# **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 12/09/2022 20:29 (SGT) Reported by Both Date of Accident 10/09/2022 10:50 (SGT) Exact Location of Accident Kallang, Singapore Additional Location Information KALLANG PAYA LEBAR EXPRESSWAY Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Kia

Vehicle Registration Number SMF7109P

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LEE YONG LAY NRIC No SXXXX853B Email Address CHEKYEN94@HOTMAIL.COM Mobile Phone No (Phone) +65-93878049 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Cerato 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 No - Claiming third party your vehicle?

Vehicle Category Private car Transmission Auto CC 1591

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1800138231-02

DRIVER

Name of Driver LEE CHEK YEN NRIC No SXXXX026I Date Of Birth 16/07/1994 Occupation Indoor

Date Of Driving Pass 17/06/2014 Driving experience 8 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-81578442 Alt. Phone Number Email Address CHEKYEN94@HOTMAIL.COM Address APR BLK 102 RIVERVALE WALK Address complement Postcode 540102 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 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? 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 XIE XHIQI Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Sengkang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18003438999 Alt. Police Station Phone No (Fax) +65-63438939 Police Station Address 2 Sengkang Square #01-02 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO POLICE REPORT T/20220911/2044 ATTACHMENT(S)

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Vehicle Registration Number	SLN6119L
Vehicle Manufacturer	Honda
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)	_

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLP7861J
Vehicle Manufacturer	Toyota
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)	-

## INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	LEE CHEK YEN Male (Phone) +65-81578442 SMF7109P -
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	-

#### SKETCH PLAN

#### 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.
- Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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:

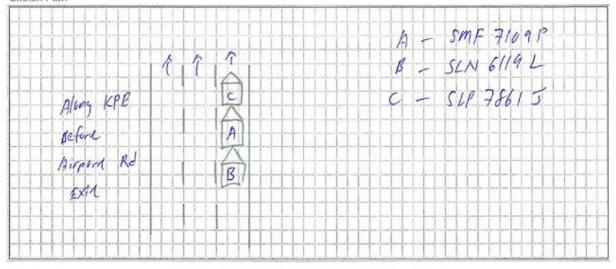
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the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

Oriver's Signature (if driver is not the policyholder) / Date & Time

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

#### Sketch Plan



1

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Declaration

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

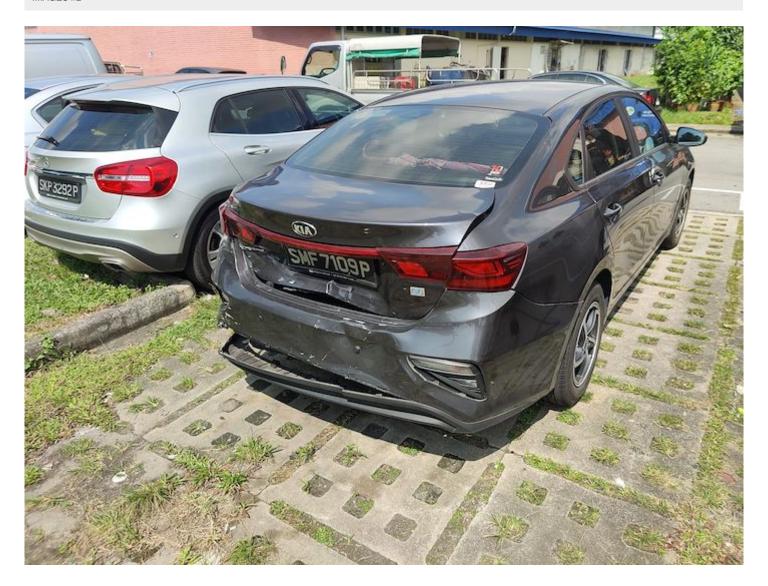
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date 8 Time

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

2

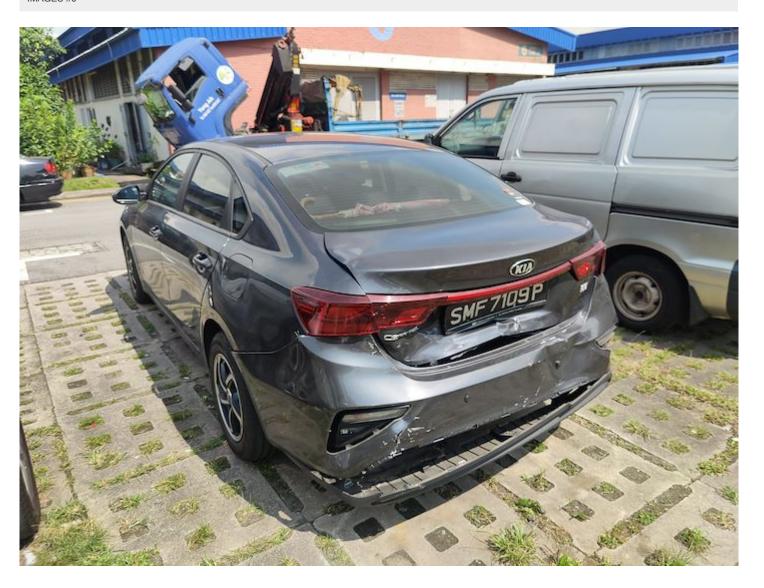
























Police Station Of Origin: Sengkang N.P.C

2 Sengkang Square #01-02 SINGAPORE 545025

Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT

T/202209		

1 of 4 Report No. T/20220911/2044

Date/Time Report Made: 11/09/2022 13:13			Vide Report No.:	Station Diary No.: 38	
Informa	nt's Partic	ulars			
	f Informant: EK YEN		Address: APT BLK 102 RIVERVALE W 540102	ALK #06-56 SINGAPORE	
ID Type / ID No.: NRIC NO / S9425026I			Contact No.: Home/Office: Mobile: 81578442		
National SINGAR	ity: PORE CITIZ	ΈΝ	Email:	1000 Harris 10000	
Sex: Age: Date of Birth: Male 28 16/07/1994			Type of Informant: Driver		
Race: Chinese			Language: Institution / School Na		
Occupation: ENGINEER			Driving Licence Information: Class: 3	Date of Expiry:	

General Infor	mation of the Acci	dent		CONTROL DE LA CONTROL DE L			
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 10/09/2022 10:50	Type of Locatio		
KALLANG PA	AYA LEBAR EXPRE		Surface:		Road Spe	ed Limit:	
Clear		Dry	Dry				
Traffic Flow:		Traffic	Traffic Control:			Traffic Volume:	
Type of Collis Moving Vehic	sion: :le Against - Others				Anyone co ambulano	onveyed by e:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLN6119L	Car	HONDA				0
SLP7861J	Car	TOYOTA		-		0
SMF7109P	Car	KIA				1





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 2 of 4 Report No. T/20220911/2044

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Details of Perso	n Involved				
Any Pedestrian In					
No. of Pedestrian	s Injured: NIL	Use of Pedestrian Crossing: NA			
Name	FIONN				NIL
Related Vehicle	SLN6119L (Car)		Conta	ct No.	96925908
Hospital/Clinic	NIL			of g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			NIL	AND THE RESERVE THE PROPERTY OF THE PARTY OF
	led Medical Leave   NIL	of Injury			
Driver					
Name	KALIK				NIL
Related Vehicle	SLP7861J (Car)			ct No.	82221614
Hospital/Clinic	NIL			of g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Dis		NIL	
	ted Medical Leave NIL	Degree o			
Passenger					
Name	XIE SHIQI		ID No		S9481858C
Related Vehicle	SMF7109P (Car)			ct No.	83475146
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.			of g ce & Date	Class: NIL Date of Expiry: NIL
Date Treatment	11/09/2022	Date Dis	and the second second second	and the second	7/2022
	ted Medical Leave 05	Degree o			





