SC1K224J000A-01 / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 19/04/2022 15:39 (SGT) SUBMITTED BY: Rohani VERSION: 2 (19/04/2022 16:38 (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.

- 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 19/04/2022 15:39 (SGT) Date of Accident 06/04/2022 21:27 (SGT) Exact Location of Accident Tyrwhitt Rd, Singapore Additional Location Information **EXISTING JALAN BESAR STADIUM** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Private use

Private car

No - Reporting only

Vehicle Registration Number SGX67361

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LEE SOCK YIAN NRIC No. S1459629A Email Address joannaleesy@gmail.com Mobile Phone No (Phone) +65-91891205

Alternative Phone No +65-98485875

VEHICLE PARTICULARS

Manufacturer Honda Model Airwave 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? Vehicle Category

Transmission CC

Auto 1500

**INSURANCE COMPANY** 

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive

Fleet Policy

Policy Number D21MTPV01008900

Cover Note Number

DRIVER

Name of Driver LIEW VOON HOW NRIC No. S1174395A

Date Of Birth 05/09/1956 Occupation Indoor Date Of Driving Pass 19/08/1982 Driving experience 39 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-98485875 Alt. Phone Number Email Address joannaleesy@gmail.com Address BLK 126 PASIR RIS STREET 11 #07-371 Address complement Postcode 510126 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 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 Was anybody injured in the Accident? 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 Pasir Ris Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005852999 Alt. Police Station Phone No (Fax) +65-65855261 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO STATEMENT AND SKETCH ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SJP5750P Vehicle Manufacturer Vehicle Model

Private car

Vehicle Variant
Vehicle Colour
Vehicle Category

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)	_

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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.
- 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.

Please	refer	40	Police	Report.	
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ation					
are the foregoing	particulars an	e true in a	overv respect		

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personne!



Sompo Insurance Singapore Pte. Ltd.

50 Rattles Place, #03-00 Singapore Lane Tomes, Singapore 0/86/23 Ter 6461 6565 | Fax: 6221 3302 | www.sempo.com.sg Co. Reg. No. 198905490E | GST Reg. No. M/300903196

Our ref : CMTD2201202/AGNESC

Date: 12-APR-2022

LEE SOCK YIAN

For Your Urgent Attention

BLK 126 PASIR RIS STREET 11 #07-371 SINGAPORE 510126

Dear Sirs

Accident on : 06-APR-2022

at / along ; ALONG TYRWHITT ROAD EXITING JALAN BESAR STADIUM

Involving

: SGX6736L/SJP5750H

We have received a claim in connection with the above accident and your vehicle SGX6736L was alleged to be involved.

Our records show that you have not reported this accident to us. If your vehicle was involved, please advise us the reason for not reporting to us immediately after the accident as this would constitute a breach of General Condition (4) of our policy which entitles us to repudiate all liabilities arising out of this accident.

Notwithstanding this breach, please proceed to any of our ExcelDrive Workshops or Accident Reporting Centres to file an accident report immediately. You may refer to your Policy or our website at www.sompo.com.sg for the list of workshops and reporting centres.

If you are not the driver at the material time of the accident, please request the driver to bring along this letter, police report (if any), driving licence and NRIC to report.

Please note that this letter does not amount to an admission of liability on the part of the Company. If we still do not hear from you within 14 days from the date of this letter, the matter will be referred to the Traffic Police for their necessary action.

- Please assist

If you have already made a report to us, kindly ignore our present request.

Please quote our claim reference when writing to us.

Thank you.

Yours truly

CHAN SHU HUI AGNES

Claims Executive DID : 63295327 Fax : 62213147

CC C G INSURANCE AGENCY

BLK 3025 UBI ROAD 3

#04-113

SINGAPORE 408653

REMNR



Our Ref: TP/IP/08257/2022

000067

Traffic Police 10 Ubi Avenue 3 Singapore 408865

LEE SOCK YIAN 126 PASIR RIS STREET 11 #07-371

Singapore 510126

IB Call Centre: 65470000

FAX: 65474883

Date: 11/04/2022

Dear Mdm

# CASE OF TRAFFIC ACCIDENT INVOLVING SGX6736L ALONG TYRWHITT ROAD ON 06 Apr 2022 @ 9.27 PM

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

- 2 If you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (http://www.police.gov.sg/epc).
- 3. Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.
- You may contact the Investigation Officer Sufiyan Bin Khairi at his / her office number: 65476148 or the supervisor Tan Chin Yong at 65476425 if you have any further queries.
- Thank you.

Yours faithfully, Sufiyan Bin Khairi Investigation Officer (Hit & Run Investigation) Traffic Police Singapore Police Force

This is a computer-generated letter. No signature is required.

A FORCE FOR THE NATION



1 /1

Sompo Insurance Singapore Pte. Ltd.

