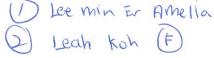
# SINGAPORE ACCIDENT STATEMENT

Accident Date: 3 10 22 Time: 21:10 (hh:mm) 24 hr format					
Location Jurong west St 64 tods Jurong West St 65					
3 3 3 5					
Vehicle Number EVISILU					
Insured Name Lee min Er, Amelia					
NRIC /FIN \$93 0 9 5 8 9 H Contact Number 8 9 3 3 9 9 3 3					
Make Hyundai Model Ad Avante 1.6					
Are you claiming under your own insurance policy for repair to your vehicle?					
( ) Yes If No,Pls select: ( ) Third Party ( ) Reporting					
Insurance Company China Taiping					
Type of Policy ( ) Comphensive ( ) Third Party Fire & Theft ( ) TP Only					
Policy Number Dmp CSHW 00 152582202					
Name of Driver \an koh kah Wah ( )Same as Insured					
NRIC / FIN 388300757 Contact Number 9373 9373					
Date of Birth 14/8/1988					
Driving Pass Date 09/2/2010					
Occupation ( ) Indoor ( ) Outdoor					
Gender ( ) Male ( ) Female					
Email Address Iankonko @gmail.com ( )NO EMAIL					
Address of Driver BIK 73+ Yishum St 72 #03-87 (5) 760737					
Was driver an employee of the Insured's Company? ( ) Yes ( No					
If No, Relationship of the Driver with the Insured					
( ) Owner ( Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling					
Does the Driver Own Any Other Vehicle? ( ) Yes ( ) No					
If Yes, Vehicle Registration Number of Driver's Own Vehicle					
Insurance Company of Driver's Own Vehicle					
Weather Conditions ( ) Clear ( ) Raining ( ) Others					
Road Surface ( ) Dry ( ) Wet ( ) Others					
Was any foreign vehicle involved in this accident? ( ) Yes ( ) No					
Was anybody injured in the accident? ( ) Yes ( ) No					
If yes, injured detail					
Was there any video captured by Car Camera? ( ) Yes ( ) No					
Was the Accident reported to the Police? ( ) Yes ( 1 No If yes attach police report					
DETAILS OF 3rd party Name / Nric Contact					
Veh B SMIN 5837S					
Veh C					
Veh D					
Veh E					
Veh F					
\$ 2 possayers (1) Lee min Er Amelia (F)					



## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding 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.
- 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.
- 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)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my w orkshop 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) w ho 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 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.

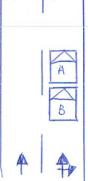
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Veh A' EV 1811 U Mh B. SMN 58375



Describe Circumstances of the Accident	
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The state of the s	
	_
	_

# 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 & Time

Witnessed by Reporting Centre Personnel





Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20221004/7041

## REPORT OF A TRAFFIC ACCIDENT

**Details of Person Involved**Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Date/Time R 04/10/2022		ade:	Vide Report No.:			Station Diary No.:			
Informant's	Particul	ars							
Name of Informant: IAN KOH KAH WAH		Address: 737 YISHUN STREET 72 #03-87 SINGAPORE 760737							
ID Type / ID				ct No.:		OF SINC	DAI OI	ICL 700737	
NRIC NO / S		5J						: 93739373	
Nationality: SINGAPORE CITIZEN		Email: IANKOHKW@GMAIL.COM							
The state of the s	Age: 34	Date of Birth: 14/08/1988	Type of Informant: Driver						
Race: Chinese			Language: Instituti			ion / School Name:			
Occupation: Director			Driving Licence Information:				f Expiry:		
Conoralinta	en otion	of the Accident							
	1	on-Injury		Drink	Date/Time	e of		Type of Location:	
Type of Hit and Run			Drive: Accident: No 03/10/2022 21:10			Straight Road			
Location: No   03/10/2022 21:10									
JURONG WEST STREET 65									
Weather: Clear			Road Surface: Wet				Road Speed Limit:		
Traffic Flow:			Traffic Control:				Traffic Volume:		
One Way									
Type of Collision:							Anyone conveyed by		
Between Moving Vehicles - Head To R			ear				ambulance: No		
Barana V. EVE			: .						
Details of Volume Vehicle No.		Make	· ·		Color	C0.	aditio	No of	
EV1811U	Type Car	iwake		viodei	Color	Cor	nditio	No of 0	
SMN5837S	Car							0	

Use of Pedestrian Crossing: NA





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20221004/7041

#### CONTINUATION OF REPORT

Driver				1			
Name	IAN KOH KAH WAH			ID No.		S8830075J	
Related Vehicle	EV1811U (Car)			Contact No.		93739373	
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL		
Date	NIL	Date		NIL			
No. of Days gran	NIL	Degree of NIL		NIL			

## Brief Details.

On the stated date and time. I, Vehicle A (EV1811U) was stationary on lane 1 of Jurong West Street 64 Towards Jurong West Street 65 due to the traffic was red. Suddenly I felt a huge impact from the rear portion of my stationary vehicle. After I alighted I then realise that is Vehicle B (SMN5837S) that had collided onto my vehicle. I approach to the Vehicle B (SMN5837S) driver he didn't want to get down and hit onto my car one more time. After he bang 2nd time he still refuse to get down and I quickly snap 2 photos of the accident, he then say that move to the front and discuss. But he just drove off in a fast speed and didn't stop at the front as we agreed, so I followed his car and went to a mscp at Block 669 Jurong West Street 64 Deck 2A Parking Lot 127. I approach to him when he exited his vehicle but he did not respond to me at all and walk towards the staircase exit. I didn't continue to follow him as my wife and 4months old baby is still in the car.

I wish to state that I got 2 passengers in my car.

Vehicle A: EV1811U Vehicle B: SMN5837S





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20221004/7041

## **CONTINUATION OF REPORT**

Sketch Plan					
Informant is	not	able	to	provide	sketch

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: 04/10/2022 14:55
Officer In Charge Of Case: TP / TPIB / RASHIDAH BINTE AZMAN Contact No.: 65476902	Classification Of Case: