SA18228H0001 / Abwin Service Pte Ltd ENTRY DATE & TIME: 17/08/2022 14:16 (SGT) SUBMITTED BY: Gerine Cheng VERSION: 1 (19/08/2022 09:54 (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
- 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.

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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 17/08/2022 14:16 (SGT) Reported by Date of Accident 16/08/2022 20:00 (SGT) Exact Location of Accident Upper Serangoon Rd & Boundary Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

No - Claiming third party

Vehicle Registration Number S.IY419B

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN WEI LOONG, WILSON NRIC No S9211067B Email Address SALVATOREE-BB@HOTMAIL.SG Mobile Phone No (Phone) +65-93889551 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model A5 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

Private car Transmission Auto CC 1984

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Policy Number / Cover Note Number 5118682193-02

DRIVER

Name of Driver TAN WEI LOONG, WILSON NRIC No S9211067B Date Of Birth 12/03/1992 Occupation Indoor

Date Of Driving Pass 09/01/2012 Driving experience 10 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-93889551 Alt. Phone Number Email Address SALVATOREE-BB@HOTMAIL.SG Address 33 UPPER SERANGOON VIEW Address complement Postcode 534042 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 Collision - Cross Junction 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? Yes 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name WIFE Gender **Female DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Ang Mo Kio Division Headquarters Police Station Phone No (Phone) +65-18002180000 Alt. Police Station Phone No (Fax) +65-64814246 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH PLAN ATTACHED 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 SMV3950T 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) 2 PASSENGER 1 Name **PASSENGER** Gender Female

INJURED PERSONS DETAILS

INJURED 1

TAN WEI LOONG, WILSON Male
-
-
-
-
-
4 DAYS MC
SJY419B
Yes
No
ASIYA
Female
-
-
-
-
-
3 DAYS MC
SJY419B
Yes
No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please 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.
- 6. The 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.
- 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' 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 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 ma, 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.

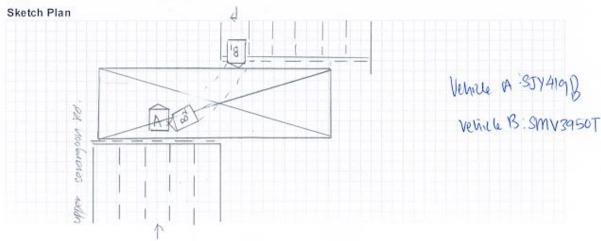
(collectively the "Purposes")

- (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

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

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

on the	stated c	oute and	time,	l was	frauellin	g straigh
along upp	per serango	DU PON, -	valle lie	and has	in my	forour and
1 preced to	travel straigh	, suddenly	1 felt	a huge	impact on	my right
purtion and	realize renig	e B has	Collidor	onto my	halva b	to notion
JSIN91						
Declaration						
/We declare the foregoing p	anticulare ara trua la ausa	u roenoet				CE PTO

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

Policyholder's Signature / Date & Time

& Time

Witnessed by Reporting Centre





220818//03/

Report No. F/20220818/7037

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No:1800-2180000

Date/Time Report Made 18/08/2022 13:38	Vide Re	port No.		Station Diary No
Name Of Informant	Address			14.55
TAN WEI LOONG, WILSON	33 UPPER SERANGOON VIEW #14-26 SINGAPORE 534042			
ID Type / ID No. NRIC NO / S9211067B	Contact Home/C		Mobile: 93889551	
Nationality SINGAPORE CITIZEN	Email Address SALVATOREE-BB@HOTMAIL.SG			
Occupation	Sex	Age	Date of Birth	Race
Financial/Investment adviser	Male	30	12/03/1992	Chinese
Institution/School Name	Language English			
Date/Time Of Incident 16/08/2022 20:00 - 16/08/2022 20:20	Location Of Incident 33 UPPER SERANGOON VIEW #14-26 SINGAPORE 534042			

Brief details.

The accident took place on 16th Aug at approximately 8 pm along upper serangoon Road after passing by Upper serangoon shopping centre. I stop at the traffic light junction as traffic was red. I started moving off when it turn green as I have the right of way on the straight road. The next moment, i realised a car SMV3950T came from my right side and hit onto my drivers side door.

At the point of the accident, both my wife and I are were in the car. My wife Name: Asiya, Nric: S9284194D. We got off the car and the driver of SMV3950T admited that it was his mistake and we did

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: 18/08/2022 13:38
Officer In-Charge Of Case:	Classification Of Case:





2 of 3

Report No. F/20220818/7037

POLICE REPORT (NP299)

CONTINUATION OF REPORT

the nessacary exchange of particulars and photos. The driver also wrote a slip to acknowledge that he had knocked into my car SJY419B. I will attach the slip written by the driver.

My wife head knocked onto the side window when the incident happened. She did mention of slight neck and shoulder ache on the night itself. The next day 17th Aug2022, I realised that my neck and back started to hurt. My wife still feel the same. We then decided to head to the clinic Our Family Physician Clinic & Surgery. I was issued a 4 days Mc and my wife was issued a 3 days MC.

Subjects Involve	d		
Victim			
Person Name	Asiya		
ID Type	NRIC NO	ID No	S9284194D
Gender	Female	Race	Chinese
Language	English	Occupation	Administration manager
Address	33/14-26 33 upper serangoon view #14-26 Boathouse residences SINGAPORE 534042	Mobile No	96277058
Relation To Informant	Wife		
Person Name	TAN WEI LOONG, WILSON	500	997
ID Type	NRIC NO	ID No	S9211067B
Gender	Male	Age	30
Race	Chinese	Language	English

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: 18/08/2022 13:38
Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220818/7037

Occupation	Financial/Investment adviser	Address	33 UPPER SERANGOON VIEW #14-26 SINGAPORE 534042
Mobile No	93889551	Is Informant A Victim?	Yes
Person Name	TAN WEI LOONG, WILSON (II	nformant)	

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: 18/08/2022 13:38
Officer In-Charge Of Case:	Classification Of Case: