

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 27/06/2022 09:57 (SGT)
Reported by Both
Date of Accident 23/06/2022 22:35 (SGT)
Exact Location of Accident Singapore
Additional Location Information LOWER DELTA ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDH9208U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner WONG MEI YEE
NRIC No S7237337E
Email Address SHARONWONG22@YAHOO.COM
Mobile Phone No (Phone) +65-96650990
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
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 1600

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 7210014422

DRIVER

Name of Driver WONG MEI YEE
NRIC No S7237337E
Date Of Birth 05/10/1972
Occupation Indoor

Date Of Driving Pass	29/04/1993
Driving experience	29 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96650990
Alt. Phone Number	-
Email Address	SHARONWONG22@YAHOO.COM
Address	7 SIGLAP ROAD #18-56
Address complement	-
Postcode	448909
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	Collision - Cross Junction
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?	Yes
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Marine Parade Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004428999
Alt. Police Station Phone No	(Fax) +65-62447678
Police Station Address	300 Marine Parade Road Singapore 449296
Was notice of intended Prosecution given?	No
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?	Yes
Reasons for not uploading a video of the accident	WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5962E
Vehicle Manufacturer	Toyota
Vehicle Model	Prius

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	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

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

SKETCH PLAN

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6. This report will be forwarded by the insurers to 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' 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

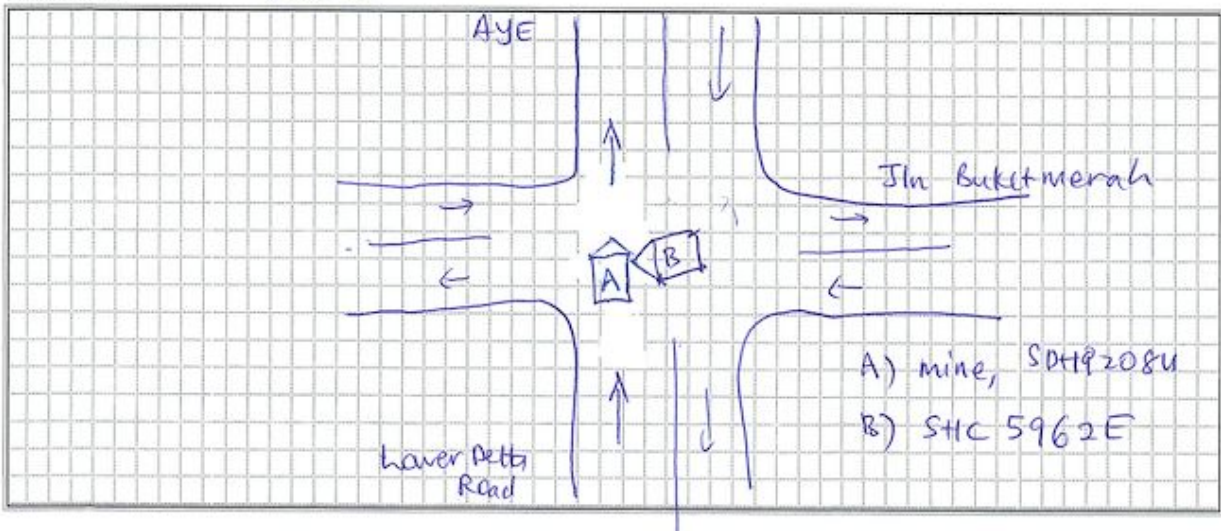
 24 June / 1650hs

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

 24 June / 1650hs

Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)

 Francis Cher
 Motor Claims Assessor
 Borneo Motors (S) Pte Ltd

Sketch Plan



Describe Circumstance of the Accident

Please refer to attached police report.

