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.

 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 26/05/2022 17:42 (SGT) Date of Accident 25/05/2022 12:20 (SGT) Exact Location of Accident Singapore Additional Location Information 8 MARTIN PLACE BASEMENT 2 CAR PARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF1927M

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner LIM SWEE CHONG NRIC No.

SXXXX135F

Email Address robertlimsc1927@gmail.com Mobile Phone No (Phone) +65-90611927

Alternative Phone No +65-90611927

VEHICLE PARTICULARS

Manufacturer **BMW**

Model Х3

Variant

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? Yes

Vehicle Category Private car

Transmission Auto

CC 1998

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Type of Coverage Comprehensive

Fleet Policy

Policy Number DMPCSNW00172912100

Cover Note Number

DRIVER

Name of Driver LIM SWEE CHONG

NRIC No. SXXXX135F Date Of Birth 16/07/1965 Occupation Indoor Date Of Driving Pass 24/03/1983 Driving experience 39 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-90611927 Alt. Phone Number +65-90611927 Email Address robertlimsc1927@gmail.com Address **BLK 8 MARTIN PLACE** Address complement #25-01 Postcode 237992 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 Collided into Motorcyclist 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? Yes Was any injured conveyed to hospital by ambulance? Yes 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 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 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT:E/2022 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident SD CARD WITH TRAFFIC POLICE Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number FBR2106Y Vehicle Manufacturer Vehicle Model

Vehicle Variant
Vehicle Colour

Vehicle Category	Motorcycle
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	UNKMOWN
Gender	-
Phone No	-
Address	_
Address Complement	_
Post Code	_
Approximate Age Years Old	_
Injuries Sustained	SLIGHT
Injured person in which vehicle?	FBR2106Y
Were seat belts worn?	_
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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.
- 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.
- 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.
- 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 law yers/faw 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
- (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.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel

Sketch Plan

8 Time

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I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel





1 of 2

Report No. E/20220525/7036

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000

Date/Time Report Made 25/05/2022 20:18	Vide Re	eport No.		Station Diary No.
Name Of Informant LIM SWEE CHONG ID Type / ID No.	8 MAR	TIN PLACE	#25-01 SINGAPO	RE 237992
NRIC NO / S1691135F	Home/Office: Mobile:			
Nationality SINGAPORE CITIZEN	Email Address robertlimsc1927@gmail.com			
Occupation	Sex	Age	Date of Birth	Race
Chief operating officer/General Manager	Male	56	16/07/1965	
Institution/School Name	Language English			Chinese
Date/Time Of Incident 25/05/2022 12:20 - 25/05/2022 13:40	Location Of Incident 8 MARTIN PLACE #25-01 SINGAPORE 237992			DE 027000
Brief details,	15.1171	III LAOL I	720-01 SINGAPOR	KE 23/992

I was at the carpark at my house and as I was approaching the turn, I saw 2 grab food motorcyclist at the front of the lobby at the handicap lot. Then I had to make another turn to my left to the parking lot which I was going to park at. (Route can be seen on the pictures I attached) When I arrived at the parking lot which I want to park at, I stopped my vehicle and turned on my hazard light to indicate that I am going to park my car. Before I drove forward to angle my vehicle to park the vehicle, I checked my surroundings to ensure that there was no car or people around me as usual. After the check was clear, I drove forward slowly and angle my car to the parking lot. Before I was even able to angle my car properly to the parking lot, I heard a bang and saw one of the grab food motorcyclist which I saw earlier (at the front of the lobby)

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: 25/05/2022 20:18
Officer In-Charge Of Case;	Classification Of Case:



E/20220525/7036

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220525/7036

fell on the floor. Then I immediately got off my vehicle to check on him saying "Are you okay?" but he didn't reply, so I went to my vehicle to get my phone to call the ambulance but I saw one of the security at my condo so I got their help to call for an ambulance before taking photos of the accident site with all our vehicles at the position where the accident occured (pictures in the attachments). Then I saw the other grab food motorcyclist (also the one I saw earlier at the lobby) come over to help the grab food motorcyclist that was knocked down. The other grab food motorcyclist and the security helped the injured grab food motorcyclist to move his motorcycle to one of the parking lots nearby. After which, we including myself, some of the condo securities, the injured grabfood motorcyclist, waited for the police and ambulance to arrive. When the ambulance arrive, the injured grabfood motorcyclist was sent to the hospital by the ambulance. Then the police that arrived took some pictures of the accident site but by the time they took these pictures, the motorcycle has already been shifted from the actual location where the accident took place but my car was still still parked at the original accident position. The police also got a statement from me (The report no. is /2/20220525/0065 by Winson Lim from Kampong Java NPC). The police also took with them the SD card which is from the recording device of my vehicle. The left side of my vehicle was the only part of my vehicle that suffered damages from this accident. (Can be seen from the pictures attached) Left side fenders, left side bumper, left side sport rim and fender liner are damaged (can be seen from pictures attached). The sports rim of my front left tyre was even chipped off (can be seen from the attached photos).

