |
| Institution/School Name | Date of Birth 15/03/1965 | Race Chinese |
| Date/Time Of Incident 25/11/2021 08:15 - 25/11/2021 08:25 | Location Of Incident SELETAR EXPRESSWAY | |

Brief details.

At about 0820hrs, I was driving my car (SDN8212G) along the first lane of SLE, and am exiting towards TPE.

While driving, a Silver Toyota Sienta (SNC4963M) cut across my lane abruptly, and promptly exit towards CTE without stopping.

To avoid hitting the car, i braked and the motorcycle (FBQ7101H) behind me hit the ear of my vehicle. The rider of the motorcycle (FBQ7101H) is named Tan, HP: 91633700.

| | |
|--|--|
| 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: 25/11/2021 23:02 |
| Officer In-Charge Of Case: | Classification Of Case: |



**SINGAPORE
POLICE FORCE**



L/20211125/7048

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20211125/7048

Fortunately no one was injured.

My in-car camera recorded the accident and the Toyoya Sienta's actions.

| | | | |
|--------------------------|---------------------------|---------------------------|---|
| Subjects Involved | | | |
| Suspect | | | |
| Person Name | Driver of Toyota Sienta | | |
| Gender | Unknown | | |
| Victim | | | |
| Person Name | ONG KIAN SWEE | | |
| ID Type | NRIC NO | ID No | S1729409A |
| Gender | Male | Age | 56 |
| Race | Chinese | Language | English |
| Occupation | Quality assurance manager | Address | 857 WOODLANDS STREET 83 #08-232 SINGAPORE 730857 |
| Mobile No | 94570857 | Is Informant A Victim? | Yes |
| | | | |
| Person Name | ONG KIAN SWEE (Informant) | | |

| | |
|--|--|
| 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: 25/11/2021 23:02 |
| Officer In-Charge Of Case: | Classification Of Case: |



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SA1A21BR0001 Vehicle Registration No: SDN8212G

Name (as shown in NRIC): ONG KIAN SWEE NRIC/FIN/Passport No: 409A

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 94570857

Email Address: _____

Date of Accident: 25/11/2021 Time of Accident: 0815HRS

Place of Accident: ALONG SLE EXIT TO TPE (EXIT 1B)

Insurance Company: _____

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

AMEND EMAIL ADDRESS

Policyholder / Driver's Signature
Date:

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