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.

- 4. The issue and acceptance of this is form by instrained 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 14/02/2022 15:20 (SGT) Date of Accident 13/02/2022 16:22 (SGT) Exact Location of Accident Singapore Additional Location Information **BRADDELL ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SI 7368K

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner KOH HOON HUEY

NRIC No. S1622849D

Email Address kohhoonhuey@gmail.com Mobile Phone No (Phone) +65-91859800

Alternative Phone No +65-91859800

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180

Variant **AVANTGARDE (R17 LED)** 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 1595

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.

Type of Coverage Comprehensive

Fleet Policy

Policy Number D21MTPV01004204 Cover Note Number 23/4/2021 - 22/4/2022

DRIVER

Name of Driver LWEE ZHI GUANG MATHEW NRIC No. S9239695I

Accident report SA19222E0006

Date Of Birth 30/10/1992 Occupation Indoor Date Of Driving Pass 19/01/2011 Driving experience 11 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-81336198 Alt. Phone Number Email Address MathewLwee@gmail.com Address 156 MARIAM WAY #08-04 Address complement Postcode 507082 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 Collision - Head to Rear Weather Conditions Raining 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? Yes Was any injured conveyed to hospital by ambulance? No 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 LOO XI MUN JOCELYN Gender Female PASSENGER 2 Name LWEE KIM SENG Gender Male PASSENGER 3 Name LWEE SI XIA STEPHENIE Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name **Tanglin Division Headquaters** Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH ATTACHMENT BELOW

Was notice of intended Prosecution given?

If yes, against whom?

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA4785S Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver LAM KENG KEONG NRIC No S1461609H 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 LOO XI MUN JOCELYN Gender **Female** Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained **TUMMY PAIN** Injured person in which vehicle? SLZ368K Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No

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 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and day iccreately 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 madine of correspondence, statements, inveices, reports or micros targe 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 claim. (infectively true "Purposes"]
 - (b) all insurer(s) who have insuced vehicle(s) involved in this accident and the insurers' lawyers/law lirms, may/are perindend to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and
 - my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service provides not agents(mcluding their lawyers/law fams), which may be sited outside of Snigapore, for one or more of the areas Purpose.
 - (6) my Personal Information will also be collected and used to compile claims lie-to-y for the purpose of travel detection. investigation and management in present and all future claims
 - (n) 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 hand, regulators, law enforcement and government agrees or as reasonably respired for the porpose's stated or
 - (a) for complying with disputements rader my regulations, laws or coefficients

Driver's Segmanar

14 02 2022 Patrick Continue

Jack & I mp

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SKETCH PLAN	02/22 Time: 1622 Locatio 368 K Vehicle B: SHA478	> Vehicle C:
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		A: SLZ 368 K
		B: SHA 4785S
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	Braddell Rd	
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vas undo made	ice who was on the pas ain after the accident. OBGYN doctor on 14th Fe on 14 Feb at 1239 hrs w	ill month police report
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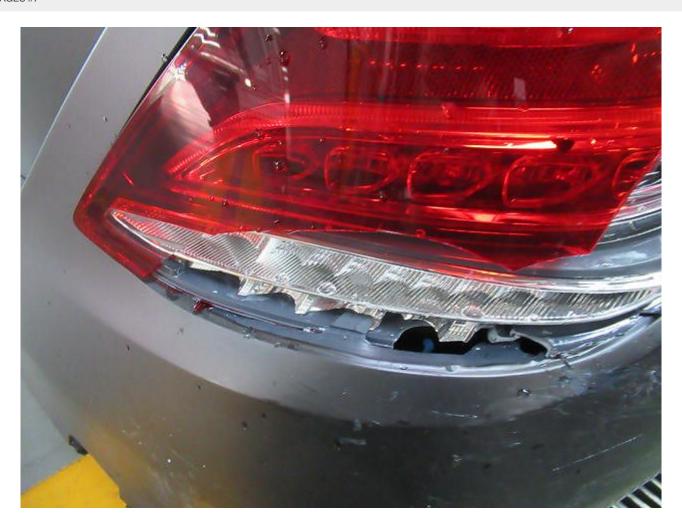