Declaration

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



Policyholder's Signature / Date & Time

24 June / 1650hrs



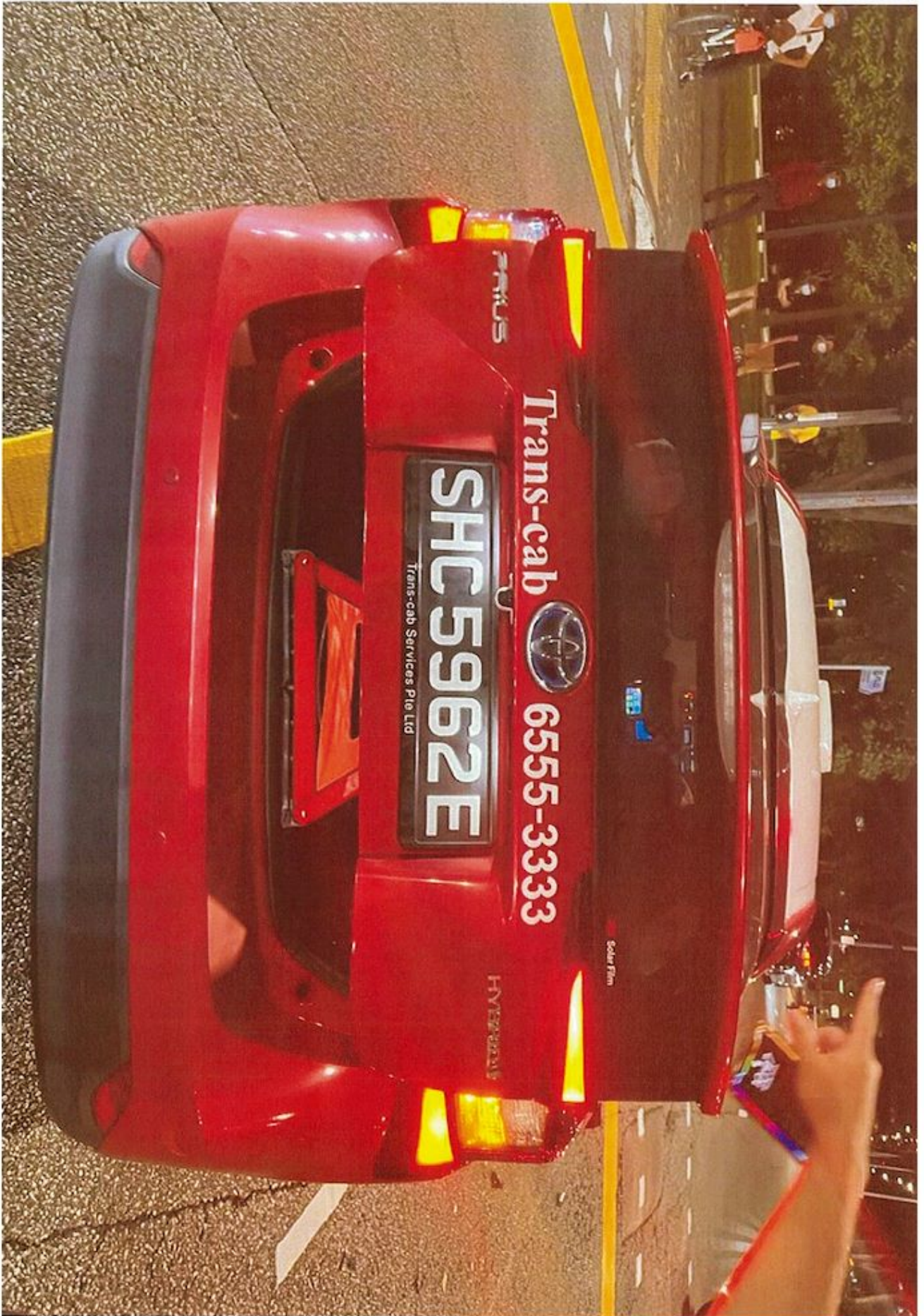
Driver's Signature (if driver is not the policyholder) / Date & Time

24 June / 1650hrs

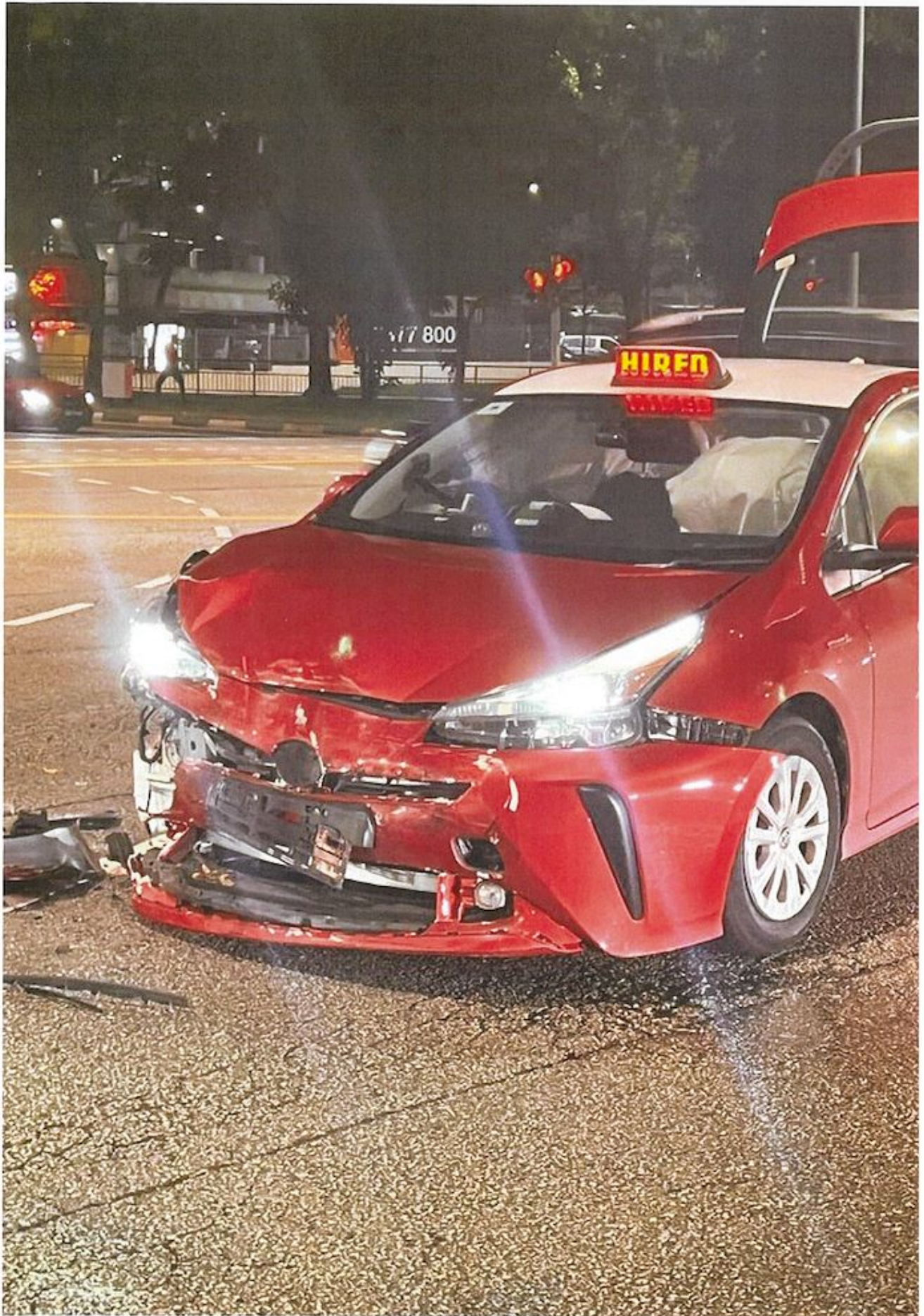


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Francis Cher
Motor Claims Assessor
Borneo Motors (S) Pte Ltd

