

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 15/06/2022 10:25 (SGT)
Date of Accident 14/06/2022 10:50 (SGT)
Exact Location of Accident Ang Mo Kio St. 61, Singapore
Additional Location Information FILTER LANE TOWARDS AVE 6
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT3633G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LYDIA KOH
NRIC No S6933712J
Email Address teoyuxiang1998@gmail.com
Mobile Phone No (Phone) +65-97348880
Alternative Phone No +65-97348880

VEHICLE PARTICULARS

Manufacturer Honda
Model Civic
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? No - Claiming third party
Vehicle Category Private car
Transmission Manual
CC 1998

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SP2001637724-01
Cover Note Number -

DRIVER

Name of Driver TEO YU XIANG
NRIC No S9843952H

Date Of Birth	18/06/1998
Occupation	Outdoor
Date Of Driving Pass	20/04/2021
Driving experience	1 YEAR AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97348880
Alt. Phone Number	-
Email Address	teoyuxiang1998@gmail.com
Address	BLK 118 CLEMENTI STREET 13 #12-99
Address complement	-
Postcode	120118
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	SON-IN-LAW
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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE STATED TIME AND DATE, I WAS DRIVING MY VEHICLE (SLT3633G) ALONG ANG MO KIO STREET 51 FILTERING TOWARDS ANG MO KIO AVE 6. I STOP AND CHECK CLEAR FOR THE ONCOMING TRAFFIC. SUDDENLY, I FELT A HUGE IMPACT FROM MY REAR. I ALIGHTED MY CAR AND REALISED (SLL8370Z) HAD REAR ENDED MY VEHICLE. WE EXCHANGED PARTICULARS AND LEFT THE SCENE SHORTLY.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL8370Z
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	VEHICLE B
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1


Name of injured person	TEO YU XIANG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLT3633G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

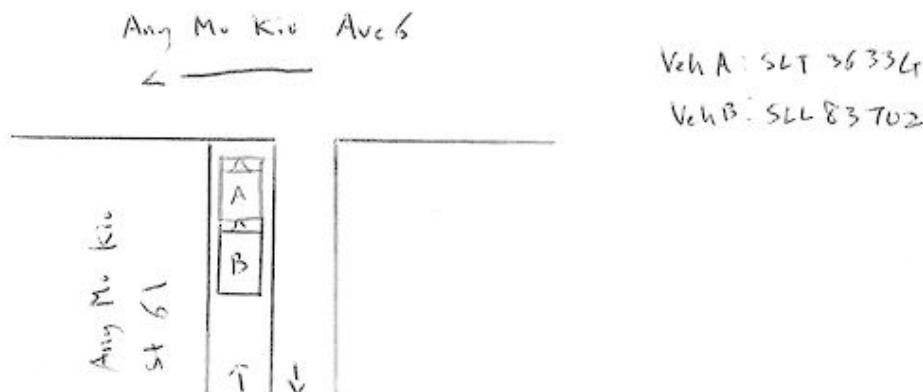
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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' 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



GARAGE 13


Describe Circumstances of the Accident

On the stated time & Date, I was driving my vehicle (SLT 363367) along Ang Mo Kio St 61 filtering toward Ang Mo Kio Ave 6 as I was about to exit to Ang Mo Kio Ave 6 I stop and check clear for the oncoming traffic. Suddenly I felt an huge impact from my rear I alighted my car and realized (SLL 83102) had rear ended my vehicle we exchange particular and left the scene shortly.

Declaration

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


 Policyholder's Signature / Date & Time


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

 Witnessed by Reporting Centre Personnel























Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2001637724-01
 Date of Issue : 2022-04-22
 Coverage : Comprehensive
 Policyholder : LYDIA KOH
 Period of Insurance : 14 April 2022 to 13 April 2023 (both dates inclusive)
 Registration No. : SLT3633G
 Chassis number of Vehicle : SHHFN23608U300179

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with the his/her permission

**Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.*

Limitation as to Use*:

Used only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- (a) use for hire or reward
 (b) use for racing, pace-making, reliability trials or speed testing
 (c) use for the carriage of goods (other than samples) in connection with any trade or business
 (d) use for any purposes in connection with the Motor Trade

**Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.*

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or Amendment, Act or Acts passed in substitution thereof.

22 April 2022
 Issued Date

Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000347 CASA MERAKI PTE LTD

Excess	: Own Damage Excess	SGD	1,000.00
	: Own Damage Excess outside of Singapore	SGD	NA
	: Windscreen Excess	SGD	100.00

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