

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 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. 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	28/11/2022 16:06 (SGT)
Reported by	Both
Date of Accident	25/11/2022 17:37 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	MIDVIEW CITY MULTI-STOREY CARPARK (LEVEL 4)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN1454A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOH CHENG WAI
NRIC No	SXXXX840Z
Email Address	kcwbai@gmail.com
Mobile Phone No	(Phone) +65-97107565
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS 1.6 AUTO
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

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

DRIVER

Name of Driver	KOH CHENG WAI
NRIC No	SXXXX840Z
Date Of Birth	09/10/1989
Occupation	Indoor

Date Of Driving Pass	20/02/2010
Driving experience	12 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97107565
Alt. Phone Number	-
Email Address	kcwbai@gmail.com
Address	BLK 827 WOODLANDS STREET 81 #11-86
Address complement	-
Postcode	730827
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	Collision - Head on collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE STATED DATE AND TIME, I WAS TRAVELING STRAIGHT ALONG MIDVIEW CITY MULTI STOREY CARPARK LEVEL 4. VEHICLE BEARING CARPLATE SMX6532L SUDDENLY CAME OUT FROM THE CARPARK LOT WITHOUT OBSERVING THE TRAFFIC, CAUSING THE COLLISION AND DAMAGES TO THE FRONT LEFT HANDPORTION OF MY VEHICLE

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMX6532L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

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)	-

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1. Please report correctly the details of the accident in terms of the claims process.
2. The Firm must be covered by the Road Traffic and the Motor Vehicle
3. Information provided must be as correct and accurate as possible. Any self-insured person is responsible if motorist fails to take insurance compliant to relevant rules and regulations.
4. The details and experience of the Firm's insurance companies as well as coverage of policy validity, on the part of the insurance companies.
5. Any false reporting may be referred to the Traffic Police Department for investigation.
6. The report will be forwarded by the insurers to the Civil Records Management Centre established by the General Managers Association of Singapore (GMA) for archiving and that access of the report will not be made available without objection by interested parties.
7. By the signatories of the report in the relevant documents contained in the archiving of this report to the Centre and its information will again being made available elsewhere.
8. Consent under the Personal Data Protection Act (PDPA)