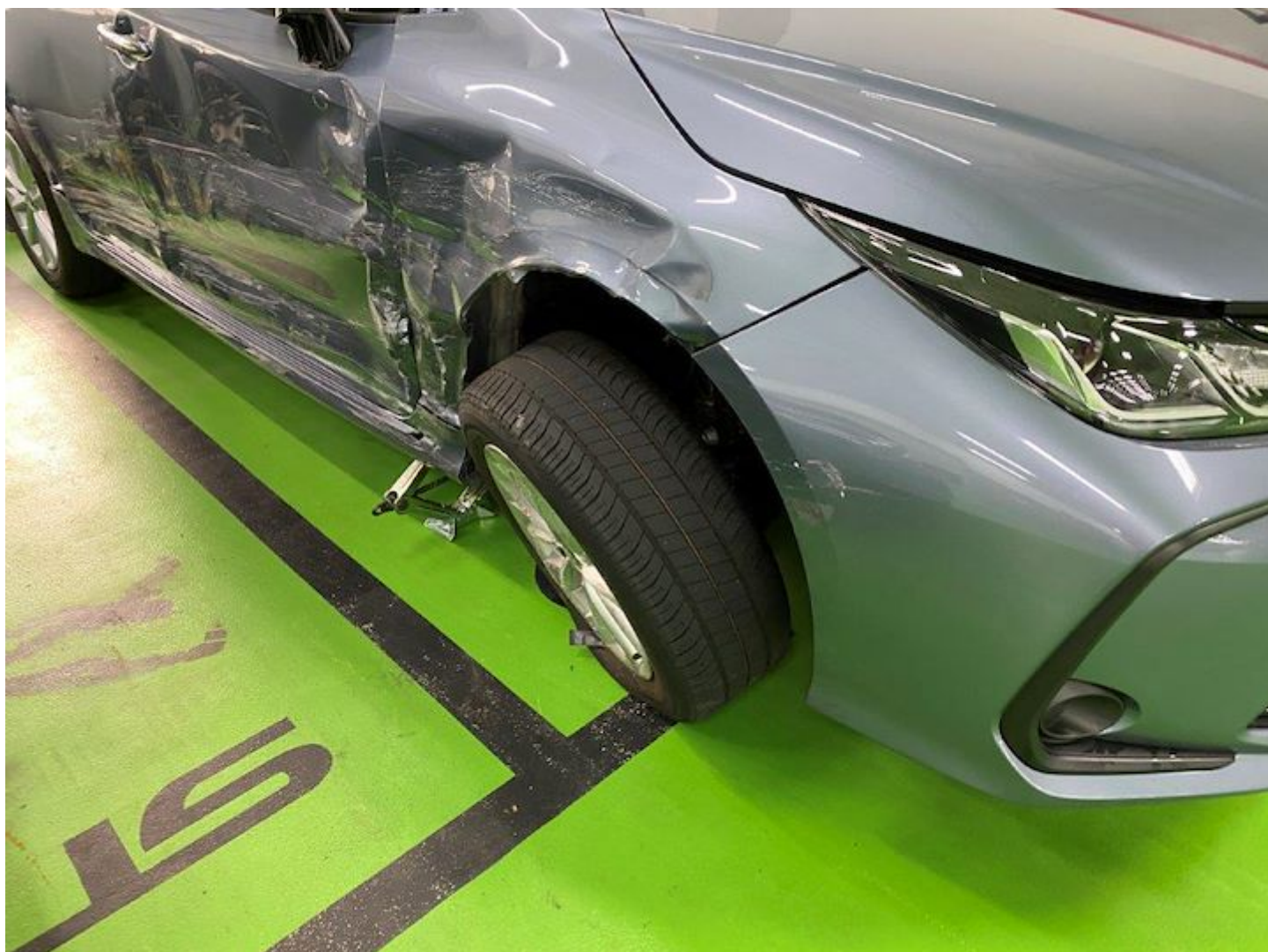


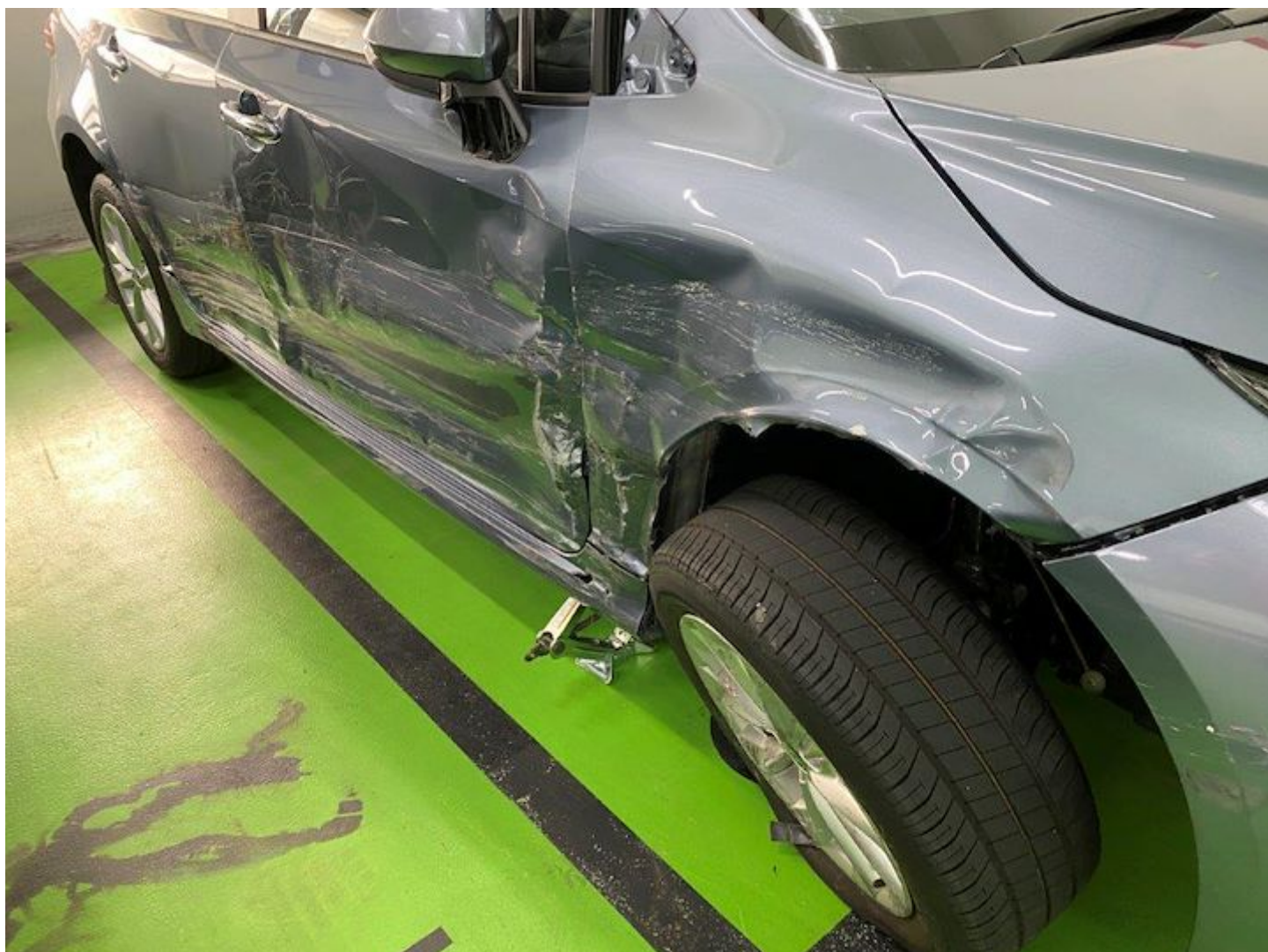


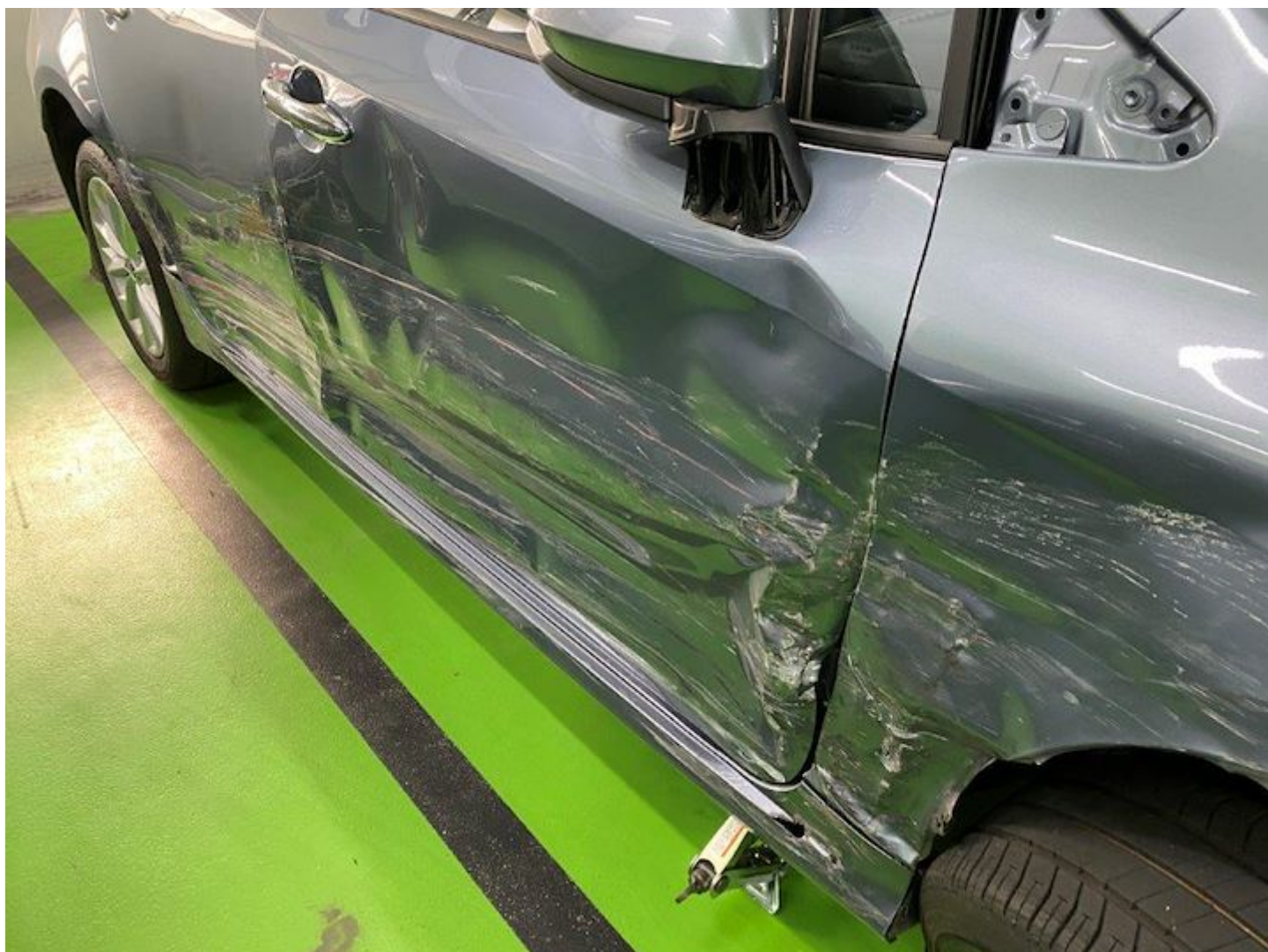


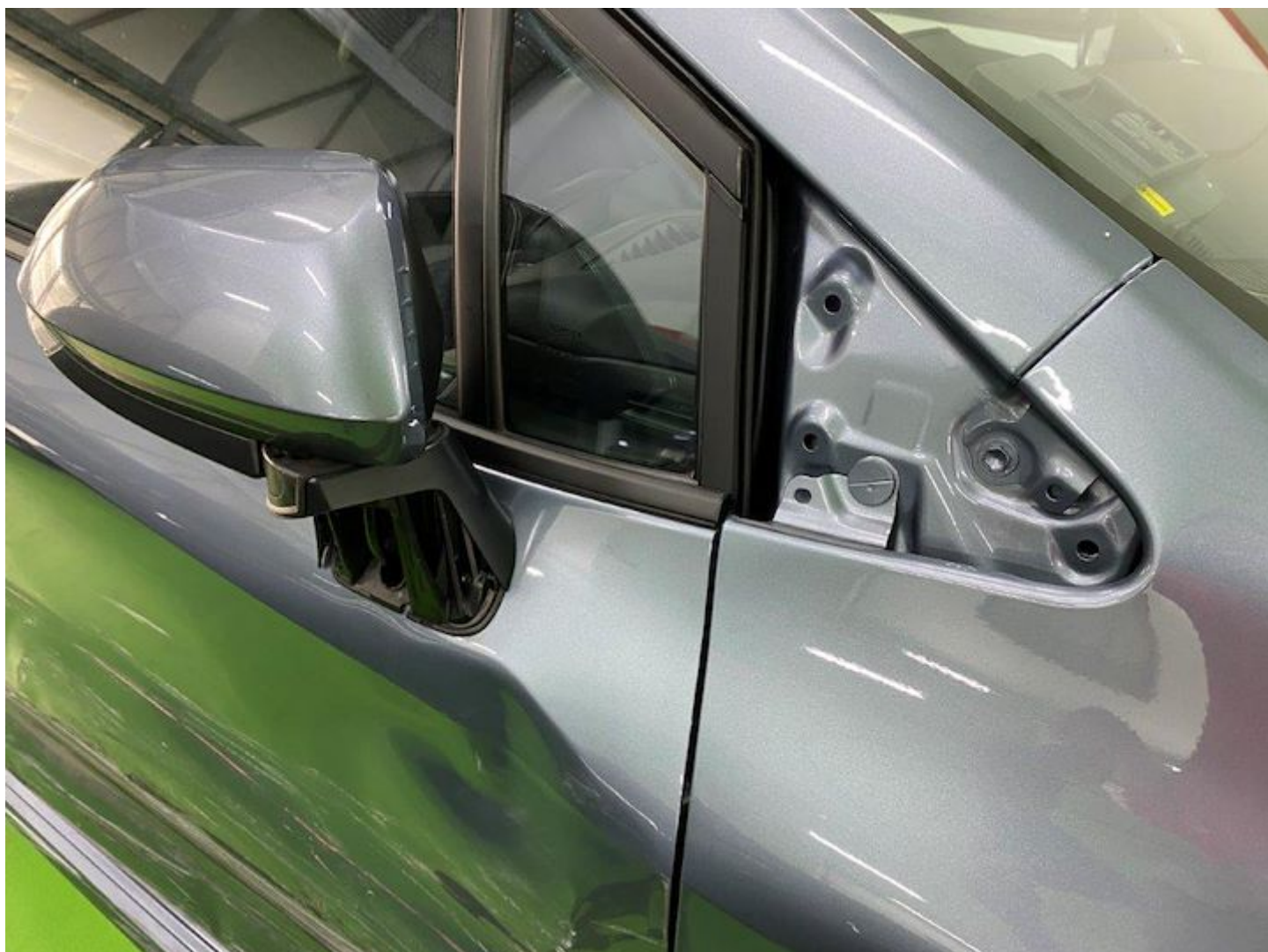






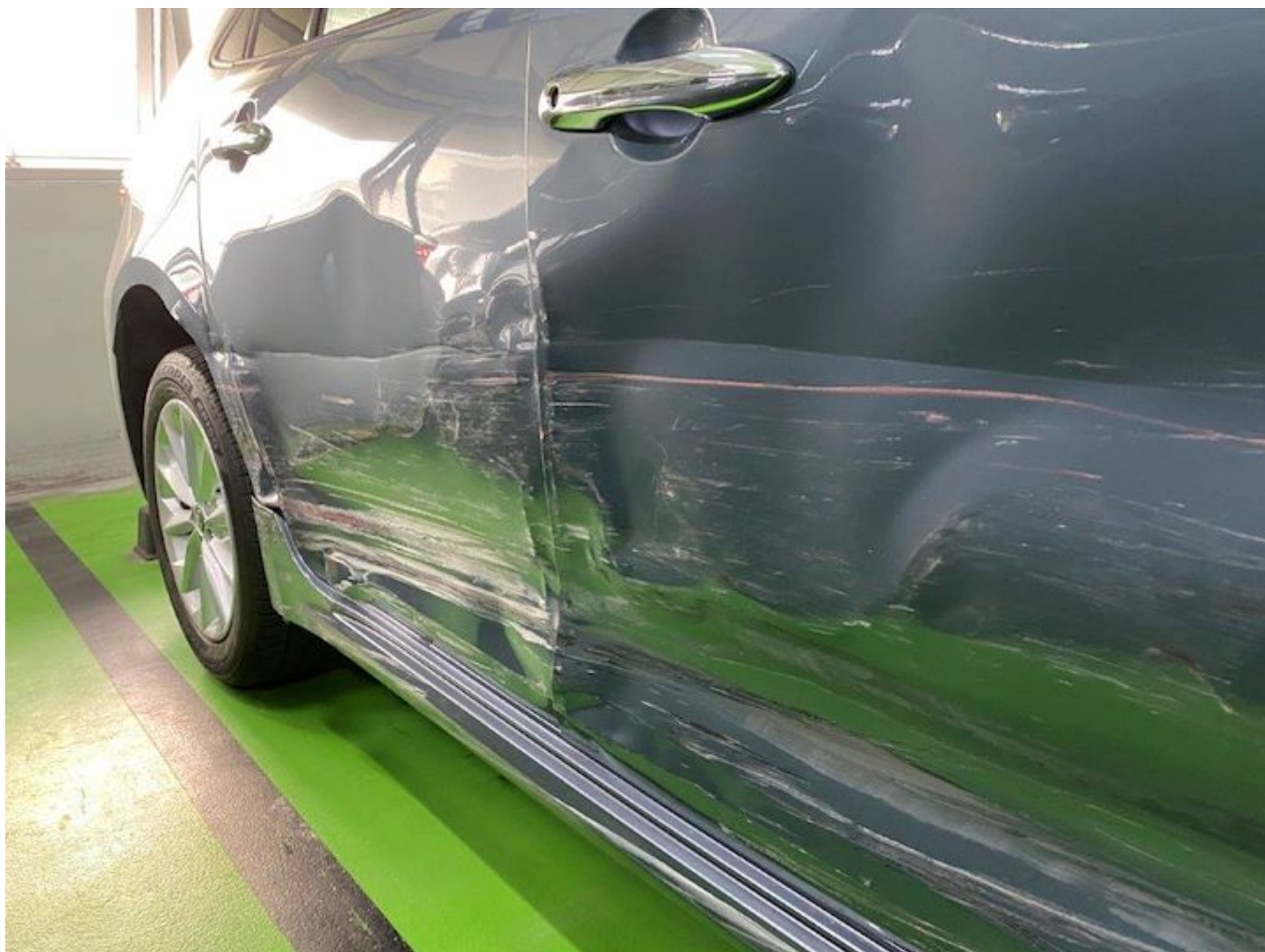














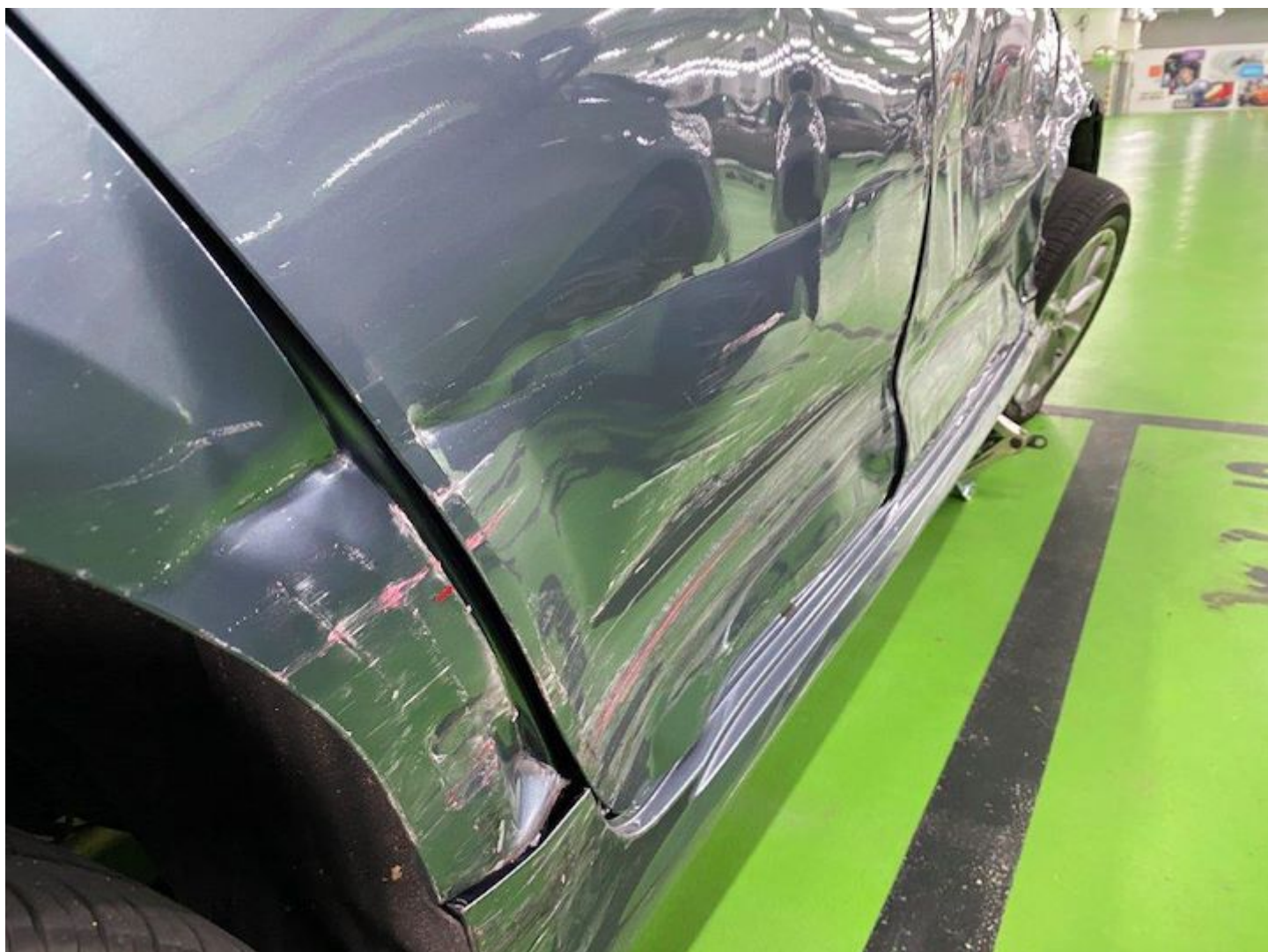




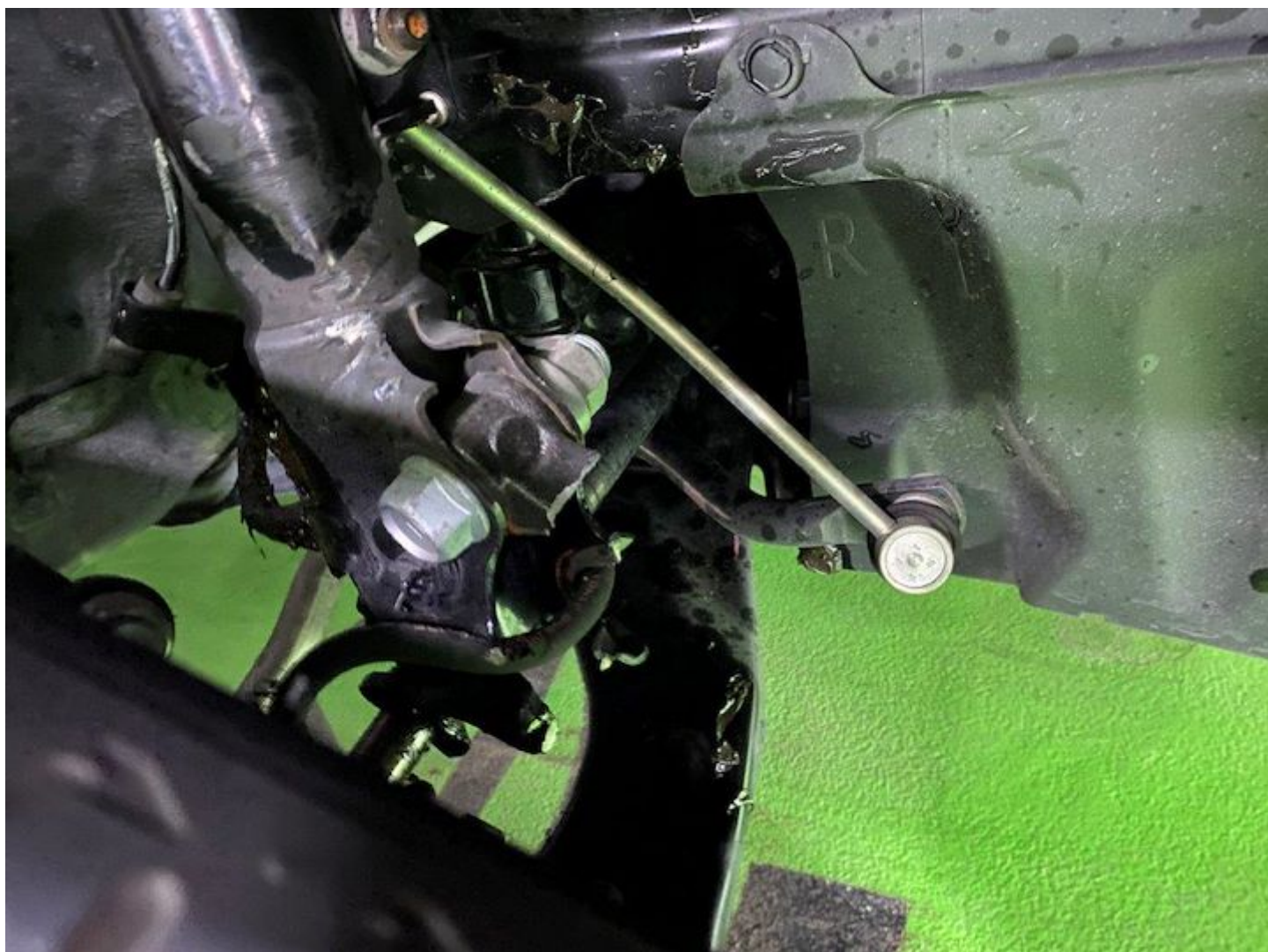


























**SINGAPORE
POLICE FORCE**



T/20220624/2065

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

1 of 4

Report No. T/20220624/2065

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/06/2022 16:14		Vide Report No.: D/20220623/0111		Station Diary No.: 30	
Informant's Particulars					
Name of Informant: WONG MEI YEE			Address: 7 SIGLAP ROAD #18-56 SINGAPORE 448909		
ID Type / ID No.: NRIC NO / S7237337E			Contact No.: Home/Office: Mobile: 96650990		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 49	Date of Birth: 05/10/1972	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: BANKER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 23/06/2022 22:35	Type of Location:
Location: LOWER DELTA ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SDH9208U	Car	TOYOTA	COROLLA ALTIS STANDARD (AUTO)(2W D)	Grey	Totally Damaged	0
SHC5962E	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20220624/2065

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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Report No. T/20220624/2065

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDH9208U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210014422	09/02/2021	08/02/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WONG MEI YEE	ID No.	S7237337E
Related Vehicle	SDH9208U (Car)	Contact No.	96650990
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	23/06/2022	Date Discharge	24/06/2022
No. of Days granted Medical Leave	05	Degree of Injury	Serious

Brief Details.

On 23/06/2022 at about 2236hrs, I was driving along Lower Delta Road towards Ayer Rajah Expressway (AYE). I was alone at that point of time.

My headlights were on, and I was driving at a slow speed. As I was approaching the traffic light junction of Lower Delta Road and Jalan Bukit Merah, the traffic light was green, and I continued to drive straight. I cannot remember exactly which lane I was driving but I believe it is somewhere on the left side. Suddenly, I felt a car hitting the front wheel / driver seat area of my car with great force. I also heard a loud bang. I was in a shock, but my hands were still holding onto the steering wheel. My car continued forward and steered slowly towards the right side. Eventually, my car stalled on the right lane.

I managed to get out from my car. I felt a sensation that the right half of my body had endured a great impact. I felt a discomfort at my spine and hip. I then saw the taxi about 50 meters away from my car. I noticed that the airbags of the taxi were activated.

Awhile later, Traffic police and Paramedics came and attended to us. Traffic police then took my SD card as I have an in-car camera in my car. I was then conveyed to Singapore General Hospital. I started to feel pain in the neck especially the right half. I felt a bit dizzy and felt discomfort at the spine and hip. I was subsequently given a CT scan of the brain and X-ray of the neck and entire back and spine. I was given 5 days of Medical Leave.

