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 18/10/2022 15:37 (SGT) Reported by Date of Accident 17/10/2022 20:40 (SGT) Exact Location of Accident Petir Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF5225Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NG YU HUI (HUANG YUHUI) NRIC No SXXXX918G Email Address dnyh1102@gmail.com Mobile Phone No (Phone) +65-82002918 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model E250 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 Yes your vehicle? Vehicle Category Private car Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00172422201

1796

DRIVER

Name of Driver NG YU HUI (HUANG YUHUI) NRIC No SXXXX918G Date Of Birth 11/02/1984 Occupation Indoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	21/02/2009 13 YEARS AND 8 MONTHS Male (Phone) +65-82002918 - dnyh1102@gmail.com 103 PETIR ROAD #22-07 - 678273 Yes - No
Type of Accident Weather Conditions Road Surface	Collided into Motorcyclist 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	
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?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT T/20221018/7029	
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 Vehicle Manufacturer Vehicle Model	FBG7275S - -

Vehicle Variant

Vehicle Colour	_
Vehicle Category	Motorcycle
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)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the socident to speed up the claims process.
- 2. Yhis Form must be completed by the Policyholder and/or the Actual Driver.
- 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.
- 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:

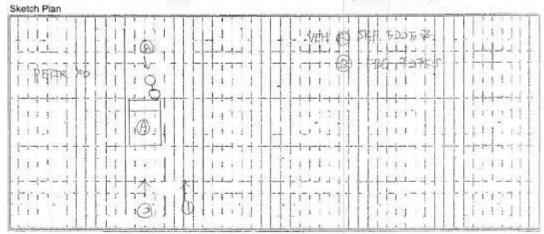
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims:

- (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, maylare 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 | Cate & Time

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

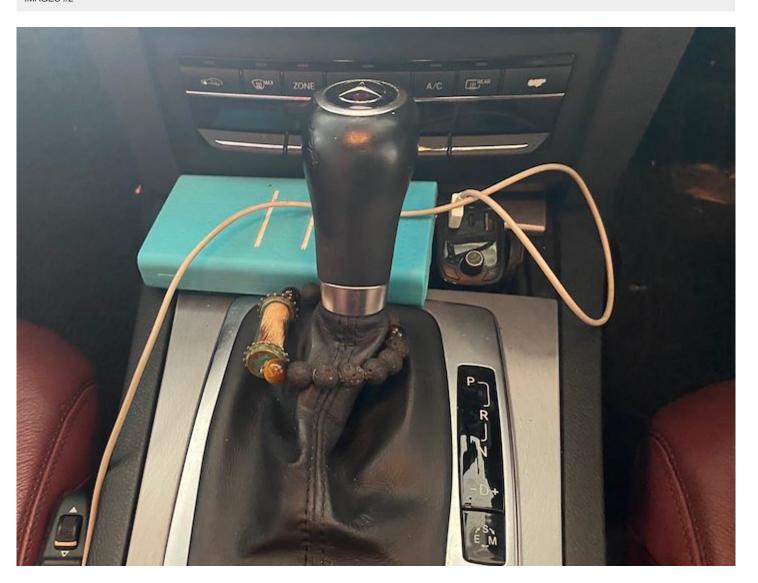
Witnessed by Reporting Centre Personne (Name as in NRIC/ID card)



1

be Circumstance of the Accide	int	
REASE	PEHER TO POUCE REPORT	J120021017 0139.
laration declare the foregoing particular	s are true in every respect.	
sholder's Signature / Dark & Time	Oriver's Signature (if clover is not the policyholder) / Or & Time	He Witnesself by Reporting Certife Personnal (Naffer as in NRICID card)





















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



1 of 3 Report No. T/20221018/7029

REPORT OF A TRAFFIC ACCIDENT

Date/Tir 18/10/20	Date/Time Report Made; 18/10/2022 14:12		Vide Report No.: J/20221017/0139	Station Diary No.		
Informa	nt's Partic	ulars				
Name of Informant: NG YU HUI ID Type / ID No.: NRIC NO / S8403918G Nationality: SINGAPORE CITIZEN			Address: 931 YISHUN CENTRAL	1 #03-109 SINGAPORE 760931		
		18G	Contact No.: Home/Office:	Mobile: 82002918		
		EN	Email: DNYH1102@GMAIL.CO			
Sex: Male	Age: 38	Date of Birth: 11/02/1984	Type of Informant: Vehicle Owner			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: INDOOR			Driving Licence Informati Class:	on; Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive; No	Date/Time of Accident: 17/10/2022 2		Type of Location Straight Road
Location: PETIR ROAD					
200000000000000000000000000000000000000		Road Surface:		Ros	ed Spued Limit:
		Road Surface: Dry		Ros	ad Speed Limit:
Weather: Clear Traffic Flow: Two Way					ed Speed Limit:

ehicle Involve	0				
Туре	Make	Model	Color	Conditio	No of
Motorcycle				Conditio	0
Car					0
ì	Type Motorcycle	Type Make Motorcycle	Type Make Model Motorcycle	Type Make Model Color Motorcycle	Type Make Model Color Conditio

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



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 T/20221018/7029

2 of 3 Report No. T/20221018/7029

CONTINUATION OF REPORT

Vehicle Owner	-					
Name	NG YU HUI		ID No.	8	S8403918G	
Related Vehicle	NIL		Contact No. 820029		82002918	
Hospital/Clinic	NIL			Class of Driving Licence Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Degree of		NIL	

Brief Details.

ON THE STATED DATE & TIME, I WAS DRIVING MY VEHICLE (A) SKF 5225 Z , TRAVELLING ALONG PETIR RD. I WAS DRIVING MY VEHICLE ON LANE 2. BEFORE I DRIVING MY VEHICLE, I HAD CHECKED THE VEHICLE INFRONT OF ME WAS MOVING HIS CAR. SUDDENLY, THE VEHICLE (B) FBG 7275 S INFRONT OF ME SLOW DOWN HIS MOTORBIKE, I CAN'T STOP MY VEHICLE IN TIME, AND ACCIDENTLY HIT ONTO THE REAR OF THE MOTORBIKE. AFTER ACCIDENT , POLICE & AMBULANCE COME OVER, AND THE AMBULANCE TAKE THE MOTORBIKE RIDER TO HOSPITAL. POLICE HAVE PASS A PAPER ASKED TO USED THE REF NO: J/20221017/0139 (NP168)

VEH (A) SKF 5225 Z VEH (B) FBG 7275 S



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

Informant is not able to provide sketch

Sketch Plan



3 of 3 Report No. T/20221018/7029

CONTINUATION OF REPORT

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: 18/10/2022 14:12
Officer In Charge Of Case: FP / TPIB / /ILTON HIA WEE SIANG Contact No.: 65476232	Classification Of Case:

NP168