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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of withouting of material facts may allow insurance companies to reputial 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 24/08/2022 17:15 (SGT) Reported by Date of Accident 24/08/2022 00:20 (SGT) Exact Location of Accident Near 2 Magazine Rd, Singapore 059570 Additional Location Information CTE TOWARDS AYE (AFTER HAVELOCK RD) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLV8538E

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **LUGO SERVICE & TRADING** Company Reg No 53355029K Email Address HENHEN11180@GMAIL.COM Mobile Phone No (Phone) +65-81633248 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Almera Variant Exact purpose for which vehicle was being used at time of

accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire

Transmission Manual 1498

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd. Policy Number / Cover Note Number PNCV2019-00001637-02

DRIVER

Name of Driver SOH TZE WEE, HENRY NRIC No S8035944F Date Of Birth 18/11/1980 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	06/08/2001 21 YEARS Male (Phone) +65-81633248 - HENHEN11180@GMAIL.COM BLK 251, BANGKIT ROAD #03-366 670251 No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
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	-
Name Gender	PASSENGER Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
REFER TO SUMMARY AND SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SLE9183C

Vehicle Model
Vehicle Variant

Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	ZHANG ZHIWEI RUDY
Contact Number	(Phone) +65-96222983
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

SKETCH PLAN

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- 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.

- 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 ladgement 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

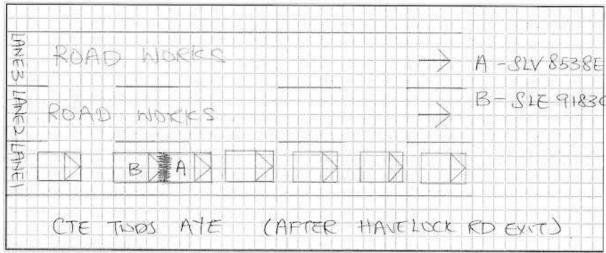
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 lirms, 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

Oriver's Signature (didriver is not the policyholder) / Date

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

Sketch Plan



Describe Circumstance of the Accident ON 24/08/2022 @ 0020HRS, I WAS DRIVING MY VEHICLE A (SLV8538E) ON LANE 1 ALONG CTE TOWARDS AYE (AFTER HAVELOCK RD EXIT). CONSTRUCTION WORKS BLOCKED LANE 2 AND 3 AND VEHICLES IN FRONT OF MY VEHICLE A (SLV8538E) SLOWED DOWN AND SUDDENLY I FELT A HUGE IMPACT FROM THE REAR OF MY VEHICLE A (SLV8538E). I WAS SHOCKED, I ALIGHTED TO CHECK AND FOUND OUT THAT VEHICLE B (SLE9183C) DID NOT STOP IN TIME AND COLLIDED ONTO THE REAR OF MY VEHICLE A (SLV8538E). WE EXCHANGED PARTICULARS FOR INSURANCE CLAIM.

Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC#D card)























Please call +65, 6322-2072 for FWD Emergency Assistance if your car breaks down or is involved in an accident.

All accidents must be reported within 28 hours or by the next working day of the incident regardless of whether it will lead to a claim.

Policy number: PNCV2019-00001637-02

Car plate number : \$LV8538E

Coverage start date: 30/11/2021 Coverage end date: 29/11/2022

Who is insured to dove: You and any Authorised Driver

Covered geographical area. Singapore, West Malaysia and Southern Thailand

About you (the Policyholder)

Name: Soh Tze Wee Henry NRIC/FIN: \$8035944F

Address: 251 Bangkit Road 03-366 Singapore 670251

Email: henhen11180@gmail.com Mobile number 81633248

Date of birth 18/11/1980 Gender: Male
Mantal status: Married Certificate of merit. Yes

Current no claims discount: 20% Years of driving experience: Three or more

Company name: Lugo Service & Trading ACRA number: 53355029k

About your car and policy

Car make and model: NISSAN ALMERA 1.5

Year of first registration: 2016

Plan type: THIRD PARTY, FIRE, THEFT Standard excess: Not Applicable

NCD protector. Not Applicable Your preferred workshop. Not Applicable

Overseas booster. Not Applicable Premium paid (inclusive of GST), \$52,692.94

END Separate the croid in families boulevard. Act of surrectioner its segment (4876) 1850/8420 MMB Registration Act 2005(27) for



Certificate of Insurance

Please call +65-6572 2072 for FWD Emergency Assistance if your car breaks down or is involved in an accident.

All acodents must be reported within 24 hours or by the next working day of the inodent regardless of whether a



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