

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 06/05/2022 18:03 (SGT)
Date of Accident 03/05/2022 15:20 (SGT)
Exact Location of Accident Singapore
Additional Location Information SHELL STATION (1 YISHUN ST 11)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SML8328K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner EE CHONG LEE
NRIC No SXXXX271J
Email Address eec1964@gmail.com
Mobile Phone No (Phone) +65-90675271
Alternative Phone No +65-90675271

VEHICLE PARTICULARS

Manufacturer Toyota
Model ALPHARD HYBRID 7-SEATER 2.5X CVT
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 Auto
CC 2493

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SP2000208262
Cover Note Number 16/05/21 - 15/05/22

DRIVER

Name of Driver EE CHONG LEE
NRIC No SXXXX271J

| | |
|--|----------------------------|
| Date Of Birth | 19/09/1964 |
| Occupation | Indoor |
| Date Of Driving Pass | 28/06/1983 |
| Driving experience | 38 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-90675271 |
| Alt. Phone Number | +65-90675271 |
| Email Address | eecl1964@gmail.com |
| Address | 106 WOODLANDS AVE 5 #02-14 |
| Address complement | - |
| Postcode | 739013 |
| 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 | Hit and run / Vandalism / Damaged whilst parked |
| 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? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| Was any other vehicle or property damaged? | Yes |
| Number of Passengers (Including Driver) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------------|--------|
| Name | WIFE |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|------------------------------------|
| Was the accident reported to the police? | Yes |
| Police Station Name | Woodlands Division Headquarters |
| Police Station Phone No | (Phone) +65-18004660000 |
| Police Station Address | 1 Woodlands St 12 Singapore 738622 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT

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 | SLE7085R |
| 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 | - |
| No. Of Passenger (Including Driver) | - |

SKETCH PLAN

IMPORTANT NOTICE

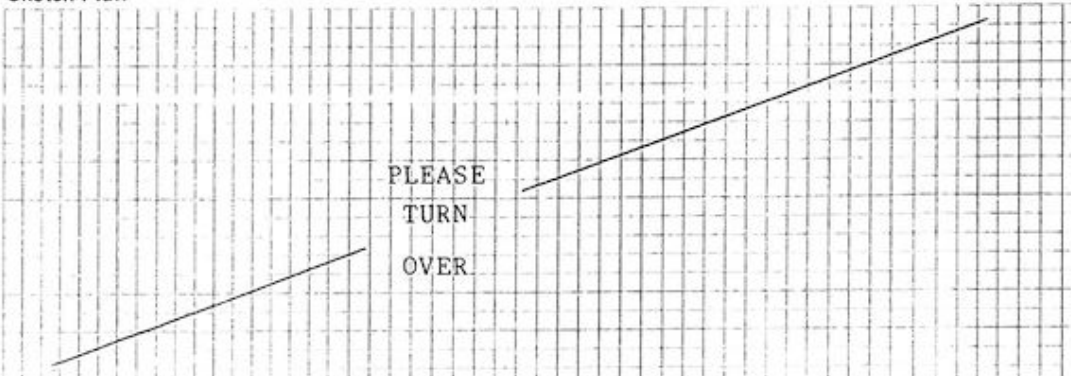
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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

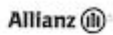
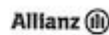
Witnessed by Reporting Centre Personnel

Sketch Plan



PLEASE
TURN
OVER

Allianz Insurance Singapore Pte. Ltd.
 Company Registration No. 201902913C
 GST Registration No. 201903813C
 Address: 75 Robinson Road #09-01 Singapore 068877
 Tel: +65 6714 3309
 Website: www.allianz.sg
 Allianz Contact Centre
 Tel: 1800 222 1818 (Local)
 +65 6222 1919 (Overseas)
 Email: customerservice@allianz.com.sg



PRIVATE CAR SCHEDULE

EE CHONG LEE
 128 WOODLANDS AVE 5
 BELLWOODS
 #02-14
 SINGAPORE 730213

Policyholder Name : EE CHONG LEE

Occupation :
 Replacing Covering : NA
 Note No.:
 Policy No.: SP000008062
 Period of Insurance : From 15 MAY 2021 To 15 MAY 2022
 Premium before GST : SGD 870.28
 GST (7 %) : SGD 60.92
 Total Premium Payable : SGD 931.20
 Insurance Cover : COMPREHENSIVE
 Agreed Value : 154050
 Registration No.: SML832BK
 Make and Model : Toyota ALPHARD
 Year of Manufacture : 2019
 Engine Capacity : 2490 CC
 Chassis No.: AYH000078258
 Hire Purchase Owner : STANDARD CHARTERED BANK (SINGAPORE) LTD
 Optional Coverage : NCD Protector
 AGREED VALUE
 Preferred Workshop for Accident Repairs
 Medical Expenses
 Personal Accident Benefits

Product Type : ALLIANZ MOTOR PROTECT

Form : MX1

Account Code : 0000045

Issue Date : 15 MARCH 2021

Off-Peak Car : N

Good Driver Discount : Y

Seating Capacity : 7

Body Type : Wagon

Engine No.: 2ANUZ00178

Windscreen : UNLIMITED

No Claim Discount : 50 %

Nominal Drivers

EE CHONG LEE

Limitations as to Use* :
 Used only for social, domestic and pleasure purposes

The Policy does not cover:
 (a) use for hire or reward
 (b) use for racing, pack-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 Trips

Excess Applicable (refer to Policy wording for other applicable Excesses) :

Own Damage Excess : SGD 500
 Windscreen Excess : SGD 100.00

Clauses & Endorsements Applicable:

No claim discount protector
 Hire purchase arrangement
 Agreed value
 Preferred workshop for accident repairs
 Courtesy car
 Breakage of glass in windscreen or window
 Daily transport allowance
 Collision-free damage claim
 Lifetime guarantee for accident repairs
 New for old replacement car
 Roadside assistance
 Personal accident benefits
 Medical expenses

Allianz Insurance Singapore Pte. Ltd.

Moham Rafeel
 Chief Executive Officer


















**SINGAPORE
POLICE FORCE**


L/20220503/7019

1 of 2

POLICE REPORT (NP259)

Report No. L/20220503/7019

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-4860000

| | | | | | |
|--|--|---|-----------|-----------------------------|-----------------|
| Date/Time Report Made 03/05/2022 18:08 | | Vide Report No. | | Station Diary No. | |
| Name Of Informant EE CHONG LEE | | Address 106 WOODLANDS AVENUE 5 #02-14 SINGAPORE 739013 | | | |
| ID Type / ID No. NRIC NO / S1835271J | | Contact No. Home/Office: | | Mobile: 90675271 | |
| Nationality SINGAPORE CITIZEN | | Email Address eecl1964@gmail.com | | | |
| Occupation Director (Trade and Retail) | | Sex Male | Age 57 | Date of Birth 19/09/1964 | Race Chinese |
| Institution/School Name | | Language English | | | |
| Date/Time Of Incident 03/05/2022 15:20 - 03/05/2022 15:30 | | Location Of Incident 1 YISHUN STREET 11 SHELL YISHUN AVENUE 5 SINGAPORE 768642 | | | |

Brief details.

Hit and Run by driver of SLE7085R. Driver of SLE7085R hit the corner of my car while exiting Shell station. He did not stop to exchange particulars. We were unable to chase after the vehicle as we were in the car wash queue at that time. My wife was with me on the car during the time of the accident.

| |
|--------------------------|
| Subjects Involved |
| Suspect |

| | |
|--|--|
| 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: 03/05/2022 18:08 |
| Officer In-Charge Of Case: | Classification Of Case: |



**SINGAPORE
POLICE FORCE**



L/20220503/7019

2 of 2

POLICE REPORT (NP232)

CONTINUATION OF REPORT

Report No. L/20220503/7019

| | | | |
|---------------|-----------------------------|------------------------|---|
| Person Name | Unknown | | |
| Gender | Male | Habits & Oddities | Driver of SLE7085R during time of incident at Yishun Shell Station. |
| Victim | | | |
| Person Name | EE CHONG LEE | | |
| ID Type | NRIC NO | ID No | S1835271J |
| Gender | Male | Age | 57 |
| Race | Chinese | Language | English |
| Occupation | Director (Trade and Retail) | Address | 106 WOODLANDS AVENUE 5 #02-14 SINGAPORE 739013 |
| Mobile No | 90675271 | Is Informant A Victim? | Yes |
| Person Name | EE CHONG LEE (Informant) | | |

| | |
|--|--|
| 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: 03/05/2022 18:08 |
| Officer In-Charge Of Case: | Classification Of Case: |