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 12/11/2022 12:11 (SGT) Reported by Both Date of Accident 11/11/2022 19:45 (SGT) Exact Location of Accident Bukit Timah Rd, Singapore Additional Location Information **FLYOVER** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJM9390C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **CHONG WEN XUAN** NRIC No S9611300E Email Address wenxuan5566@gmail.com Mobile Phone No (Phone) +65-84889455 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Hyundai Model Avante Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1591

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2001615564-01

DRIVER

Name of Driver **CHONG WEN XUAN** NRIC No S9611300E Date Of Birth 02/04/1996 Occupation Indoor

Date Of Driving Pass 02/03/2019 Driving experience 3 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-84889455 Alt. Phone Number Email Address wenxuan5566@gmail.com Address APT BLK 895C WOODLANDS DRIVE 50 #09-52 Address complement Postcode 732895 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No 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 Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? Yes 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 **FOREIGN VEHICLE 1** Vehicle Registration Number JLJ9896 Vehicle Category Private car **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT ATTACHMENT(S)

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Yes

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Vehicle Registration Number	SLS3179G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	VINCENT HA KWANG YUEN
NRIC No	S8435271C
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	JLJ9896
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LAI MAU WOON
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1990
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1990

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

SP2001615564-01 Certificate Number Date of Issue 2022-04-19 Coverage : Comprehensive Policyholder : CHONG WEN XUAN

Period of Insurance : 19 April 2022 to 18 April 2023(both dates inclusive)

: SJM9390C Registration No.

: KMHDU41BR9U647850 Chassis number of Vehicle

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
- (b) Any other person who is driving on the Policyholder's order or with the his/her permission

*Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Mator Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

Limitation as to Use^:

Used only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purposes in connection with the Motor Trade

*Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or Amendment, Act or Acts passed in substitution thereof.

19 April 2022

Issued Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

600.00

100.00

Intermediary Code : 0000128 Allianz

: Own Damage Excess SGD Excess SGD : Windscreen Excess

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

SKETCH PLAN

IMPORTANT NOTICE

- 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 Authorised 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.
- 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.
- 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.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

KETCH PLAN		
		A: SJM 9390C
	C	B: SLS 31796
	B	C: 212 4848
SCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
hefer to poli	e 1904 7/2672 1111/70	83
ECLARATION		
Ne declare the foregoing part	iculars are true in every respect.	Yub
olicyholder's Signature ate & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

Date & Time:

NRIC/FIN No.:













