SS3122AC0002 / SPECIALISTS MOTOR PTE LTD ENTRY DATE & TIME: 12/10/2022 13:33 (SGT) SUBMITTED BY: Irene Ting VERSION: 1 (12/10/2022 13:33 (SGT))

F SII

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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.

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 12/10/2022 13:33 (SGT)

Reported by Both

Date of Accident 10/10/2022 13:20 (SGT)

Exact Location of Accident 101 Towner Rd, Block 101, Singapore 322101

Additional Location Information BLK 101 TOWNER ROAD CARPARK

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFM7118J

INSURED/POLICYHOLDER

Is company?

No
Name Of Registered Owner

NRIC No
SXXXX118Z

Email Address
Vacanzamak@gmail.com
Mobile Phone No
(Phone) +65-97371618

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes
Model C200
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 your vehicle? No - Claimi

your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1991

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Lonpac Insurance Bhd
Z22VP05031307

DRIVER

Name of Driver NRIC No Date Of Birth Occupation MAK ZHI XIANG SXXXX118Z 05/10/1968 Indoor Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number **Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident

Weather Conditions

Road Surface

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

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ATTACHED POLICE REPORT NO. T/20221010/7042

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes No

23/12/1986

417393

Yes

No

Clear

Dry

No

No

Yes

1

No

Yes

Nο

Traffic Police

(Phone) +65-65470000

10 Ubi Avenue 3 Singapore 408865

(Fax) +65-65474900

35 YEARS AND 10 MONTHS

(Phone) +65-97371618

vacanzamak@gmail.com

Collision - Head to Rear

40 LENGKONG TUJOH #07-16

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

SHD6276R

Accident report SS3122AC0002

Vehicle Colour-Vehicle CategoryTaxiName of DriverLIM BAK HUANRIC NoSXXXX629EContact Number-Address-Address complement-Postcode-Insurance Company Name-Nature Of Damage-Details of property damaged in accident-No. Of Passenger (Including Driver)-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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 Traffic Police Department for investigation.

- 6. 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.
- 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)

Lunderstand, acknowledge, agree and consent that:

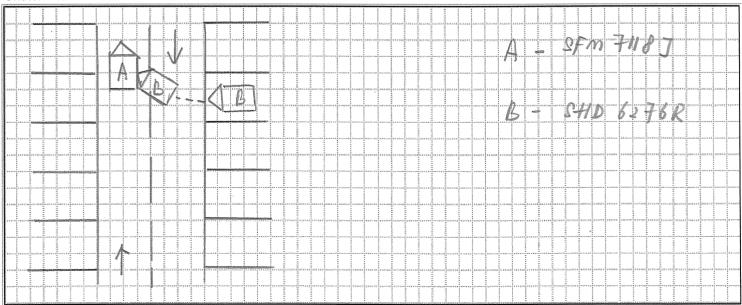
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

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

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

Sketch Plan



Describe Circumstance o					
ATTACKU	police	report	w.	7/2022/010/7042	
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					-

Declaration

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

/ Date & Time

Peticyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)





1 of 3

Report No. T/20221010/7042

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/10/2022 14:47			Vide Report No.:	Station Diary No.:			
Informant'	s Particul	ars					
Name of In	formant:		Address:				
MAK ZHI XIANG			40 LENGKONG TUJOH #07-16 SINGAPORE 417393				
ID Type / ID No.:			Contact No.:				
NRIC NO / S6837118Z			Home/Office: Mobile: 97371618				
Nationality:			Email:				
SINGAPORE CITIZEN			vacanzamak@gmail.com				
Sex:	Age:	Date of Birth:	Type of Informant:				
Male	54	05/10/1968	Vehicle Owner				
Race:			Language:	Institution /	School Name:		
Chinese			English				
Occupation:			Driving Licence Information:				
			Class: 3	Date of Ex	piry:		

General Information of the Accident						
Type of Accident:	Non-Injury Police Vehicle		Drink Drive: No	Date/Time of Accident: 10/10/2022 13:20		Type of Location: Car Park
Location:						
TOWNER ROAD						
Weather: Road		Road	Road Surface:		Road	d Speed Limit:
Clear Dry		Dry	У			n/h
			Control: ontrolled			ic Volume: raffic
Type of Collision: Between Moving Vehicles - Head To Side						one conveyed by ulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SFM7118J	Car	MERCEDES BENZ	C200	Grey		0
SHD6276R	Car	TOYOTA		Maroon		0

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL Use of Pedestrian Crossing: NA				





2 of 3

Report No. T/20221010/7042

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Driver						
	LIM BAK HUA			ID No		S0783629E
Name	LIM BAK HUA		ID No.		50763629E	
				_		
Related Vehicle	SHD6276R (Car)			Contact No. 9		91451722
Hospital/Clinic	NIL			Class of		Class: NIL
				Driving	- 1	Date of Expiry: NIL
				Licence &		
				Expiry		
Date	NIL	Date	NIL			
No. of Days granted Medical Leave NIL			Degree of	e of NIL		
Vehicle Owner						
Name	MAK ZHI XIANG		ID No.		S6837118Z	
Related Vehicle	NIL		Contact No.		97371618	
, , , , , , , , , , , , , , , , , , , ,						
Hospital/Clinic	NIL			Class	of	Class: 3
1100pitali Cililio	INIL			Driving		Date of Expiry: NIL
				Licence	-	bate of Expiry. THE
				Expiry		
	N.111		<u> </u>			
Date	NIL	Date	NIL			
No. of Days gran	NIL	Degree of		NIL		

Brief Details.

The accident happened at the back of Block 101 Towner Road Car park.

As I was driving my vehicle(SFM 7118J) along the carpark driveway, the SMRT cab (SHD 6276R) driven by Mr Lim Bak Hua drove out of a parking lot and hit the rear side of my vehicle.

Attached please find the photos of my vehicle damage condition and his vehicles for ease reference. His NRIC images are attached as well.

Date is 10th Oct 2022 at about 1.20 pm.

Mak Zhi Xiang (S6837118Z)





3 of 3

Report No. T/20221010/7042

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

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:	Date/Time:
Not applicable	10/10/2022 14:47
Officer In Charge Of Case:	Classification Of Case:
TP / TPIB /	Olassification of Casc.
MUHAMMAD FARHAN BIN SAIRI	
Contact No.: 65476350	