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 Actual Driver
- 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.

- 4. The issue and acceptance of this is form by instrained 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 10/08/2022 15:28 (SGT) Reported by Date of Accident 09/08/2022 00:55 (SGT) Exact Location of Accident Singapore Additional Location Information Jurong West Street 91 Carpark Country/State of Loss Singapore **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMM2046H INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Tan Kok Wah NRIC No SXXXX067I Email Address skwtan65@gmail.com Mobile Phone No (Phone) +65-91372816

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Camry Variant Camry Hybrid

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 No - Claiming third party your vehicle? Vehicle Category Private car

Transmission Auto CC 2500

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT 00852830/01

DRIVER

Name of Driver Douglas Tan Han Long NRIC No SXXXX627J Date Of Birth 25/04/1997 Occupation Indoor

Date Of Driving Pass 28/06/2019 Driving experience 3 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-94501942 Alt. Phone Number Email Address skwtan65@gmail.com Address Blk 759 Jurong West Street 74 #11-104 Address complement Postcode 640759 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 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) 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? Police Station Name Nanyang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18007929999 Alt. Police Station Phone No (Fax) +65-67912972 Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT Report refer to police report ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBB7462U Vehicle Manufacturer

Vehicle Model
Vehicle Variant

| Vehicle Colour | - |
|---|--------------------|
| Vehicle Category | Commercial vehicle |
| 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) | - |

WITNESS DETAILS

WITNESS 1

Name Latiff

Phone (Phone) +65-96410999

Email ______

SKETCH PLAN

IMPORTANT NOTICE

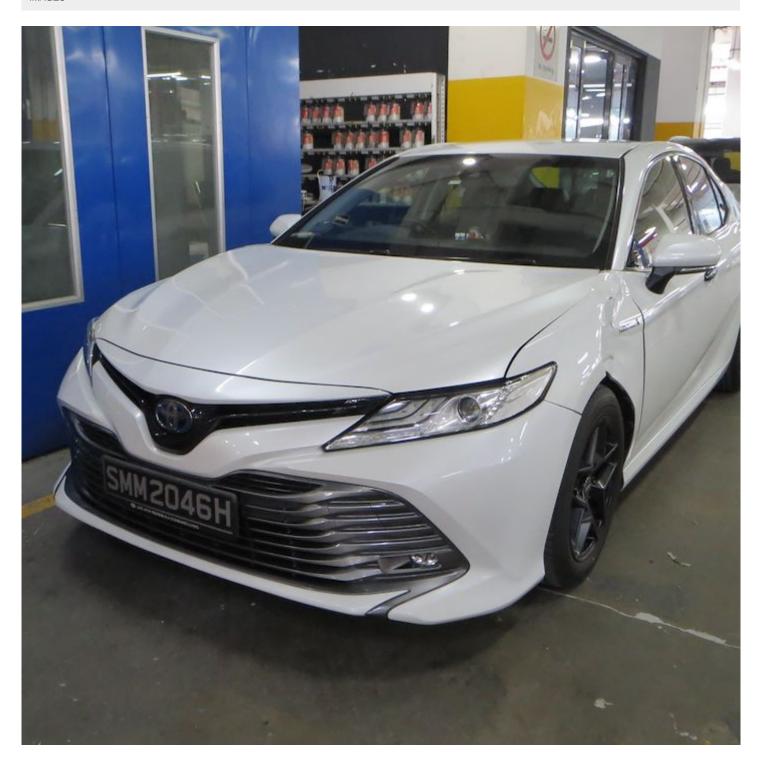
- 1. Please report correctly the details of the accident to speed up the claims process.
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- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that

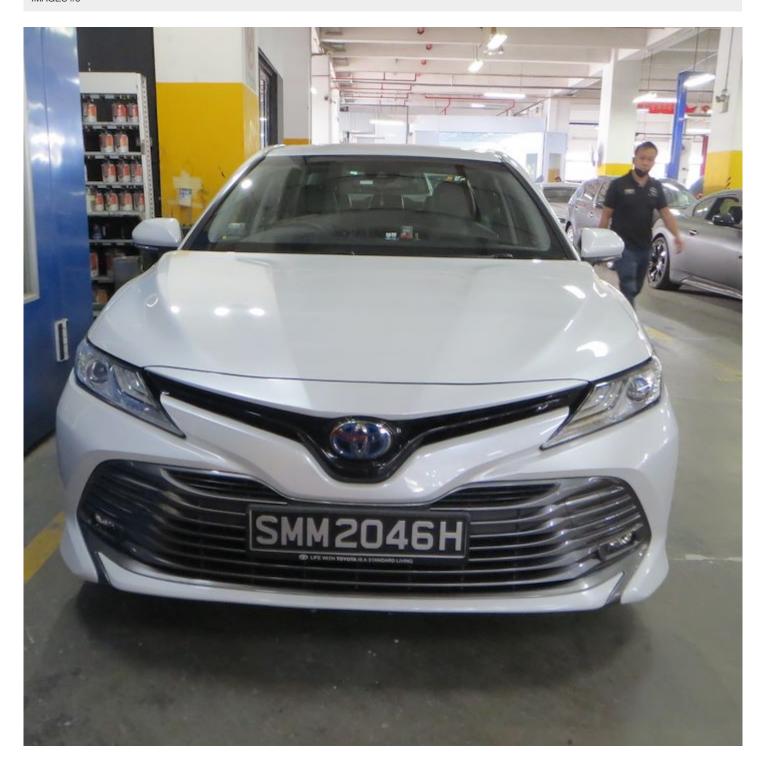
- (a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (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' law yers/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
- (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) acministering my claims (including the making 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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all nsurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/law firms, may/are permitted to collect, use, discusse 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 law yers/law firms), which may be sited outside of Singapore for one or more of the above Purposes.

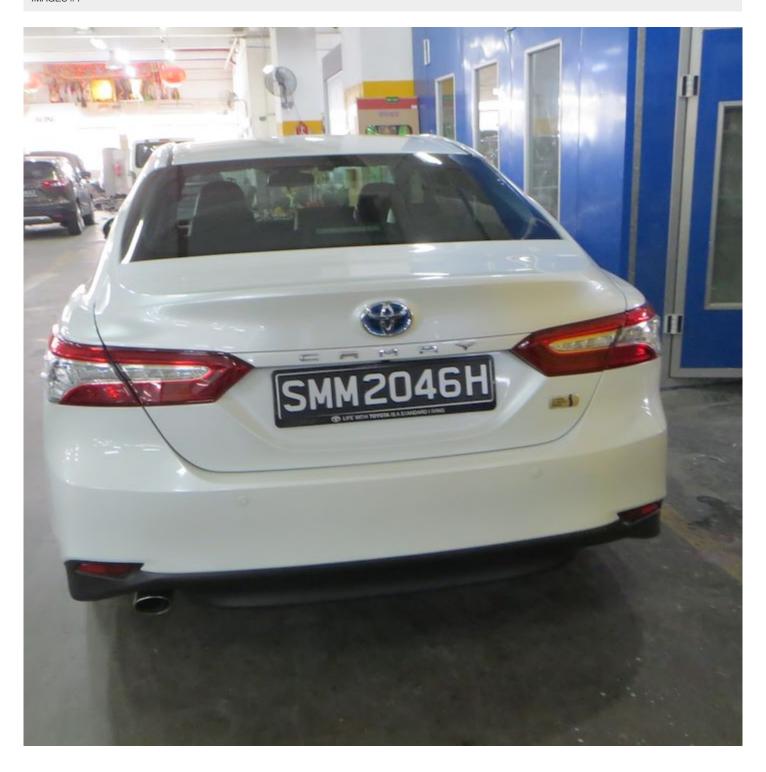
| Policyholder's Signature / Date & Time | / Date & Driver's Signature (if driver is not the policyholder) / Date & Time | | | Witnessed by Reporting Centre Personnel | | |
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| Sketch Plan | | | | Personner | | |
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| (B) - GBB7462L | | 8 Hc | | | | |

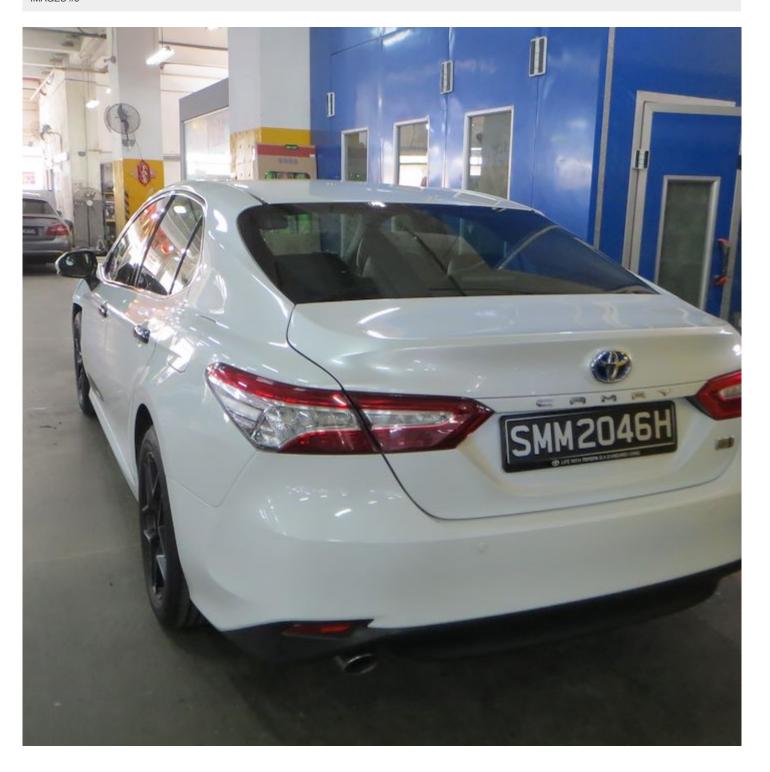
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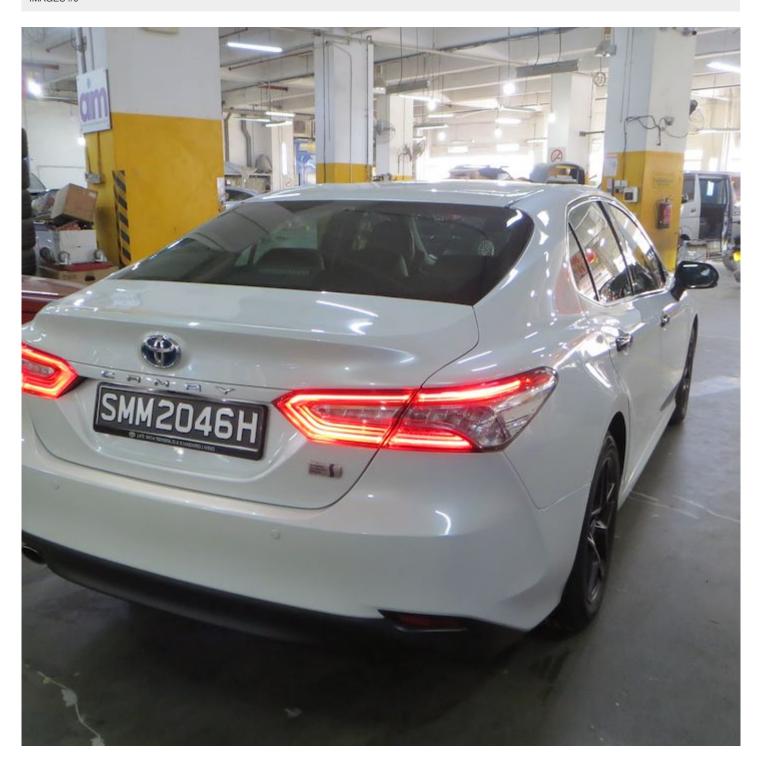




















T/20220809/2010

1 of 3

Report No. T/20220809/2010

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 09/08/2022 02:25 | | lade: | Vide Report No.: | Station Diary No.: 17 | |
|--|--|------------------------------|--|----------------------------|--|
| Informa | nt's Particu | ulars | | | |
| | of Informant: Address: OK WAH APT BLK 759 JURONG WEST STREET 74 SINGAPORE 640759 | | | T STREET 74 #11-104 | |
| ID Type / ID No.: NRIC NO / S1708067I | | | Contact No.: Home/Office: | Mobile: 91372816 | |
| National SINGAP | ity: ORE CITIZ | EN | Email: | | |
| Sex: Male | Age: 57 | Date of Birth: 03/04/1965 | Type of Informant: Vehicle Owner | | |
| Race: Chinese | | | Language: English | Institution / School Name: | |
| Occupation: QC INSPECTOR | | | Driving Licence Information: Class: 2B,2A,3,4 | Date of Expiry: | |

| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 09/08/2022 00:55 | Type of Location: Car Park | |
|------------------------------------|---------------------------|-----------------------|---|-------------------------------|--|
| Location: JURONG WE Weather: Clear | ST STREET 91 | Road Surface: | | Road Speed Limit: | |
| Traffic Flow: Traff | | Traffic Control: | | Traffic Volume: No Traffic | |
| Traffic Flow: Two Way | | Not Controlled | | No Traffic | |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|-------|--------|-------------------------------|-------|---------------------|-----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
| GBB7462U | Lorry | TOYOTA | DYNA 150 MANUAL 3SEATER | Blue | | 0 |
| SMM2046H | Car | TOYOTA | CAMRY HYBRID 2.5G CVT | White | Slightly Damaged | 0 |





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 2 of 3 Report No. T/20220809/2010

Tel No: 1800-7929999

CONTINUATION OF REPORT

| Details of Perso | n Involved | | No. | Deliai | |
|-------------------|---------------------------|-------------|---|-----------------|---|
| Any Pedestrian I | | | | | |
| No. of Pedestrian | ns Injured: NIL | Use of Pede | estriar | Cross | sing: NA |
| Vehicle Owner | Show the same of the same | | | 0.00 | - X-0000 (100 (100 (100 (100 (100 (100 (100 |
| Name | TAN KOK WAH | | | | S1708067I |
| Related Vehicle | SMM2046H (Car) | | | ct No. | 91372816 |
| Hospital/Clinic | NIL | | | of g ce & | Class: 2B,2A,3,4 Date of Expiry: NIL |
| Date Treatment | NIL | Date Disch | | NIL | |
| No. of Days gran | Degree of I | | NIL | | |
| Driver | | | | MACHINE . | |
| Name | DOUGLAS TAN HAN LONG | | ID No. | | S9713627J |
| Related Vehicle | SMM2046H (Car) | | Contact No. | | 94501942 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discha | arge | NIL | |
| No. of Days gran | ted Medical Leave NIL | Degree of I | | NIL | |

Brief Details.

On 09/08/2022 at about 0105hrs, I was notified by my son, Douglas Tan Han Long, that my car, registration plate number: SMM2046H, was involved in a hit and run accident at the open-space car park of Blk 963 Jurong West Street 91.

My son told me that he was approached by a witness, Latiff, HP: 96410999, and told him that my car was hit by a lorry, registration plate number: GBB7462U. Latiff told my son that the lorry wanted to park at an empty lot beside my car. While the lorry was reversing, he claimed that the rear-right side of the lorry collided onto the front-left side of my car that was parked, causing a major dent and scratches. The front-left tire also felt misaligned when my son tried to drive. Latiff then told my son that after the lorry had hit onto my car, the lorry just left.

When my son came back to the car after having supper with my wife, the lorry was no longer at scene. My son then proceeded to drive home and told me about the accident. I immediately drove down to the police station and made a police report.





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

3 of 3 Report No. T/20220809/2010

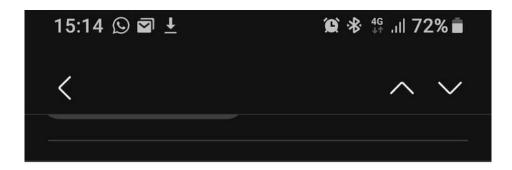
CONTINUATION OF REPORT

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: J / SGT 2 MUHAMMAD KHAIRUL AMIRIN BIN MOHD YAZED | Signature Of Informant: |
|---|-----------------------------|
| Signature Of Interpreter: Not applicable | Date/Time: 09/08/2022 02:25 |
| Officer In Charge Of Case: TP / HRT / STAFF SGT SUFIYAN BIN KHAIRI Contact No.: 65476148 | Classification Of Case: |
| NP168 | |





Hello Tan Kok Wah,

Thank you for renewing your Motor Car insurance with DirectAsia! We appreciate having you as our happy customer.

To access your documents, to 'My Account' to view the following:

- 1. Your Certificate of Insurance. A legal document which shows you insured with DirectAsia Insurance.
- The Policy Schedule which gives you a summary of your cover. includes your receipt/invoice for payment made or due on your

Please review these documents together with the full policy details. To your contract with us. View or download the policy details.

Here's a quick summary of your insurance:

Policy ID : MT/00852830/01 Policyholder/Car Owner: Tan Kok Wah Declared Main Driver : Tan Kok Wah Vehicle Registration No.: SMM2046H Plan Type : Comprehensive Driver Plan : Flexible Plan Period of Insurance : <u>20/04/2022</u> to <u>19/04/2023</u> Vehicle Usage : Private Use + Commuting to work No Claim Discount : 60% Policy Excess : S\$ 2500.00

Based on the information provided and coverage selected, you are coverage