1. 1990-1994 1994 2000 2004 2008 2012 2016 2020 2024 2028 2032 2036 2040 2044 2048 2052 2056 2060 2064 2068 2072 2076 2080 2084 2088 2092 2096 2100 2104 2108 2112 2116 2120 2124 2128 2132 2136 2140 2144 2148 2152 2156 2160 2164 2168 2172 2176 2180 2184 2188 2192 2196 2200 2204 2208 2212 2216 2220 2224 2228 2232 2236 2240 2244 2248 2252 2256 2260 2264 2268 2272 2276 2280 2284 2288 2292 2296 2300 2304 2308 2312 2316 2320 2324 2328 2332 2336 2340 2344 2348 2352 2356 2360 2364 2368 2372 2376 2380 2384 2388 2392 2396 2400 2404 2408 2412 2416 2420 2424 2428 2432 2436 2440 2444 2448 2452 2456 2460 2464 2468 2472 2476 2480 2484 2488 2492 2496 2500 2504 2508 2512 2516 2520 2524 2528 2532 2536 2540 2544 2548 2552 2556 2560 2564 2568 2572 2576 2580 2584 2588 2592 2596 2600 2604 2608 2612 2616 2620 2624 2628 2632 2636 2640 2644 2648 2652 2656 2660 2664 2668 2672 2676 2680 2684 2688 2692 2696 2700 2704 2708 2712 2716 2720 2724 2728 2732 2736 2740 2744 2748 2752 2756 2760 2764 2768 2772 2776 2780 2784 2788 2792 2796 2800 2804 2808 2812 2816 2820 2824 2828 2832 2836 2840 2844 2848 2852 2856 2860 2864 2868 2872 2876 2880 2884 2888 2892 2896 2900 2904 2908 2912 2916 2920 2924 2928 2932 2936 2940 2944 2948 2952 2956 2960 2964 2968 2972 2976 2980 2984 2988 2992 2996 3000 3004 3008 3012 3016 3020 3024 3028 3032 3036 3040 3044 3048 3052 3056 3060 3064 3068 3072 3076 3080 3084 3088 3092 3096 3100 3104 3108 3112 3116 3120 3124 3128 3132 3136 3140 3144 3148 3152 3156 3160 3164 3168 3172 3176 3180 3184 3188 3192 3196 3200 3204 3208 3212 3216 3220 3224 3228 3232 3236 3240 3244 3248 3252 3256 3260 3264 3268 3272 3276 3280 3284 3288 3292 3296 3300 3304 3308 3312 3316 3320 3324 3328 3332 3336 3340 3344 3348 3352 3356 3360 3364 3368 3372 3376 3380 3384 3388 3392 3396 3400 3404 3408 3412 3416 3420 3424 3428 3432 3436 3440 3444 3448 3452 3456 3460 3464 3468 3472 3476 3480 3484 3488 3492 3496 3500 3504 3508 3512 3516 3520 3524 3528 3532 3536 3540 3544 3548 3552 3556 3560 3564 3568 3572 3576 3580 3584 3588 3592 3596 3600 3604 3608 3612 3616 3620 3624 3628 3632 3636 3640 3644 3648 3652 3656 3660 3664 3668 3672 3676 3680 3684 3688 3692 3696 3700 3704 3708 3712 3716 3720 3724 3728 3732 3736 3740 3744 3748 3752 3756 3760 3764 3768 3772 3776 3780 3784 3788 3792 3796 3800 3804 3808 3812 3816 3820 3824 3828 3832 3836 3840 3844 3848 3852 3856 3860 3864 3868 3872 3876 3880 3884 3888 3892 3896 3900 3904 3908 3912 3916 3920 3924 3928 3932 3936 3940 3944 3948 3952 3956 3960 3964 3968 3972 3976 3980 3984 3988 3992 3996 4000 4004 4008 4012 4016 4020 4024 4028 4032 4036 4040 4044 4048 4052 4056 4060 4064 4068 4072 4076 4080 4084 4088 4092 4096 4100 4104 4108 4112 4116 4120 4124 4128 4132 4136 4140 4144 4148 4152 4156 4160 4164 4168 4172 4176 4180 4184 4188 4192 4196 4200 4204 4208 4212 4216 4220 4224 4228 4232 4236 4240 4244 4248 4252 4256 4260 4264 4268 4272 4276 4280 4284 4288 4292 4296 4300 4304 4308 4312 4316 4320 4324 4328 4332 4336 4340 4344 4348 4352 4356 4360 4364 4368 4372 4376 4380 4384 4388 4392 4396 4400 4404 4408 4412 4416 4420 4424 4428 4432 4436 4440 4444 4448 4452 4456 4460 4464 4468 4472 4476 4480 4484 4488 4492 4496 4500 4504 4508 4512 4516 4520 4524 4528 4532 4536 4540 4544 4548 4552 4556 4560 4564 4568 4572 4576 4580 4584 4588 4592 4596 4600 4604 4608 4612 4616 4620 4624 4628 4632 4636 4640 4644 4648 4652 4656 4660 4664 4668 4672 4676 4680 4684 4688 4692 4696 4700 4704 4708 4712 4716 4720 4724 4728 4732 4736 4740 4744 4748 4752 4756 4760 4764 4768 4772 4776 4780 4784 4788 4792 4796 4800 4804 4808 4812 4816 4820 4824 4828 4832 4836 4840 4844 4848 4852 4856 4860 4864 4868 4872 4876 4880 4884 4888 4892 4896 4900 4904 4908 4912 4916 4920 4924 4928 4932 4936 4940 4944 4948 4952 4956 4960 4964 4968 4972 4976 4980 4984 4988 4992 4996 5000 5004 5008 5012 5016 5020 5024 5028 5032 5036 5040 5044 5048 5052 5056 5060 5064 5068 5072 5076 5080 5084 5088 5092 5096 5100 5104 5108 5112 5116 5120 5124 5128 5132 5136 5140 5144 5148 5152 5156 5160 5164 5168 5172 5176 5180 5184 5188 5192 5196 5200 5204 5208 5212 5216 5220 5224 5228 5232 5236 5240 5244 5248 5252 5256 5

$x_1, \dots, x_n \in \mathbb{R}^n$ are linearly independent if and only if the matrix $A = [x_1 \dots x_n]$ is invertible.

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ACKNOWLEDGMENTS