I wish to state that my front right tire was damaged badly, and the axle was broken. I was unable to close the driver's door after I opened it to leave the car. I also could not open the back door.



**SINGAPORE
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300 Marine Parade Road SINGAPORE
449296
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T/20220624/2065

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Report No. T/20220624/2065

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20220624/2065

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Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

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Report No. T/20220624/2065

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 / SGT 3 MUHAMMAD IDRIS BIN MOHD ISMAIL 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 24/06/2022 16:14
Officer In Charge Of Case: TP / GIT / SGT 3 MUHAMMAD ISMAIL BIN AMZAH Contact No.: 65476185	Classification Of Case:

NP168



SINGAPORE POLICE FORCE ACKNOWLEDGEMENT SLIP

Ref: Report No: 012022 0623/0111

I, SSGT 7110103 IRAIMI
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)
of TRAFFIC POLICE
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 01 x SANDISK ULTRA 32GB memory card
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from CDU LIMEE HIAN UP: 96398840
(Name, NRIC or Passport No. / Rank and No.)
of S7D9011E
(Address / Police Station / NPC / NPP)
on 23/6/22 at 2330425
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

[Signature]
(Signature)
CDU LIMEE HIAN
(Name, NRIC or Passport No. / Rank and No.)

Received by:

[Signature]
(Signature)
SSGT 7110103 IRAIMI
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: I.O: ISMAIL - 65476185
* TO CALL I.O ONCE DISCHARGED.



CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : WONG MEI YEE (HUANG MEIYI)
Period of Insurance : 09 Feb 2021 To 08 Feb 2023
Engine No. : 1ZR0G37279
Chassis No. : MR2BE3BE500012223

Vehicle No. : SDH9208U
Policy No. : 7210014422
Endorsement No. : 000000000427335
Issued Date : 29 Dec 2021

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2021
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$53,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

WONG MEI YEE (HUANG MEIYI) - \$600 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188

2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Toyota Financial Services Singapore Pte Ltd

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1999 (Malaysia).

0504667224

INCHCAPE AUTO TOYOTA - BSTL045

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPR86

78 Shenton Way #09-16 AIG Building 8079120 | T: +65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Wong Mei Yee
 VEHICLE NUMBER : SDH 92084
 DATE/TIME OF ACCIDENT : 23 June 2022 / 2235hrs.
 PLACE OF ACCIDENT : Lower Delta Road / Jln Bukit Merah
 THIRD PARTY VEHICLE (IF ANY) : SHC 5962 E Junction

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Start : Ridley Park
 Destination : Siglap road

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Right side

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

Yes. / SGH / NO

Name:

Wong Mei Yee

I Affirmed The Above Information Is Given To My Best Knowledge.