

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	01/03/2022 22:18 (SGT)
Date of Accident	25/02/2022 22:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TOWARDS SLE BEFORE ANG MO KIO AVE 3 EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV3224T
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	ALLSWELL MOTOR TRADERS
Company Reg No	53192889J
Email Address	ben@allswellmotor.com.sg
Mobile Phone No	(Phone) +65-98448882
Alternative Phone No	+65-98448882

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Voxy
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	Etika Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	M0016024
Cover Note Number	04/08/2021 - 03/08/2022

DRIVER

Name of Driver	SAHROM BIN AHMAD
NRIC No	S7623118D

Date Of Birth	03/08/1976
Occupation	Outdoor
Date Of Driving Pass	20/04/2007
Driving experience	14 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98364242
Alt. Phone Number	-
Email Address	penndek@gmail.com
Address	BLK 64 KALLANG BAHRU #03-389
Address complement	-
Postcode	330064
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	GRAB PASSENGER
Gender	Female

PASSENGER 2

Name	GRAB PASSENGER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Serangoon Neighbourhood Police Centre
Police Station Address	50 Serangoon Avenue 2 #01-02
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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1



Vehicle Registration Number	SLF6593S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
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	SAHROM BIN AHMAD
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SLV3224T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

SLV 32247 (ET:9A)
SIA. 25/02/22 @ 2220

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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.



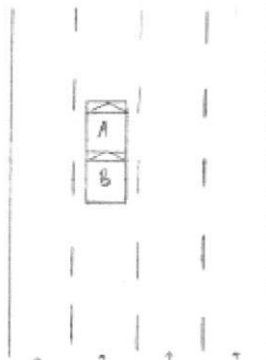
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

(TE towards SLE
before any motor
Ave 3 Exit



Vehicle A: SLV 32247
Vehicle B: SLV 65933

Describe Circumstances of the Accident

Refer to Police Report NO: T/20220226/2005

I will be repairing my vehicle At Twin International Hotel

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

Driver's Signature

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

Witnessed by Reporting Center Personnel

Witnessed by Reporting Centre
Personnel


**SINGAPORE
POLICE FORCE**


T/20220226/2005

1 of 3

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

Report No. T/20220226/2005

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/02/2022 01:19	Vide Report No.:	Station Diary No.: 10
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Informant's Particulars

Name of Informant: SAHROM BIN AHMAD			Address: APT BLK 64 KALLANG BAHRU #03-389 SINGAPORE 330064		
ID Type / ID No.: NRIC NO / S7623118D			Contact No.: Home/Office: Mobile: 98364242		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 45	Date of Birth: 03/08/1976	Type of Informant: Driver		
Race: Javanese			Language:		Institution / School Name:
Occupation: PRIVATE HIRER DRIVER			Driving Licence Information: Class: 2B,2A,2,3,4A		Date of Expiry:

General Information of the Accident

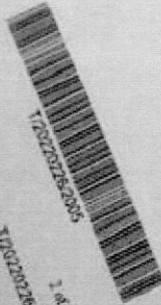
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/02/2022 22:20	Type of Location: Expressway
Location: CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved


Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLF6593S	Car					1
SLV3224T	Car					2

Details of Person Involved


Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



Report No. T/20220226/2005
3 of 3



**SINGAPORE
POLICE FORCE**



T/20220226/2005

Police Station Of Origin:
Serangoon N.P.C
80 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

Report No. T/20220226/2005

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.

<p>Signature of Officer Recording The Report: F / SGT 3 YUANA BINTE KASSIM</p>	<p>Signature Of Informant:</p>
<p>Signature Of Interpreter: Not applicable</p>	<p>Date/Time: 26/02/2022 01:19</p>
<p>Officer In Charge Of Case: TP / AEIT / SSI TAY CHUN KEEN Contact No.: 65476436</p>	<p>Classification Of Case:</p>

NP168


**SINGAPORE
POLICE FORCE**


T/20220226/2005

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

2 of 3

Report No. T/20220226/2005

CONTINUATION OF REPORT

Driver			
Name	SAHROM BIN AHMAD		ID No. S7623118D
Related Vehicle	SLV3224T (Car)		Contact No. 98364242
Hospital/Clinic	CENTRAL 24HR CLINIC HOUGANG		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3,4A Date of Expiry: NIL
Date Treatment	25/02/2022	Date Discharge	25/02/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	JOEY INEZ ISABELLE LEE		ID No. T0136135F
Related Vehicle	NIL		Contact No. 84180211
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/02/2022 at about 2222hrs, I was driving my vehicle SLV3224T along CTE towards SLE near to exit Ang Mo Kio Ave 3, when suddenly a vehicle SLF6593S knocked against the rear of my vehicle. I then stopped my vehicle and spoke to the driver. I told the driver to take photos of the accident and we drove our vehicles along the road shoulder. We then exchanged particulars.

