

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 11:55 (SGT)
Reported by Both
Date of Accident 24/06/2022 21:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information PIE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLJ9760K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HOR KIAN SOON
NRIC No S8483831D
Email Address json_hor@hotmail.com
Mobile Phone No (Phone) +65-83218155
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Qashqai
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 1200

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number P10308326R02

DRIVER

Name of Driver HOR KIAN SOON
NRIC No S8483831D
Date Of Birth 22/11/1984
Occupation Indoor

Date Of Driving Pass	22/05/2012
Driving experience	10 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-83218155
Alt. Phone Number	-
Email Address	json_hor@hotmail.com
Address	APT BLK 530C PASIR RIS DRIVE 1
Address complement	#12-390
Postcode	513530
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	5
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	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

SEE ATTACHED SKETCH PLAN, PHOTO AND POLICE REPORT

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	VIDEO FOOTAGE TAKEN BY THE TRAFFIC POLICE FOR FURTHER INVESTIGATION. ACKNOWLEDGEMENT RECEIPT REPORT NO. G/20220624/0205 DATE:24.06.2022 22:10 HRS RECEIVED BY: POLICE OFFICER MR LIM

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP7593H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car
Name of Driver	TANG YEE TAK
Contact Number	(Phone) +65-98503368
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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SJA3963C
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SHD104T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Taxi
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? SJA3963C
 Were seat belts worn? No
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person HOR KIAN SOON
 Gender Male
 Phone No (Phone) +65-83218155
 Address APT BLK 530C PASIR RIS DRIVE 1
 Address Complement #12-390
 Post Code 513530
 Approximate Age Years Old -
 Injuries Sustained CUT ON THE RIGHT ARM, HEADACHE WITH ACHING OVER
 THE CHEST REGION AND THE LEFT KNEE CUT, LOWER
 ABDOMINAL PAIN AFTER THE ACCIDENT
 Injured person in which vehicle? SLJ9760K
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

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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
 27/6/22
 10.07 am