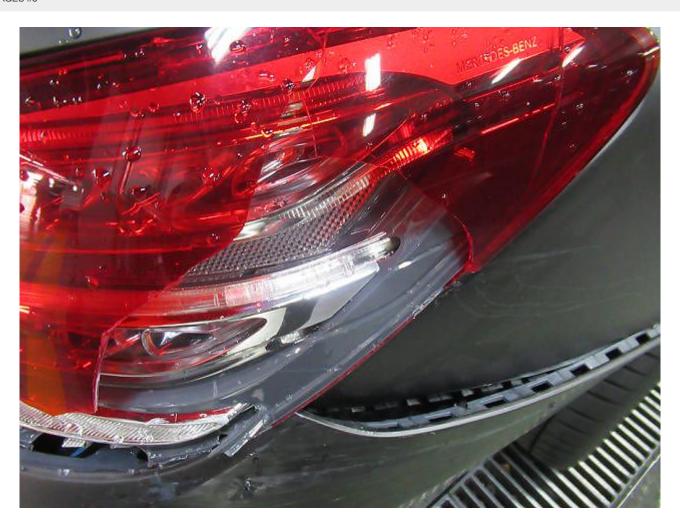


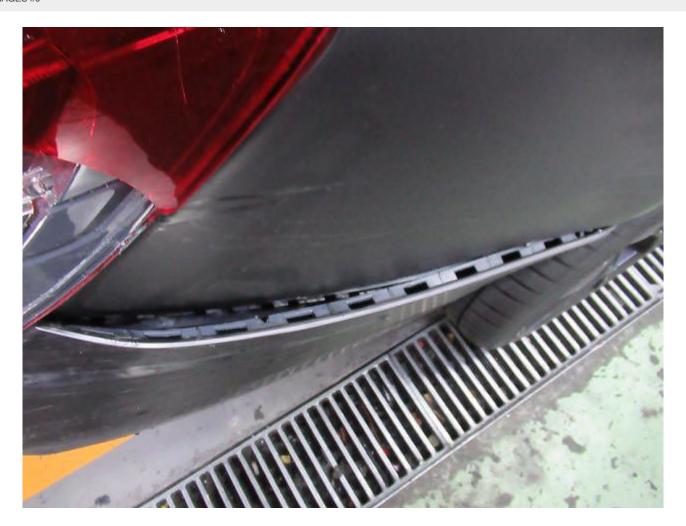




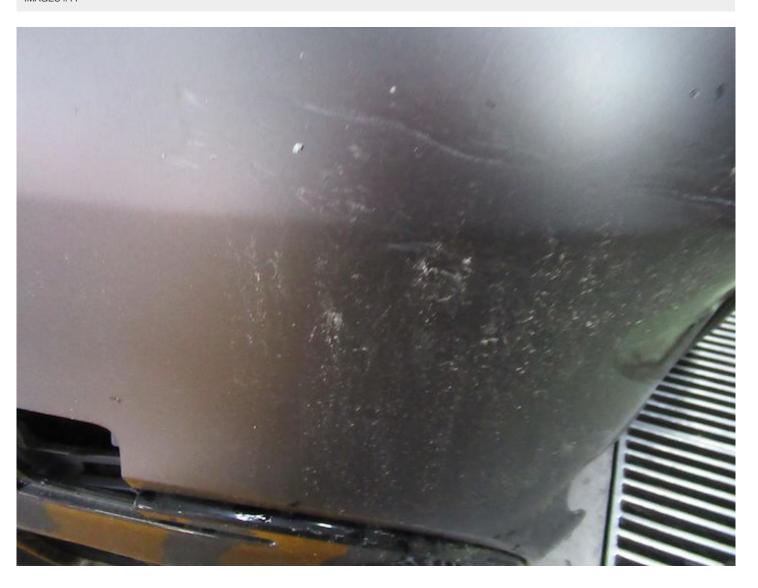


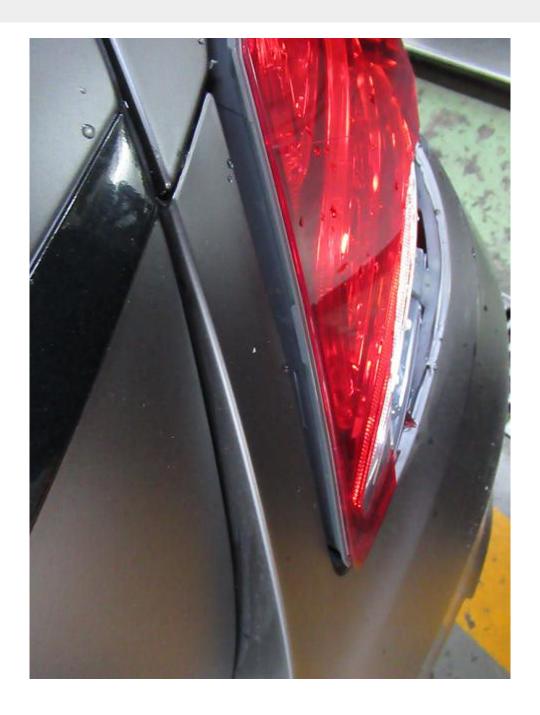


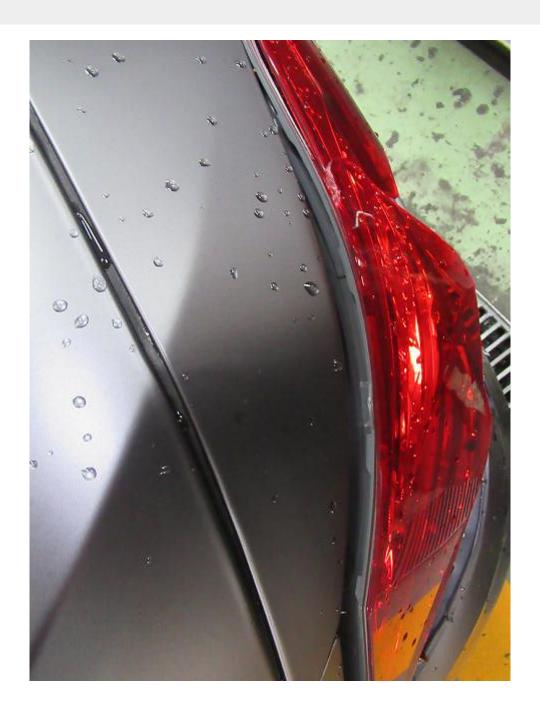


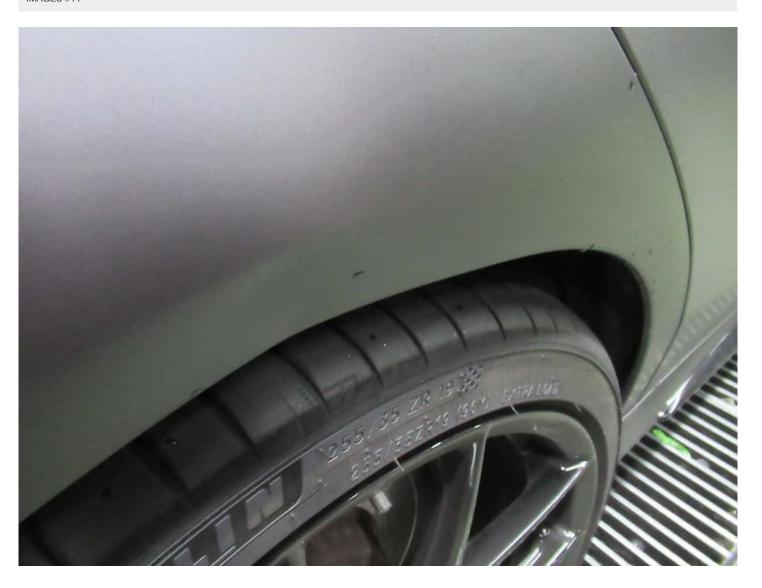


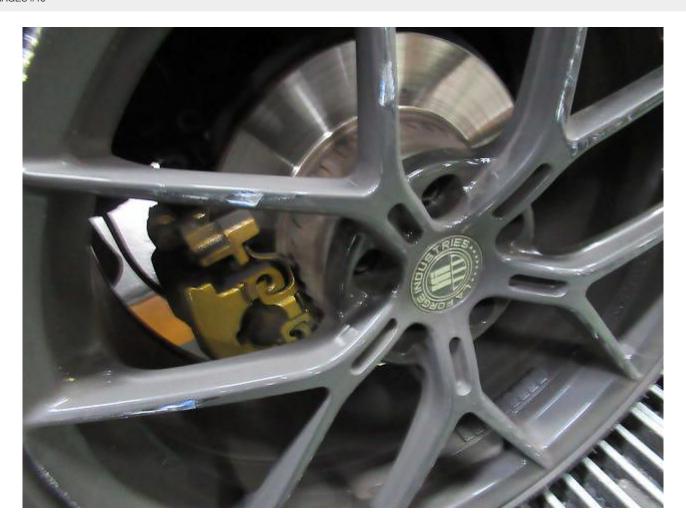




















1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000 Report No. E/20220214/7010

Date/Time Report Made	Vide Re	port No.		Station Diary No
14/02/2022 12:39				
Name Of Informant	Address			THE RESERVE THE PROPERTY OF THE PARTY OF THE
LWEE ZHI GUANG, MATHEW	156 MARIAM WAY #08-04 SINGAPORE 507082		RE 507082	
ID Type / ID No. NRIC NO / S92396951	Contact No. Home/Office: Mobile: 81336198			
Nationality SINGAPORE CITIZEN	Email Address mathewlwee@gmail.com			
Occupation Other commercial and marketing sales representatives	Sex Male	Age 29	Date of Birth 30/10/1992	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 13/02/2022 16:20 - 13/02/2022 16:25	Location Of Incident Braddell Rd after PUB Recreation Club Bus Stop, before overhead bridge			

Brief details.