The said driver was not injured. I made a check on my passengers and they told me that they are injured. As such, we proceeded to the clinic to seek medical attention. I sustained back and neck pain. I was given 3 days of medical leave from 25/02/2022 to 27/02/2022.

I wish to state that my vehicle has in-car camera for front and rear.

My vehicle's rear bumper was dented in.

JWG INTERNATIONAL PTE. LTD.

10, ANG MO KIO IND PARK 2A, #03-08 AMK AUTOPOINT, SINGAPORE 568047

H/P: 8299 6103 | FAX: 6909 9592

E-Mail: jwg.claims@yahoo.com

To: CHINA TAIPING INSURANCE SINGAPORE PTE LTD

Att: Motor Claims Dept

ACCIDENT INVOLVING SLF6593S [YOUR INSURED] & SLV3224T [OUR CLIENT]
ON 25/02/2022.

ESTIMATED REPAIR COSTS FOR SLV3224T

<u>QTY</u>	<u>PARTS</u>		<u>AMOUNT</u>	
1PC	TAILGATE <i>Buc</i>	1812.00	\$ 2,406.10	✓
1PC	TAILGATE WINDSCREEN MOULDING <i>Huc</i>	135.00	\$ 407.20	✓
1PC	TAILGATE CHROME MOULDING <i>Crack</i>	581.00	\$ 988.20	✓
1PC	TAILGATE TOYOTA LOGO <i>Huc</i>		\$ 58.80	✓
1PC	TAILGATE 'VOXY' EMBLEM <i>Huc</i>		\$ 103.90	✓
2PC	TAILGATE NO. PLATE LAMP L+R @ \$107.68 EACH <i>HH</i>		\$ 215.36	X
1PC	TAILGATE INNER TRIM BOARD <i>minorly crack</i>	425.00	\$ 1,093.70	✓
1PC	TAILGATE WEATHER STRIP <i>defunct</i>	371.75	\$ 725.50	✓
1PC	TAILGATE LOCK <i>Dem</i>		\$ 461.50	✓
1PC	TAILGATE HYBRID EMBLEM <i>Huc</i>		\$ 62.15	✓
2PC	TAILGATE HINGE LH / RH @ \$104.20 EACH <i>HH</i>		\$ 208.40	X
2PC	TAILGATE DAMPER LH / RH @ \$609.10 EACH <i>HH</i>		\$ 1,218.20	X
1PC	REAR BUMPER <i>Buc</i>	798.20	\$ 1,491.90	✓
2PC	REAR BUMPER SIDE RETAINER L+R @ \$129.92 EACH <i>HH</i>		\$ 259.80	X
2PC	REAR BUMPER BRACKET L+R @ \$158.39 EACH <i>HH</i>		\$ 316.78	X
2PC	REAR BUMPER REFLECTOR L+R @ \$145.80 EACH <i>HH</i>		\$ 291.60	X
1PC	REAR BUMPER TOW HOOK COVER <i>dislodged</i>	42.10	\$ 91.80	✓
1PC	REAR END PANEL INNER <i>HH</i>		\$ 1,205.90	X
1PC	REAR END PANEL OUTER <i>Debit Buc</i>	685.10	\$ 1,420.85	✓
1PC	REAR END PANEL TOP GARNISH <i>defunct</i>	204.50	\$ 383.82	✓
1PC	SPARE WHEEL PANEL <i>Debit</i>	855.00	\$ 2,876.20	✓
1PC	SPARE WHEEL PANEL TOP BOARD <i>st</i>	830.00	\$ 1,409.20	✓
2PC	REAR FENDER LH / RH @ \$2,985.70 EACH <i>HH</i>		\$ 5,971.40	X
2PC	REAR FENDER INNER TRIM BOARD L+R @ \$868.48 EACH <i>defunct</i>		\$ 1,736.96	✓
2PC	REAR FENDER QUARTER GLASS MOULDING @ \$499.80 EACH <i>minorly crack</i>		\$ 999.60	X 1362.20
2PC	TAIL LAMP L+R @ 1,389.85 EACH <i>HH</i>		\$ 2,779.70	X
2PC	TAIL LAMP LOWER BRACKET L+R @ \$174.25 EACH <i>HH</i>		\$ 348.50	X
2PC	TAIL LAMP PANEL L+R @ \$898.00 EACH <i>rev</i>		\$ 1,796.00	X
2PC	TAIL LAMP LOWER GARNISH LH / RH @ \$498.75 EACH <i>cut minorly crack</i>		\$ 997.50	✓ 743.70
1PC	REAR EXHAUST PIPE <i>HH</i>		\$ 1,573.90	X

1PC	REAR EXHAUST HEAT SHIELD H/W	\$ 288.80	X
1PC	REAR EXHAUST MOUNTING H/W	\$ 98.00	X
1PC	REAR EXHAUST DIFFUSER COVER H/W	\$ 355.00	X
1PC	REAR KEYLESS SENSOR manually w/c 72.00	\$ 301.27	✓
1PC	REAR FENDER INNER TRIM BOARD BRACKET RH 1st 68.31	\$ 211.91	✓

9672.21

7254.15

PARTS SUM: \$ 34,642.22
 PARTS LESS 25%: \$ 8,660.56
 PARTS TOTAL: \$ 25,981.67

LABOUR & SPECIAL NETT ITEMS

*	TO SUPPLY 1 SET REAR REVERSE SENSOR H/W	\$ 300.00	X
*	TO SUPPLY REAR END PANEL SEALANT H/W	\$ 80.00	20/-
*	TO SUPPLY REAR FENDER SEALANT H/W	\$ 80.00	X
*	TO SUPPLY REAR WINDSCREEN SEALANT H/W	\$ 80.00	40/-
*	TO SUPPLY REAR WINDSCREEN DAMPING SEAL H/W	\$ 30.00	X
*	TO SUPPLY REAR FLOOR PANEL SEALANT H/W	\$ 80.00	20/-
*	TO SUPPLY TAIL LAMP PANEL SEALANT H/W	\$ 80.00	X
*	TO SUPPLY TAIL LAMP CLIPS H/W	\$ 50.00	X
*	TO SUPPLY REAR BUMPER CLIPS H/W	\$ 50.00	15/-
*	TO SUPPLY REAR END PANEL TOP GARNISH CLIPS H/W	\$ 50.00	10/-
*	TO SUPPLY REAR FENDER INNER TRIM CLIPS H/W	\$ 50.00	20/-
*	TO SUPPLY TAILGATE INNER TRIM BOARD CLIPS H/W	\$ 50.00	10/-
*	TO REMOVE ALL INTERIOR UPHOLSTERLY ITEMS TO FACILITATE REPAIRS	\$ 300.00	80/-
*	TO REMOVE & PANEL BEAT ALL DAMAGED ABOVE PARTS & PANELS	\$ 2,000.00	1200/-
*	TO RESPRAY NEW PAINTWORK FOR ALL DAMAGED AREAS	\$ 2,000.00	900/-
*	TO TUFF COAT DAMAGED AREAS	\$ 300.00	40/-
*	TO RNR REAR FENDER QUARTER GLASS TO FACILITATE REPAIRS	\$ 300.00	H/W
*	TO RNR REVERSE CAMERA	\$ 100.00	30/-
*	TO RNR REAR WINDSCREEN TO FACILITATE REPAIRS	\$ 250.00	120/-
*	TO RNR TAILGATE MECHANISM TO FACILITATE REPAIRS	\$ 200.00	60/-
*	TO RNR EXHAUST SYSTEM AND ATTACHMENT PARTS	\$ 250.00	H/W
*	TO CHECK & RE-FIX ALL ELECTRICAL WIRINGS	\$ 200.00	30/-
*	TO COMPUTERIZE DIAGNOSE FAULT CODES & CONTROL UNITS. RESET ALL MEMORIES TO FACTORY DEFAULT SETTINGS	\$ 300.00	H/W
*	TO RNR REVERSE SENSOR TO ASSIST WORK LOAD	\$ 120.00	H/W

LABOUR & S/N TOTAL: \$ 7,300.00

GRAND TOTAL ESTIMATED REPAIR COSTS (NON-INCLUSIVE OF 7% GST): \$ 33,281.67

9849.15

33666.55

01/03/2022 @ 1730hrs

Not Authorised

2/sum

1 nyan

6 days

LKK Auto



Check part prices.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: