022810003 / MOTOR IMAGE ENTERPRISES PTE LTD [159097] BY DATE & TIME: 18/08/2022 17:09 (SGT) BMITTED BY: Jobi Thomas BMIT (18/08/2022 17:09 (SGT))

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
- 2. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate
- 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.
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 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 18/08/2022 17:09 (SGT) Reported by Date of Accident 18/08/2022 14:45 (SGT) Exact Location of Accident Singapore Additional Location Information **SERANGOON ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SDN1801C

(Phone) +65-98159984

No - Claiming third party

Private car

Auto

1995

INSURED/POLICYHOLDER Is company? Name Of Registered Owner **TENG TECK BOON** NRIC No Team and a committee of the committee of SXXXX176G Email Address tbteng@gmail.com

VEHICLE PARTICULARS

Alternative Phone No

Mobile Phone No

Manufacturer Subaru Model Forester Variant

Exact purpose for which vehicle was being used at time of

Vehicle Registration Number

Are you claiming under your own insurance policy for repair to

vour vehicle? Vehicle Category

Transmission CC

INSURANCE COMPANY

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

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

TENG TECK BOON SXXXX176G 19/07/1973 Indoor

of Driving Pass ing experience 21/12/2005 16 YEARS AND 8 MONTHS Male phone Number ... roe commons commons and commons (Phone) +65-98159984 /mail Address tbteng@gmail.com Address 2 WHAMPOA EAST Address complement #15-06 is the driver the policyholder? 338517 f 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 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 PASSENGER 1 JAYDEN TENG Name Male Gender DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT KINDLY REFER TO THE ATTACHED SKETCH PLAN. 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 Vehicle Manufacturer Vehicle Model Vehicle Variant

SHD6039J

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PORTANT NOTICE

gesse report correctly the details of the accident to speed up the claims process.

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- 5. Any false reporting may be referred to the Police for investigation.
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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)

l 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' 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, trandling 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

Policyholder's Signature / Date &

& Time

CON1801 C

Sketch Plan

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

SH06037J

Sennyon Rd

GW4176X

Witnessed by Reporting

Personnel

The Accident
I was dring along serangoon Rd towards upper serangoon
and As there was take constituted to
elawed in a wall a la
score venicle to a complete stop. All of
ford. As there was taffic congestion along the road, I slowed my vehicle to a complete stop. All of a sudden, a lond bang occurred from the rear of vehicle (SDNIFOIC).
of vehicle (SONIFOIC)
I alighted the vehicle and say a bown taxi
(SHOW 2 = =) in a venicle and say a venicle (AN 4176Y)
(SHD60375) had hit my rear and a van (GW4176X)
had hit the taxis near.
5ANISON ((10/1257 6.141764
SONIFOIC SHOGO39J 6W4176X
Seranyon Road
Taxi Diver: Mr Low Khee Hong (15-07-1957)
SHD 6039J
51244119 J
512441113
IL ASSESSED TO THE STATE OF MANASAMY
Van Driver: Mr SHANMUGARAJ 5/0 MADASAMY
GW4176×
28 Oct 1953

Declaration

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

Policy rolder's Signarura Cata !

Invaria Signature if there is not the solid violation. Date \mathbb{A}_{n} fore

Witness and av Papaking Canta Parsionner