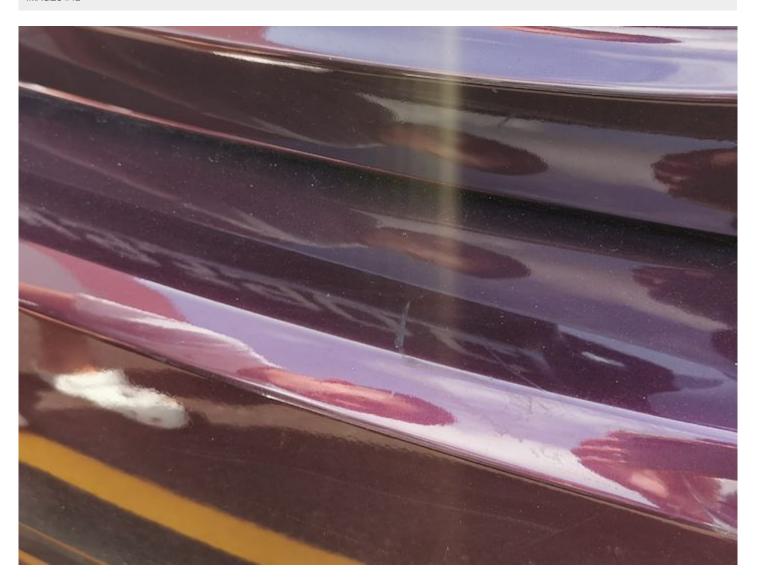




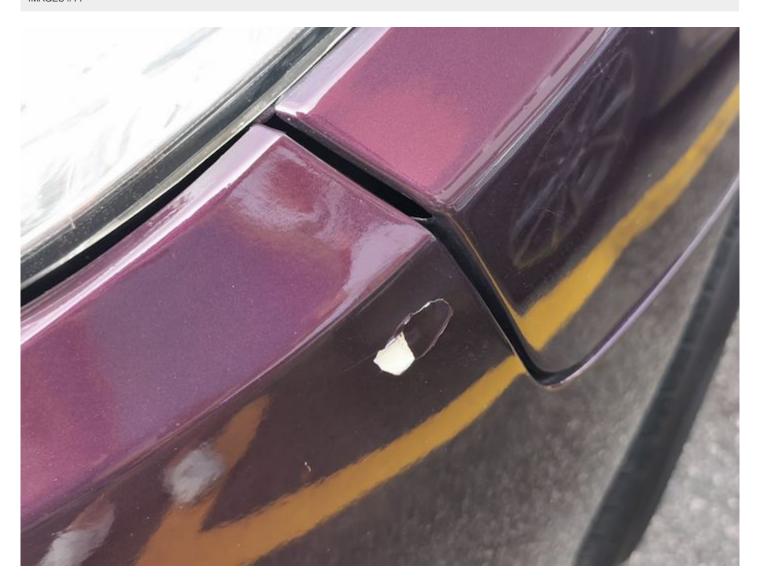




































Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1/20221111//083

Report No. T/20221111/7083

REPORT OF A TRAFFIC ACCIDENT

11/11/2022 22:53			Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: CHONG WEN XUAN			Address: 895C WOODLANDS [DRIVE 50 #09-52 SINGAPORE 732895		
ID Type / ID No.: NRIC NO / S9611300E			Contact No.: Home/Office: Mobile: 84889455			
	Nationality: SINGAPORE CITIZEN		Email: WENXUAN5566@GMAIL.COM			
Sex: Male	Age: 26	Date of Birth: 02/04/1996	Type of Informant: Driver			
Race: Chinese		Language: Institution / School Na English				
Occupation:		Driving Licence Inform Class:	Date of Expiry:			

Type of Accident:			Date/Time of Accident: 11/11/2022 19:45	Type of Location Flyover
Location: BUKIT TIMAH	I ROAD			
		Road Surface: Wet		Road Speed Limit: 80 Km/h
Weather: Drizzling Traffic Flow: One Way				

				-		
Vehicle No.	Type	Make	Model	Color	Conditio	No of
JLJ 9896	Car		Toyota	Grey	Slightly Damaged	0
SJM9390C	Car	HYUNDAI	HD+AVANT E+1.6+A	Red	Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20221111/7083

CONTINUATION OF REPORT

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLS 3179G	Car		Honda	White	Slightly Damaged	1

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SJM9390C	ALLIANZ INSURANCE SINGAPORE PTE. LTD.	SP2001615564	19/04/2022	18/04/2023	

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestriar	. of Pedestrians Injured: NIL Use of P				Cross	ing: NA
Driver	*		- 20			
Name	LAI MAU WOON			ID No	3	931229-01-5071
Related Vehicle	JLJ 9896 (Car)			Conta	ct No.	91677551
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: 29/12/2026
Date	NIL		Date	1	NIL	
No. of Days gran	ted Medical Leave	Degree o	f	NIL		
Driver						
Name	CHONG WEN XUAN			ID No		S9611300E
Related Vehicle	SJM9390C (Car)			Conta	ct No.	84889455
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL	171	Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20221111/7083

CONTINUATION OF REPORT

Driver					
Name	VINCENT HA KWA XIA GUANGYUAN)		ID No.	S8435271C	
Related Vehicle	SLS 3179G (Car)			Contact N	lo. NIL
Hospital/Clinic	NIL			Class of Driving Licence 8 Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	26	Date	NI	L
No. of Days gran	ted Medical Leave	NIL	Degree o	of NI	L

Brief Details.

I drove from Nee Soon Camp to Lucky Plaza at 1924 hrs after work. I navigated my way using Google maps. The App directed me to head to Lucky Plaza using SLE - CTE and towards exit 5 towards Cairhill Circle. I was at the most right lane as I was passing by Exit 6 towards Bukit Timah Road. I started to filter left towards lane 2 as I needed to use the left 2 lanes to take exit 5 towards Cairhill Circle. Suddenly, the foreign vehicle in front of me (JLJ 9896) jammed brake and I reacted accordingly and performed emergency brake, the car behind me (SLS 3179G) bumped into me causing me to hit the front car. We alighted from our vehicles, took photos of each others licenses and car damages.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20221111/7083

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: 11/11/2022 22:53
Officer In Charge Of Case: TP / TPIB / FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:

NP168