Comfort Delgro Taxi SHA4785S driver LAM KENG KEONG of Singapore NRIC S1461609H changed lane twice dangerously, did not slow down and hit my vehicle SLZ368K with full impact.

Onboard was a pregnant lady Looi Xi Mun Jocelyn S9316130J with gestational week of 15 weeks and 3 days during day of accident. Jocelyn complained of cramps around the tummy area after the accident

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/02/2022 12:39
Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220214/7010

and visited her OBGYN doctor Dr Choo Wan Ling on the next day, 14 Feb 2022 at 11am and was given 1 day MC.

Subjects Involved			
Victim		BALL BARTS	Control of the second
Person Name	LWEE ZHI GUANG, MATHEW		
ID Type	NRIC NO	ID No	S9239695I
Gender	Male	Age	29
Race	Chinese	Language	English
Occupation	Other commercial and marketing sales representatives	Address	156 MARIAM WAY #08-04 SINGAPORE 507082
Mobile No	81336198	Is Informant A Victim?	Yes
Person Name	Looi Xi Mun Jocelyn		
ID Type	NRIC NO	ID No	S9316130J
Gender	Female	Age	28
Race	Chinese	Language	English
Occupation	Cabin attendant/steward	Address	313 Jurong East St 32 #08-207 SINGAPORE 600313
Mobile No	90221725	Relation To Informant	Fiance

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: 14/02/2022 12:39
Officer In-Charge Of Case:	Classification Of Case:



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

ADDEN	1DUM
PARTICULARS OF PERSON MAKING THE AMENDME	
Original Report No: <u>\</u> \(\lambda\(\lambda\)\(\lambda\)\(\lambda\)\(\lambda\)	Vehicle Registration No: 127(%
Original Report No: 4(12)260006 Name (as shown in NRIC): LUCE 241 GUANG A	MATHEO NRIC/FIN/Passport No: _ JKXXX 615I
(*Vehicle Driver/Vehicle Owner) (*) Please delete as	
Address:	Singapore (
Contact (Tel):	Mobile No.:
Email Address: Matherluce @ grail-wn	
Date of Accident:	Time of Accident:
Place of Accident:	
Insurance Company:	
ADDITIONAL INFORMATION /AMENDMENTS:	
to LUEE 2HI GUANO MATH MA	LUGE 211J 1804 GUANG MAGPHEM IHEU.
	SHI LIM MOTOR CO SLK 10, ANG MO KIO INDUSTRIAL PARK : #01-09, AMK AUTOPOINT SINGAPORE 56804"
Policyholder / Driver's Signature Date:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: Date:



Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #03-03 Singapore Land Tower, Singapore 048623 Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg Co. Reg. No.: 196905490E | GST Reg. No.: M200903196

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) ROAD TRANSPORT ACT 1987 (MALAYSIA) ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

: D21MTPV01004204 Certificate/Policy No. : KOH HOON HUEY Insured

Motor Vehicle (Registration No.): SLZ368K

: Comprehensive - ExcelDrive PRESTIGE Coverage

Policy Commencement Date : 23 APRIL 2021 00:00 Policy Expiry Date : 22 APRIL 2022 23:59 Maximum Liability (Section I) : Market value at time of loss

Excess* : \$600 - Section I

Voluntary Excess* : N.A

: S\$100.00 for each and every applicable claim. Windscreen Excess*

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

- The Insured.
- 2. Any other person who is driving on the Insured's order or with his permission.
- In the event of the death of the Insured,
 a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
 - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been

withdrawn by the Insured.

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 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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

IPWe HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1). The provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Mataysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.30

Sompo Insurance Singapore Pte. Ltd.

Oliej 20

Authorised Signatory

Date/Time of Issue: 14 MARCH 2021 13:03

IMPORTANT NOTICE

- Keep the Certificate in your Motor Vehicle;
 Under the Motor Vehicles (Third-Party Risks and Cempensation) Act (Chapter189), it shall be unlawful for any person to use or cause to permit any other person to use a
 Motor Vehicle without a valid policy of insurance under the Act;
 On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must swrender the Certificate of Insurance and the Policy to
 the Insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Fallure to comply with this abligation
 is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
 This Policy will close to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name: 11L19900 & LEE WAI HON WAYNE CI Code: 22A DLDPMK44K8TTWPAJ