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 18/04/2022 11:45 (SGT) Date of Accident 14/04/2022 21:35 (SGT) Exact Location of Accident Singapore Additional Location Information BEDOK SOUTH & BEDOK SOUTH AVE 2 JUNCTION Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SJZ3073P

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YEO LING MAY NRIC No. SXXXX386A Email Address YEOLM@SINGNET.COM.SG Mobile Phone No (Phone) +65-92340335 Alternative Phone No (Home) +65-92340335

VEHICLE PARTICULARS

Manufacturer

Model Vios 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 1500

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number A29136822AT2 Cover Note Number

DRIVER

Name of Driver YEO LING MAY NRIC No. SXXXX386A

Date Of Birth 09/01/1963 Occupation Indoor Date Of Driving Pass 20/10/1986 Driving experience 35 YEARS AND 6 MONTHS Gender Female Mobile Number (Phone) +65-92340335 Alt. Phone Number (Home) +65-92340335 Email Address YEOLM@SINGNET.COM.SG Address 10 LIMAU TERRACE Address complement Postcode 465808 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 Chain Collision 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? No 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? No **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 PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHD6130C Vehicle Manufacturer Toyota Vehicle Model

Prius

Taxi

Vehicle Variant Vehicle Colour Vehicle Category

Name of Driver	ONG SOON LEE
Passport No/FIN	SXXXX048H
Contact Number	(Phone) +65-90277836
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKT1287Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LOW IRENE
NRIC No	SXXXX673D
Contact Number	(Phone) +65-98292107
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_
140. Of a dooding of (including Direct)	-

SKETCH PLAN		
SEE ATTACHES	POLICE REPORT T/202	20415 7022
AND ATTACHED	SKETCH PLAN	
DESCRIBE CIRCUMASTANCES OF	THE ACCIDENT	
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	
SEE ATTACHED .	POLICE REPORT T/20220	415 / 7022
DECLARATION We declare the foregoing particula	rs are true in every record	
	is are true in every respect.	
yeohyMg 18/4/22		/
olicyholder's Signature 9=00 am	Driver's Signature	Reporting Centre Personnel's Signature
ate & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:

SKETCH PLAN

IMPORTANT NOTICE

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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.
- 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 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:
 - 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

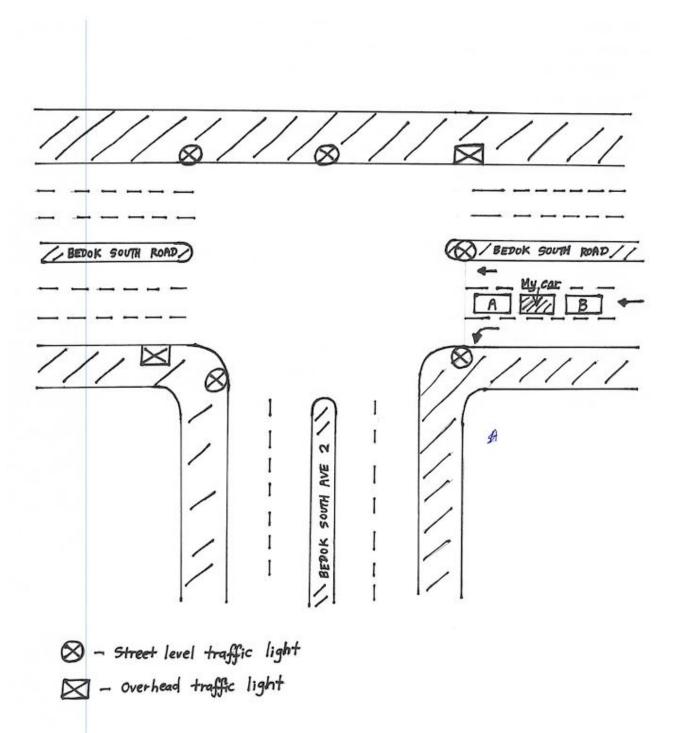
Date & Time:

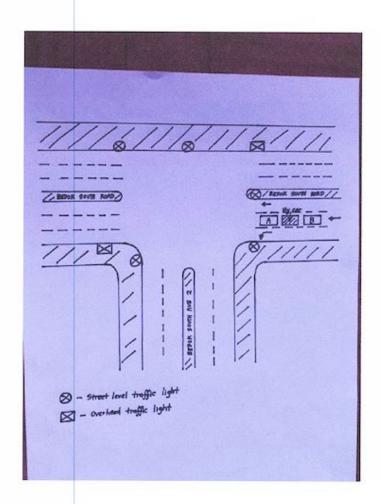
Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:









Date of Expiry:

1 of 4 Report No. T/20220415/7022

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

REPORT OF A TRAFFIC ACCIDENT

Chinese Occupation:

Date/Time Report Made: Vide Report No.: Station Diary No.: 15/04/2022 18:35 Informant's Particulars Name of Informant: Address: YEO LING MAY 10 LIMAU TERRACE SINGAPORE 465808 ID Type / ID No.: Contact No.: Home/Office: NRIC NO / S1584386A Mobile: 92340335 Nationality: Email: SINGAPORE CITIZEN yeolm@singnet.com.sg Sex: Age: Date of Birth: Type of Informant: 59 09/01/1963 Female Driver Race: Language: Institution / School Name:

Driving Licence Information:

English

Class: 3

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/04/2022 21:35	Type of Location T-Junction
Location: BEDOK SOU	TH ROAD			
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 60 Km/h
	Way		rking	

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SHD6130C	Taxi	TOYOTA	PRIUS	Maroon	Slightly Damaged	0
SJZ3073P	Car	TOYOTA	Vios		Seriously Damaged	0
SKT1287Y	Car	NISSAN	NOTE	Silver	Slightly Damaged	1





2 of 4 Report No. T/20220415/7022

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

CONTINUATION OF REPORT

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SJZ3073P	MSIG INSURANCE (SINGAPORE) PTE. LTD.	A 29136822 AT2	12/11/2021	11/11/2022		

Any Pedestrian II	rvolved: No					
				edestrian Crossing: NA		
Driver	is injured. IVIL		USE OF F	euestria	Closs	sing. IVA
Name	ONG SOON LEE			ID No.		S7045046H
Related Vehicle	SHD6130C (Taxi)			Contact No.		90277836
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	of	NIL	
Driver						ACTUAL VALUE OF THE PARTY OF TH
Name	YEO LING MAY			ID No).	S1584386A
Related Vehicle	SJZ3073P (Car)			Conta	act No.	92340335
Hospital/Clinic	NIL		Class Drivir Licen Expir	ig ce &	Class: 3 Date of Expiry: NIL	
Date	NIL		Date		NIL	
an error	ted Medical Leave	NIL	Degree o	of	NIL	
Driver		1	203.50		11112	
Name	LOW IRENE			ID No.		S0077673D
Related Vehicle	SKT1287Y (Car)			Conta	act No.	98292107
Hospital/Clinic	NIL			Class Drivin Licen Expir	g ce &	Class: NIL Date of Expiry: NIL
D-4-	NIL Date			-	NIL	
Date	INIL		Date		1311	



T/20220415/7022

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20220415/7022

CONTINUATION OF REPORT

Brief Details.

I drove along lane 2 of Bedok South Road heading towards Bedok Court and stopped about two metres behind a stationary Car A (SKT1287Y) at the Bedok South Road-Bedok South Ave 2 junction as the traffic light had already turned red; both Car A and my car (SJZ3073P) were stationary. The road was well-lit and the surroundings could be clearly seen. It was not raining.

About 2 seconds later, my car was hit from behind by Taxi B. The time was about 9:35pm on 14 April 2022. The sudden impact from Taxi B was strong, such that the impact caused my car to be flung forward and to hit Car A.

When I got out of my car, I saw a Taxi B parked behind my car. Taxi B had hit the back of my car and the damage to the rear of my car (including the car boot, exhaust pipe, bumper and misaligned right rear side door) was substantial (Refer to photos). I did not notice any passenger in Taxi B.

There was also damage to the front of my car when it hit Car A as a result of Taxi B hitting my car. Car A has a lady driver and lady passenger. I overheard the lady passenger mentioning that she was not sure if she was all right.

Soon after, an ambulance arrived and thereafter the traffic police officers also arrived.

I have pictures of the cars involved in the accident.





4 of 4 Report No. T/20220415/7022

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

CONTINUATION OF REPORT

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	KEI	6.11		an

Informant is not able to provide sketch

Not applicable The identity of the person making this report has been authenticated by Singpass. No signature is required. Signature Of Interpreter: Date/Time: Not applicable 15/04/2022 18:35

Signature Of Informant:

Officer In Charge Of Case: Classification Of Case: TP / TPIB /

MUHAMMAD ZICKIE BIN AHMAD SUYUTI Contact No.: 65476904

Signature Of Officer Recording The Report:

NP168