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 22/04/2022 16:08 (SGT) Date of Accident 21/04/2022 13:00 (SGT) Exact Location of Accident Singapore BEDOK NORTH ROAD (GRASS PATCH NEAR BEDOK TOWN Additional Location Information SEC SCHOOL) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW5908Z

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SIM PEI NI (SHEN PEINI) NRIC No S8243066J Email Address SPN_RACHEL@YAHOO.COM.SG Mobile Phone No (Phone) +65-98764762 Alternative Phone No +65-98764762

VEHICLE PARTICULARS

Manufacturer Maserati Model **GRANTURISMO** 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? Yes Vehicle Category Private car Transmission Auto CC 4200

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Nο Policy Number SP2001284953 Cover Note Number

DRIVER

Name of Driver TERRY LOW KOK HOW NRIC No S9434462Z Date Of Birth 18/09/1994 Occupation Indoor Date Of Driving Pass 19/01/2015 Driving experience 7 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-91901820 Alt. Phone Number Email Address TERRYLOW018@GMAIL.COM Address 528 BEDOK NORTH ST 3 #05-550 S460528 Address complement Postcode Is the driver the policyholder? No 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 No Collision 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? No 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? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHED REPORT ATTACHMENT(S)

Yes

No

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

SKETCH PLAN

IMPORTANT NOTICE

- Design range represents the details of the accident to speed up the claims process.
- 2. The Farmer of the Pellevholder and or the Authorised Driver.
- 3. In the additional relation as truthful and excurate as possible. Any willful marepresentation or withholding of meterial facts may place the additional to requisite policy flability.
- a, The security constitute of this Formby Insurance companies is not an admission of palicy flability on the part of the insurance companies.
- 5. Any falso reverting way be referred to the Police for Investigation.
- The reserving disc forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association
 of Shighting SIA1 for statitung and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the recreams of this report to the insurers, you hereby consont to the archiving of this report at the centre and to copies of the report having made evaluable allores sid.
- 8. Consent under the Personal Data Protection Act (PDPA)

funderstand, solmow ledge, agree and consent that :

- (a) 1.1/y insurer into wickshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and or process my personal data personal information set but 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(e) 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 yere 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;
- (B) carrying out and/or dealing with my instructions or responding to any enquiries by ma;
- (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, handing 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 Parsonal 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 abled outside of Singapore, for one or more of the above Purposes.

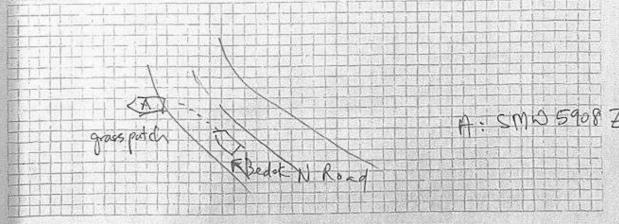
Policyholder's Signature / Date &

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

1001

Witnessed by Reporting Centre Personnel

Sketch Plan



04 21/4	12022	at orang	d I pm	d was	raining
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suddenly +	te car st	idded on	nto the	left side	-7
the road n	landed	on the	grass "	patch.	
			V		
eclaration					
We declare the foregoing particu	lars are true in every res	pect			
D	10				1





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

1 of 3 Report No. T/20220421/7043

REPORT OF A TRAFFIC ACCIDENT

	ate/Time Report Made: 1/04/2022 19:16		Vide Report No.: G/20220421/0101	Station Diary No.:
Informa	nt's Partic	ulars		
	Informant LOW KOK		Address: 528 BEDOK NORTH STREE	T 3 #05-550 SINGAPORE 460528
	/ ID No.: O / S94344	62Z	Contact No.: Home/Office:	Mobile: 91901820
National SINGAP	ity: ORE CITIZ	ΈN	Email: terrylow018@gmail.com	
Sex: Male	Age: 27	Date of Birth: 18/09/1994	Type of Informant: Driver	
Race: Chinese	0		Language: English	Institution / School Name:
Occupat Admin	ion:		Driving Licence Information: Class:	Date of Expiry:

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 21/04/2022 13:00	Type of Location Bend
Location: BEDOK NOR	TH ROAD			
Weather:		Road Surface:		Road Speed Limit;
Raining		Wet		70 Km/h
Raining Traffic Flow: Dual Carriage	Way	Traffic Control: Not Controlled		70 Km/h Traffic Volume: Light

Details of V	enicie invo	ivea				
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SMW5908Z	Car		111111111111111111111111111111111111111			0

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





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20220421/7043

CONTINUATION OF REPORT

Driver	H. State (Name)	XALES THE			
Name	TERRY LOW KOK HOW			ID No.	S9434462Z
Related Vehicle	SMW5908Z (Car)			Contact No.	91901820
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL Date		Date	NIL	
No. of Days granted Medical Leave NIL		Degree of	The second secon		

Brief Details.

On 21/04/2022 at around 1pm, it was raining and wet when I was driving along bedok north road. Suddenly the car skidded onto the left side of the road and landed on the grass patch



T/20220421/70

3 of 3

Report No. T/20220421/7043

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

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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.

Date/Time:
21/04/2022 19:16

Officer In Charge Of Case:
TP / TPIB /
NUR ADELINA BINTE MOHAMMAD FUAT
Contact No.: 65476066

NP168