3 of 4

Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

Report No. T/20220911/2044

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Driver				
Name	LEE CHEK YEN	ID No.	S9425026	
Related Vehicle	SMF7109P (Car)	Contact No.	81578442	
Hospital/Clinic	SENGKANG GENERAL HOSP LTD.	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	11/09/2022 Date Dis		charge 11/09	0/2022
No. of Days gran	ted Medical Leave 05	Degree o	f Injury   NIL	

#### Brief Details.

On the 10/09/2022 at about 1045hrs, i was driving vehicle SMF7109P, Kia along Kallang Paya Lebar Expressway on the outermost right lane near to 9A with my girlfriend Xie ShiQi seated at the front passenger seat. We are travelling towards Paya Lebar. I was behind vehicle SLP7861J, Toyota Silver in colour and suddenly, the said vehicle suddenly brake and came to a stop. I then applied brakes on my vehicle and my vehicle came to a stop. However i felt an impact from the rear of my vehicle and the impact caused my vehicle to move forward and hit onto the rear of SLP7861J. After the incident, me and my girlfriend came out of the vehicle to make a check and i realized that another vehicle SLN6119L was unable to stop in time and collided onto the rear of my vehicle.

Me and my girlfriend had minor headache after the accident and the other drivers involved were also not injured/ requires any immediate medical attention and thus we exchange our contact numbers and left the scene. When me and my girlfriend was resting at home, we felt pain from the back of our head and the pain did not ease and thus we went to Sengkang General Hospital to seek medical attention and we were given 5 days of medical leave. There is a in car camera install in my vehicle however i am unsure if it had record the footages of the accident.





Police Station Of Origin: .Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999 4 of 4 Report No. T/20220911/2044

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:	Signature Of Informant:
SGT 3 LEOW CHONG WAI	YA
Signature Of Interpreter: Not applicable	Date/Time: 11/09/2022 13:13
Officer In Charge Of Case: TP / AEIT / SR STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:
NP168	



# CERTIFICATE OF INSURANCE

#### KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Lee Yong Lay

: SMF7109P Vehicle No. Period of Insurance : 22 Nov 2021 To 21 Nov 2022 Policy No. : 1800138231-02

: G4FGJH709857 Engine No. Endorsement No.

Chassis No. : KNAF1416MK5020323 Issued Date : 05 Oct 2021

ABOUT THE COVER

Engine Capacity/Tonnage: 1,591.00 CC Sum Insured : Market Value First Year of Registration : 2018

Off Peak Car : No Insuring with COE/PARF : Yes Driver Restriction : NA

Person or Classes of Persons Entitled to Drive\*:

: KIA Cerato

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience

Make/Model

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving busines, driving test, racing, pace-moking, rehability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 186), Section 95 of the Road Transport Act, 1967 (Malaysia) and Road Transport (Avendment) Act 2019, are not to be included under these headings.

## EXCESS

Section 1 Fire - 50 Own Damage - \$600 Theft - 50 Flood Cover - \$600

Section 2 Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

Lee Yong Lay - \$600 (Own Damage), \$600 (Flood Cover)

#### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Cycle & Carriage Bedy & Paint Centre Add 209 Pandari Gardens Singapore 509330 65884501
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add 330 Ubi Rd 3 Singapore 408650 67401000
 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add 241 Alexandra Road Singapore 159931 64278800

4 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only). Add: 600 Sin Ming Arre Singapore 575732 89328900.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency bottline at +05 6338 6200. Alternatively, you may refer to AIG website www aig sig or AIG SG Mobile App. Simply search and download 'AIG SG' from iTunes or Google Play.

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

Wile hereby certify that the policy to which this Certificate of Insurance relates is Issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cop. 188), Part IV of the Road Transport Act. 1987 (Molaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules. 1989 (Molaysia).

0504624203

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FULCOKICP2 - FW

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 403617

Underwritten by AIG Asia Pacific Insurance Pto. Ltd.

ANGSG WOOLLCAPP