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

WITNESSED BY REPORTING CENTRE PERSONNEL
 (Name as in NRIC/ID card)
 FINER ALTON SO
 GYXX 824L

Sketch Plan

A - UNKNOWN	→	E	D	C	B	A
B - SJA 3963C	→					
C - SHD 104T	→					
D - SLJ 9760K	→					
E - SLR 7593H	→					

Describe Circumstance of the Accident

Please refer to Police Report

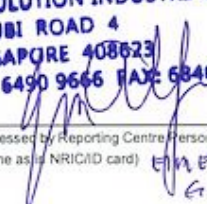
Declaration

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

 27/6/22
Policyholder's Signature / Date & Time
10.07 am

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

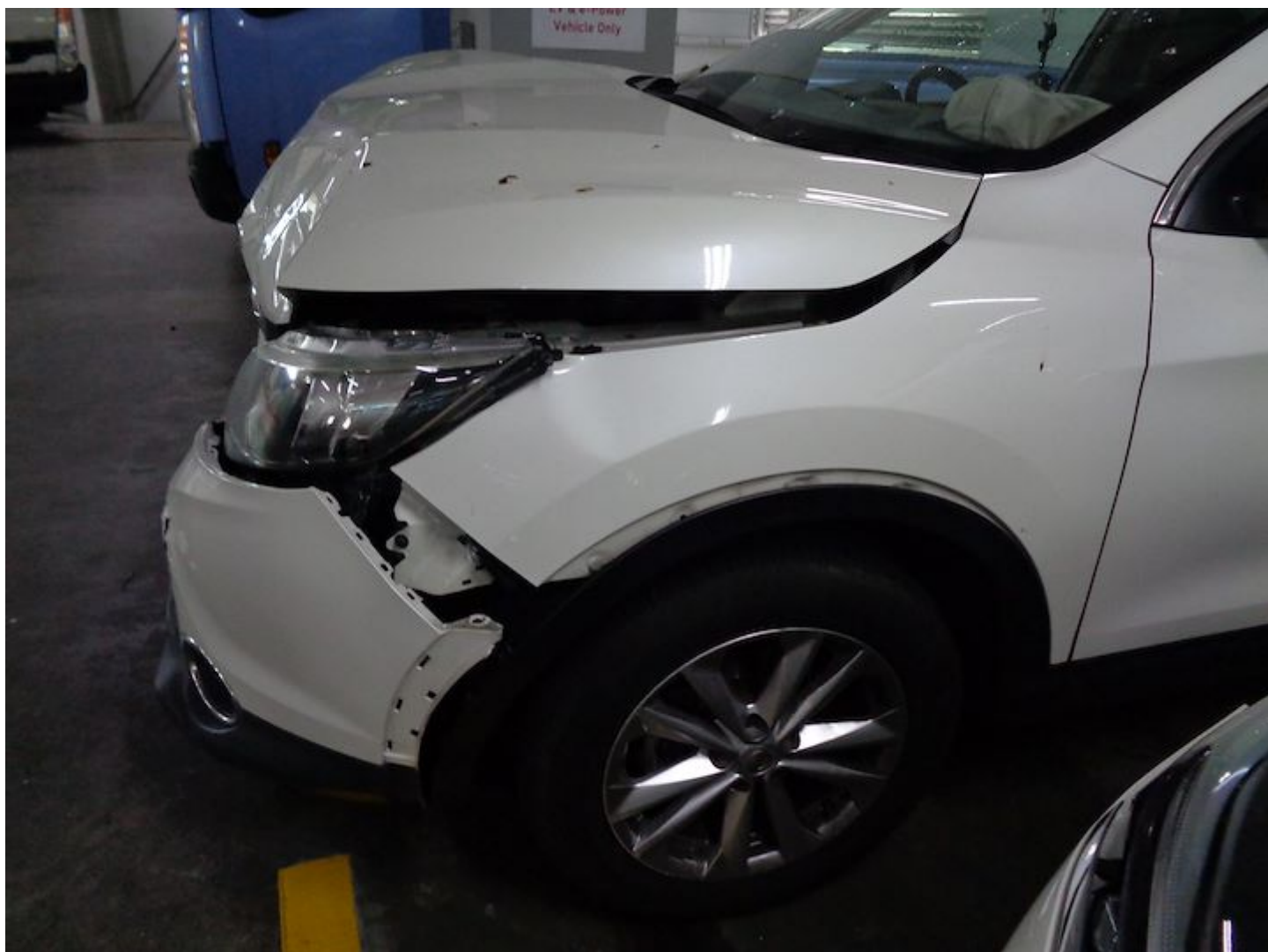
AUTOLUTION INDUSTRIAL PTE LTD
19 UBI ROAD 4
SINGAPORE 408623
TEL: 6490 9666 FAX: 6846 7483

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)  EIMER ALFONSO
GXYYX824L



























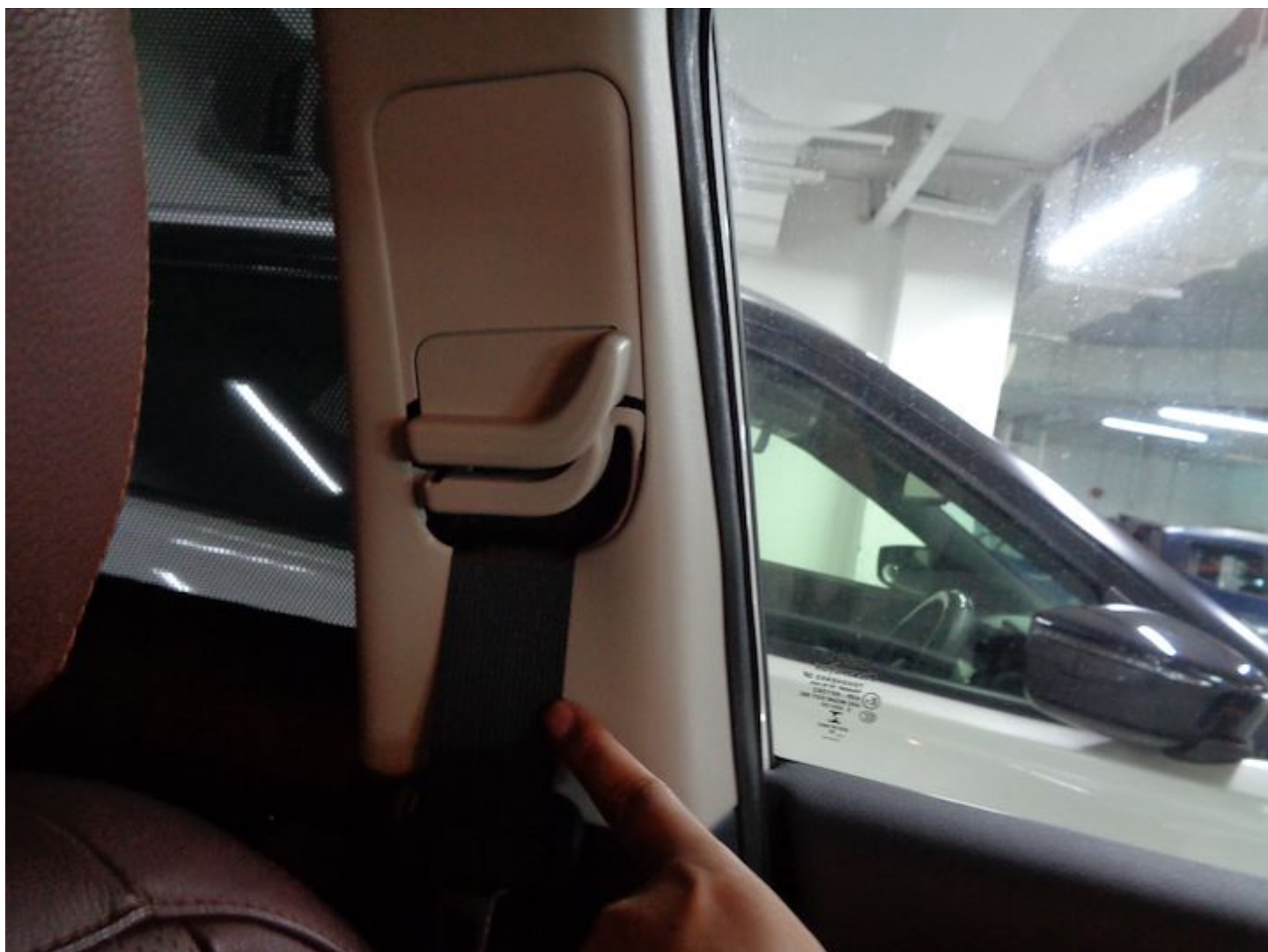




















































**SINGAPORE
POLICE FORCE**



T/20220625/7003

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

1 of 3

Report No. T/20220625/7003

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/06/2022 10:06		Vide Report No.: G/20220624/0205		Station Diary No.:	
Informant's Particulars					
Name of Informant: HOR KIAN SOON			Address: 530C PASIR RIS DRIVE 1 #12-390 SINGAPORE 513530		
ID Type / ID No.: NRIC NO / S8483831D			Contact No.: Home/Office: Mobile: 83218155		
Nationality: SINGAPORE CITIZEN			Email: JSON_HOR@HOTMAIL.COM		
Sex: Male	Age: 37	Date of Birth: 22/11/1984	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/06/2022 21:30	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Multiple cars				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SLJ9760K	Car	NISSAN	QASHQAI+1 .2+DIG- T+CVT+ABS +2WD+5DR	White	Seriously Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20220625/7003

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

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Report No. T/20220625/7003

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLJ9760K	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10308326R02	01/01/2022	31/12/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	HOR KIAN SOON		ID No. S8483831D
Related Vehicle	SLJ9760K (Car)		Contact No. 83218155
Hospital/Clinic	CHANGI GENERAL HOSPITAL		Class of Driving Licence & Expiry Class: 2B,3 Date of Expiry: NIL
Date	25/06/2022		Date 25/06/2022
No. of Days granted Medical Leave		03	Degree of Slight

Brief Details.

I was travelling home by PIE towards Changi, I was driving at lane 1 within the road speed limit, suddenly I saw the car (SHD104T) in-front of me hit another car and stopped, I tried to break but can't manage to stop my car and hit the car in front. I was also hit by another car (SLP7593H) behind. The accident happened at lamp post 437/2A.

There were 5-6 cars involved in the accident.

I had handed over the memory card in my in-car camera to the Traffic Police attended to this accident.



**SINGAPORE
POLICE FORCE**



T/20220625/7003

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

3 of 3

Report No. T/20220625/7003

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

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

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
25/06/2022 10:06

Classification Of Case:

NP168

It pays to choose

**Budget
Direct**
insurance

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10308326R02

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10308326R02 (Comprehensive / Named Driver Plan / Any Workshop)

1) Vehicle Registration Number	:	SLJ9760K
Chassis Number	:	SJNFEAJ11U1754591
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	01/01/2022 (00:00)
3) Date / Time of Expiry of Insurance	:	31/12/2022 (23:59)
4) Excess (i) Policy	:	S\$ 0.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Hor Kian Soon
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Hor Kian Soon(22/11/1984)
Named Driver(s) / Date of Birth	:	Jiang Yao (23/07/1984)
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.		
8) Finance Company	:	DBS Bank Ltd

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on
 15/12/2021

Auto & General Insurance (Singapore) Pte. Limited
Trading as Budget Direct Insurance

Simon Birch
 Chief Executive Officer

 Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg