SN072278000F / NTUC Income Insurance Co-operative Ltd ENTRY DATE & TIME: 08/07/2022 14:09 (SGT) SUBMITTED BY: Lim Puay Kiat, Ignatius VERSION: 1 (08/07/2022 14:09 (SGT))

© SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

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

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

08/07/2022 14:09 (SGT)

Driver

08/07/2022 12:00 (SGT)

Singapore

PIE (CHANGI) AT STEVENS ROAD

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

YN5724S

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

CHYE THIAM MAINTENANCE PTE LTD

198801700E

HELEN_WU@CHYETHIAM.COM

(Phone) +65-86708979

VEHICLE PARTICULARS

Manufacturer

Model

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? Vehicle Category

Transmission

CC

OTHERS

OTHERS

Employment

No - Reporting only

Commercial vehicle

Auto 3980

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

NTUC Income Insurance Co-operative Ltd

5108281586-03

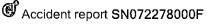
DRIVER

Name of Driver NRIC No

Date Of Birth

Occupation

TAN NAM SOON S0203660F 19/10/1952 Outdoor



Date Of Driving Pass

Driving experience

Gender Mobile Number

Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No. Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance? 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?

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

I WAS DRIVING ALONG PIE (CHANGI) ON THE CHEVRON MARKING AS I WAS CLEANING THE ROAD. SUBSEQUENTLY, AS I WAS MOVING WITHIN THE CHEVRON, I EXPERIENCED A COLLISION FROM THE REAR OF MY VEHICLE.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Yes

23/12/1978

#03-195

760249

Employee

FBM6817D

No

Yes

Clear

Dry

No

No

Yes

Νo

No

No

2

43 YEARS AND 7 MONTHS

HELEN_WU@CHYETHIAM.COM **BLOCK 249 YISHUN AVENUE 9**

NTUC Income Insurance Co-operative Ltd

Collision - Change/cross lane

(Phone) +65-91708733

Yes

ADV TO SUBMIT TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

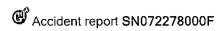
Vehicle Variant

Vehicle Colour

Vehicle Category

SMB5068H

Bus



PASSENGER 1

Name UNKNOWN Gender Male

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And a second sec	
Refer to GEARs	
7,3,3,1,0	
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	and the state of t
4444	
Declaration	
We declare the foregoing particulars are true in every respect.	
Sance Tile	ζ ,
(人)	Jama Aline Line
200 3160	Ignatius Lim

Driver's Signature (d driver is not the policyholder) / Date

08/07/2022, 1500

Policyholder's Signature / Date & Time

2

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

SKETCH PLAN

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 Actual Driver.
- Information provided must be as <u>further and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for investigation.
- 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
- 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)

Lunderstand, 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 enquines 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 frms, 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.

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Pol cyholder's Signature / Date & Time

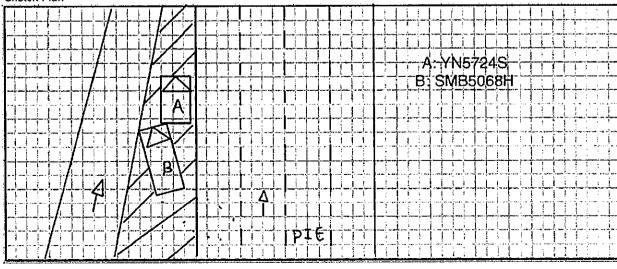
J.

Driver's Signature (if driver is not the policyholder) / Date $^{8.7 me} - 08/07/2022, \ 1500$

Ignatius Lim

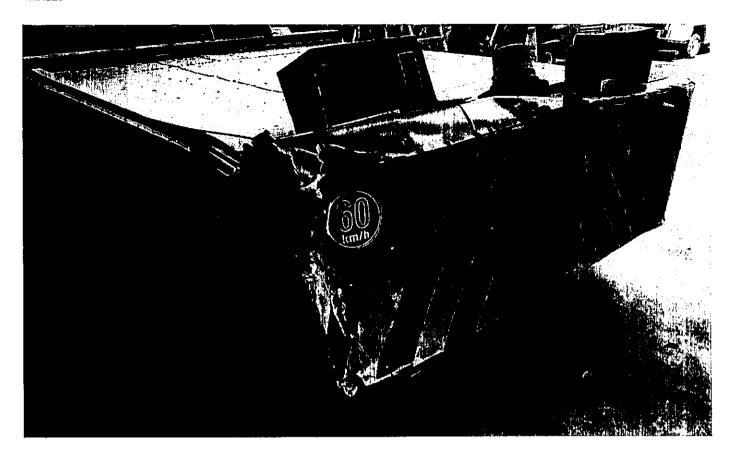
Winessed by Reporting Centre Person (Name as in NRIC/ID card)

Sketch Plan

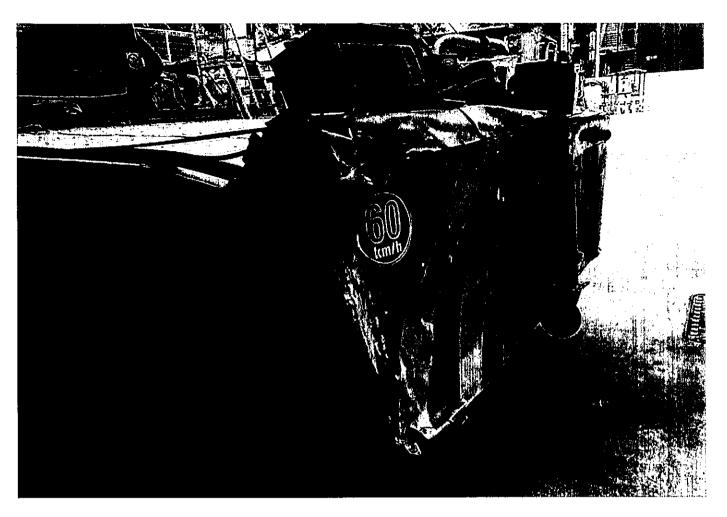


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IMAGES



IMAGES #2



IMAGES #3