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Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
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Officer In-Charge Of Case:	Classification Of Case:













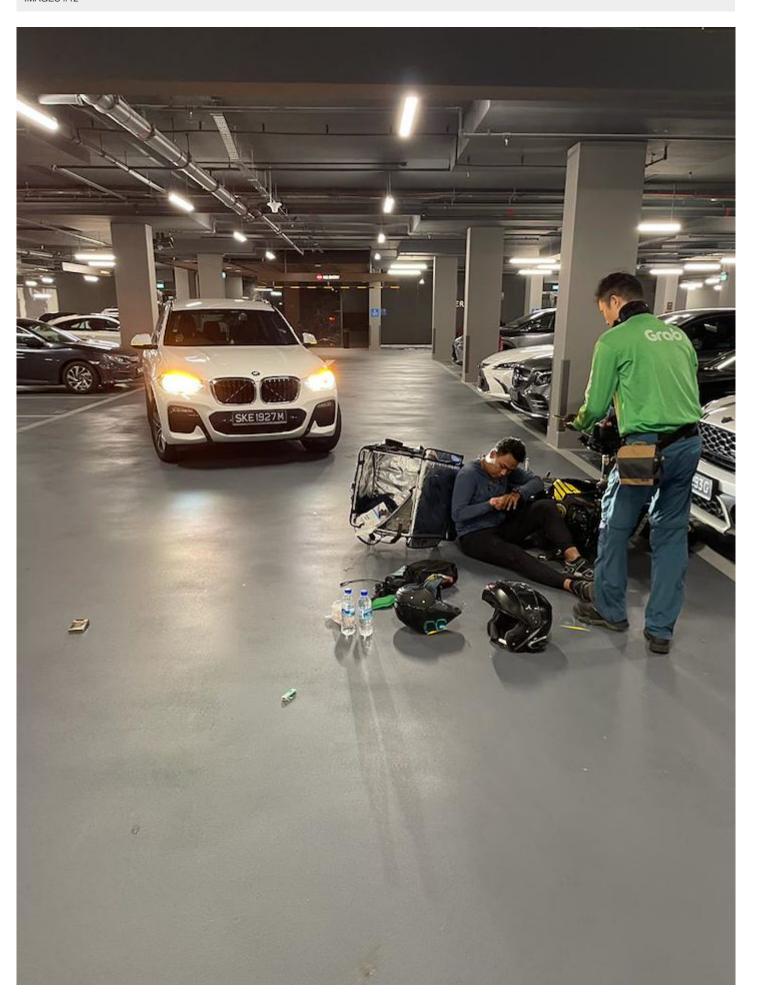


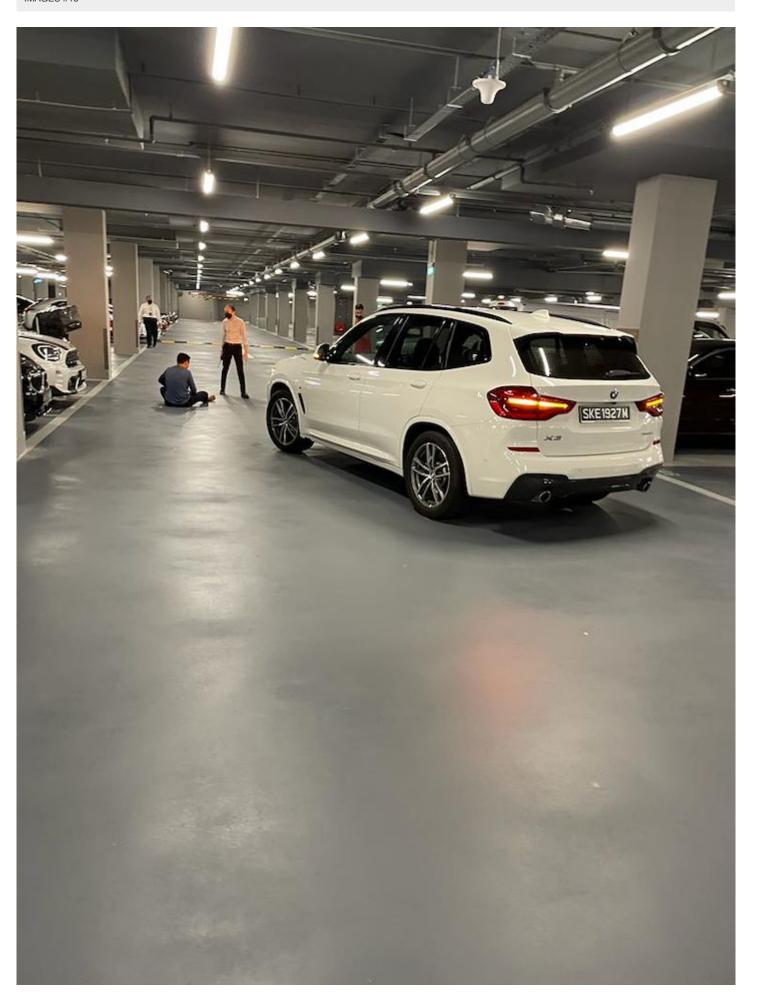






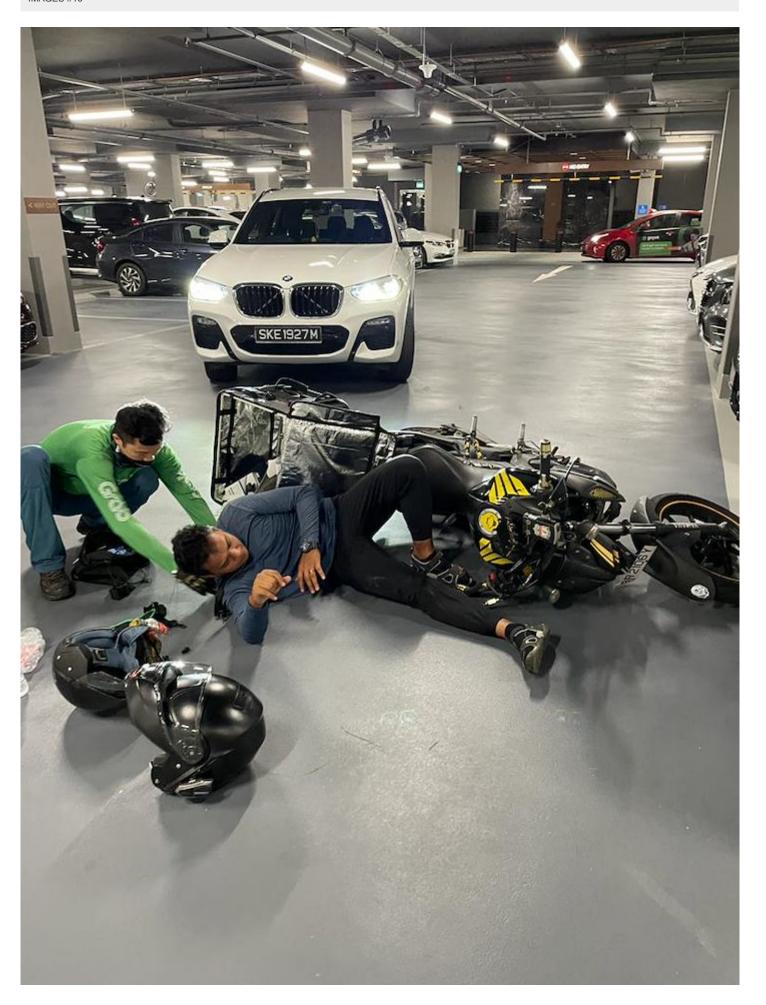
















1 of 2

Report No. E/20220525/7036

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NRIC NO / S1691135F	Home/Office: Mobile: 90611927			
Nationality SINGAPORE CITIZEN	Email Address robertlimsc1927@gmail.com			
Occupation	Sex	Age	Date of Birth	Race
Chief operating officer/General Manager	Male	56	16/07/1965	Chinese
nstitution/School Name	Language English			Onnese
Date/Time Of Incident 25/05/2022 12:20 - 25/05/2022 13:40	Location Of Incident 8 MARTIN PLACE #25-01 SINGAPORE 237992			DE 227002
Brief details,	15.10.11.11	IN LAUL	FEG-UT SINGAPUT	KE 23/992

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Officer In-Charge Of Case;	Classification Of Case:		





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220525/7036

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