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 17/11/2022 17:12 (SGT) Reported by Driver Date of Accident 16/11/2022 21:50 (SGT) Exact Location of Accident CTE, Singapore Additional Location Information CTE TOWARDS TPE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mazda

Auto

1598

Vehicle Registration Number SKU8275E

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner IMA LEE NRIC No SXXXX144H Email Address KELVIN SIM SHUI FA@HOTMAIL.COM Mobile Phone No (Phone) +65-90118355 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model 3 Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5129565158

DRIVER

CC

Name of Driver SIM SHUI FA, KELVIN NRIC No SXXXX809G Date Of Birth 03/03/1990 Occupation Outdoor

Date Of Driving Pass 09/12/2010 Driving experience 11 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-90118355 Alt. Phone Number Email Address KELVIN_SIM_SHUI_FA@HOTMAIL.COM Address 673C EDGEFIELD PLAINS Address complement #09-625 Postcode 823673 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 Collision - Head to Rear Weather Conditions **DRIZZLING** Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No 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 **PASSENGER** Gender **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Punggol Neighbourhood Police Centre Police Station Phone No (Phone) +65-18006049999 Alt. Police Station Phone No (Fax) +65-64468015 Police Station Address Blk 21A Tebing Lane Singapore 828837 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED 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	SLK7026E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-90110454
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 withut 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.
- 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)

l 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 provide or agents

(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Sigrifiture / Date & Time

(if driver is not the policyholder) / Date

Witnessed by Reportin

Sketch Plan

VENICLE A: SKUBJ75E Vehille B: SLK7076E CTE towards TPE

Describe Circumstance of the	Accident		
	- Refer to Polic P	LOOV+ -	
		Alexander and a second a second and a second a second and	
Declaration I/We declare the foregoing partic	restore and true in autore removal		
the outere are receiving partic	where the nit every respect	SERVI	90
^		Co. Reg 2003 180	85G m
V	A.,	T (2)	-31





Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 Read No Transmitters

REPORT OF A TRAFFIC ACCIDENT

	late/Time Report Made: 7/11/2022 12:16		Vide Report No.: Station 40		
Informa	nt's Partice	ulars	SERVICE SERVICE SERVICE	Republication of the last	
	Informant: JI FA, KELV	ЛN	Address: APT BLK 673C EDGEFIELD 823673	PLAINS #09-625 SINGAPORE	
ID Type NRIC NO	/ ID No.: D / S900780	9G	Contact No.: Home/Office: Mobile: 90118355		
National SINGAP	ty: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth: 03/03/1990	Type of Informant: Driver		
Race: Chinese			Language: Institution / School N.		
Occupa TADA (tion: ORIVER		Driving Licence Information: Class: 2B,2A,3,4A	Date of Expiry:	

Type of Accident:	Non-Injury Government Proper	ty Drink Drive: No.	Date/Time of Accident: 16/11/2022 21:50.	Type of Location Road towards the tunnel
Location: CENTRAL EX	(PRESSWAY	Road Surface:	ı	Road Speed Limit:
Weather: Drizzling		Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled	62	Traffic Volume: Moderate
One way	ion:	-		Anyone conveyed by

Vehide No.	Type	Make	Model	Color	Condition	No of Passenge
	The Party of the P				Seriously	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Dedestrians Injured: NII	Use of Pedestrian Crossing: NA









Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

2 of 3 Report No. T/20221117/2032

CONTINUATION OF REPORT

Name	SIM SHUI FA, KELVIN		ID No.	S9007809G	
Related Vehicle	NIL		Contact No.	90118355	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4A Date of Expiry: NIL	
Date Treatment	NIL Date Disc			harge NIL	
No. of Days gran	nted Medical Leave NIL Degree of			Injury NIL	

Brief Details

On the 16/11/22, at around 2120pm, on the CTE road towards the tunnel before Punggol. My vehicle SKU8275E self-skidded on the CTE road towards the tunnel before Punggol I did not hit anything during that point of time. I checked with my passenger who was on board if he was injured, he informed me that he was not injured and just wanted to go home. After the skidding incident on left lane, I open my bonnet, switch on my hazard light, hand break up and started to direct the traffic while waiting for the tow truck to arrival. At around 2150hrs, a vehicle SLK7026E suddenly hit my car. His car also skidded from the right lane to the left lane I suspect he was driving at a speed of 90-100km. Particulars was exchange with Driver of SLK7026E was Abdul Malek, S7081852C, Blk 688D Woodland Drive 75#05-52 Sg(734688). Driver of SLK7026E informed that he will be flying off today 17/11/22 never mentioned when he will return. No Injuries, no ambulance and no TP was informed. I have the recording and photo of the incident.









Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 Report No. T/20221117/2032

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: F /

SGT 2 ALOYSIUS CHEW YAO HUI ALL

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / AEIT / SR STAFF SGT MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219

NP168

Signature Of Informant:



Date/Time: 17/11/2022 12:16

Classification Of Case:

CS CamScanner