1.4

50 Parties Place, #C3 C0 Sargogore Land Teleor, #C3 C0 Sargogore Land Teleor, #G1 C0 Tel: \$451 6556 | Fax: 6/21 2307 | www.sampa.com.50 Co. Reg. No. 1990/54026 | £611 Reg. No. 1930090356

# Certificate of Insurance

U

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)

Certificate/Policy No.

: D21MTPV01008900

Insured

: LEE SOCK YIAN (NOT DRIVING)

Motor Vehicle (Registration No.): SGX6736L

Comprehensive - ExcelDrive Gold Plan

Policy Commencement Date

: 01 SEPTEMBER 2021 00:00

Policy Expiry Date

: 31 AUGUST 2022 23:59

Maximum Liability (Section I) : Market value at time of loss

Excess\*

: \$500 - Section |

Voluntary Excess\*

. NA

Windscreen Excess'

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

Persons or Classes of Persons entitled to drive"

Any other person who is driving on the Insured's order or with his permission but excluding the insured himself.

 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-traking, 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.

ExcelOrive 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 ExcelOrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226-3323.

We never you the Posts to Posts to Certificate relates is issued in accordance with (1) the provisions of the laster Vehicles (Three-Party Roles and Comprehending) Act (Chapter 189) and Part (V of the Transport Act, 1967 ((Asseption) and C) the policy terms, conditions and exceptions of the Private Natur Car Posts) Rect. MTP 30

Sompo Insurance Singapore Pte. Ltd.

Lui 20

Authorised Signatory

Date/Time of Issue : 21 JUNE 2021 10:07

### INFORTANT NOTICE

Keep the Certificate in your Mater Version.

Under the Marker Version. This effort Reduction Compensation and (Chapter 188), it shall be unlawful for any person to use or cause to permit any other person to use a Mater Version and any other person to use a Mater Version and other Version in the Second Second

intermediary Code & Name : 11004502 & IC GINGURANCE AGENCY IC Code: 228 JEKDM B44821M64A

Subject to GST wherever applicable





















Police Station Of Origin: Pasir Ris N.P.C

1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

1 of 3 Report No. T/20220419/2009

REPORT (	DF A TRAFFI	C ACCIDENT				
	ne Report N 022 09:03	Made:	Vide Report No.:	Station Diary No.: 25		
Informa	nt's Partic	ulars				
Name of Informant: LIEW VOON HOW			Address: APT BLK 126 PASIR RIS STREET 11 #07-371 SINGAPORI 510126			
	/ ID No.: 0 / S11743	95A	Contact No.: Home/Office: Mobile: 98485875			
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Male			Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: Hawker/Stall holder (prepared food or			Driving Licence Inform Class: 3	nation: Date of Expiry:		

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 06/04/2022 21:3	Type of Location: Car Park	
Location: TYRWHITT F Weather: Clear	ROAD	Road Surface:		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGX6736L	Car	HONDA			No Damage	0

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



Tel No: 1800-5852999

T/20220419/2009

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2 of 3 Report No. T/20220419/2009

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

CONTINUATION OF REPORT

Driver						
Name	LIEW VOON HOW			ID No		S1174395A
Related Vehicle	SGX6736L (Car)			Conta	ict No.	98485875
Hospital/Clinic	NIL .			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	charge	NIL		
No. of Days granted Medical Leave NIL			Degree o	finjury	NIL	

### Brief Details.

On 06/04/22 at about 9.27pm, I was exiting the gantry at along Tyrwhitt road however the machine could not detect my IU unit. As such i reversed a little so that it could detect my iu unit. The vehicle behind me had followed me too closely and it resulted in a minor tap to the front portion of his vehicle. I alighted my vehicle and made a check and saw that there were no damages to both my vehicle and the vehicle behind me. I gave a thumbs up to the driver. He did not alight or respond to me and I thought that it was ok, hence I drove off.

I wish to state that I do not have any in-car camera and no one was injured.

TP REF: TP/IP/08257/2022 IO: Sufiyan Bin Khairi NTEL: 65476148





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999 3 of 3 Report No. T/20220419/2009

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: G / Other S EVA SHERRIENA BINTI S AFFINDY	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/04/2022 09:03
Officer In Charge Of Case: TP / GIA / Other MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476201	Classification Of Case:
NP168	



### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 ~ 17:00
UEN: \$665500206 / GST Reg. No.: M400017735

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

# ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Name(asshownin NRIC): Loe Sock fran NRIC/FIN/Passport No: S17 4395A (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate Address Singapore( \_\_\_\_\_Mobile No. :\_\_\_\_\_ Contact (Tel) Email Address Date of Accident : Place of Accident : Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: po 2 0 Policyholder / Driver's Signature Reporting Centre Personnel's Signature Date: Name: NRIC/FINNo .:

Date: