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 25/11/2022 14:38 (SGT) Reported by Owner Date of Accident 24/11/2022 19:30 (SGT) Exact Location of Accident Loyang Link, Singapore Additional Location Information SHELL PETROL KIOSK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Yes

Vehicle Registration Number SNH1140P

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner JETSEA LOGISTICS (S) PTE LTD Company Reg No 1XXXXX816C Email Address RONTAY@JETSEA.COM.SG Mobile Phone No (Phone) +65-97525291 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model Α7 Variant SPORTBACK 2.0 TFS

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?

Vehicle Category Private car Transmission Auto CC 1984

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7220111308

DRIVER

Name of Driver TAY POH CHEOK NRIC No SXXXX304E Date Of Birth 03/03/1948 Occupation Outdoor

Date Of Driving Pass 29/09/1972 Driving experience 50 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-97525291 Alt. Phone Number Email Address RONTAY@JETSEA.COM.SG Address 27 PASIR RIS GROVE Address complement #15-54 Postcode 518073 Is the driver the policyholder? If No, Relationship of the Driver with the Insured **SHAREHOLDER** 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry 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? 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? Yes Police Station Name Pasir Ris Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005852999 Alt. Police Station Phone No (Fax) +65-65855261 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE POLICE REPORT. 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 **UNKNOWN** Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Goods vehicle
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

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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.
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- 6. 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 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

- Refer t	police report dated.
25-11-20	5 Portice 1 Sport
20 (1-20	
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124000	
eclaration	
We declare the foregoing particula	ars are true in every respect
we deciare the foregoing particula	no die due ni etely respecti
	0 00
	Roway
licyholder's Signature / Date &	Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Centre

Time

& Time

Personnel





1 of 2

Report No. G/20221125/2007

POLICE REPORT (NP299)

Police Station Of Origin Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

Date/Time Report Made 25/11/2022 00:52	Vide Report No.		Station Diary No. 5	
Name Of Informant TAY POH CHEOK	Address 27 PASIR RIS GROVE #15-54 SINGAPORE 518073			
ID Type / ID No. NRIC NO / S0646304E	Contact No. Home/Office		Mobile 97525291	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation	Sex	Age	Date of Birth	Race
Managing director/Chief executive officer	Male	74	03/03/1948	Chinese
Institution/School Name	Language English			
Date/Time Of Incident 24/11/2022 19:30	Location Of Incident 1 NEW LOYANG LINK SHELL PASIR RIS SINGAPORE 506931			

Brief details.

On 24/11/2022 at 1930hrs, I had pumped petrol at Shell Petrol Kiosk along New Loyang Link. My car is a dark blue color Audi A7, SNH1140P. After pumping petrol and making payment, I got into my car and wanted to drive off. I reversed my car as I wanted to exit by Loyang Avenue. I did not see any vehicle behind and that was why I engaged the reverse gear and proceeded to reverse. Out of a sudden, a lorry turned into the place I was reversing hence there was a collision. The driver and myself got out of our respective vehicles and I acknowledged that I had made a mistake and we agreed to settle on S\$150 payment from me to him which I paid in cash immediately due to a minor dent on the front part of the

Signature Of Officer Recording The Report: G / SR STAFF SGT MUHAMMAD SHAHMEER BIN ABDUL REHMAN	Signature Of Informant:		
Signature Of Interpreter: Not applicable	Date/Time: 25/11/2022 00:52		
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (2) CHENG ZAI HONG BENJAMIN Contact No.:	Classification Of Case:		





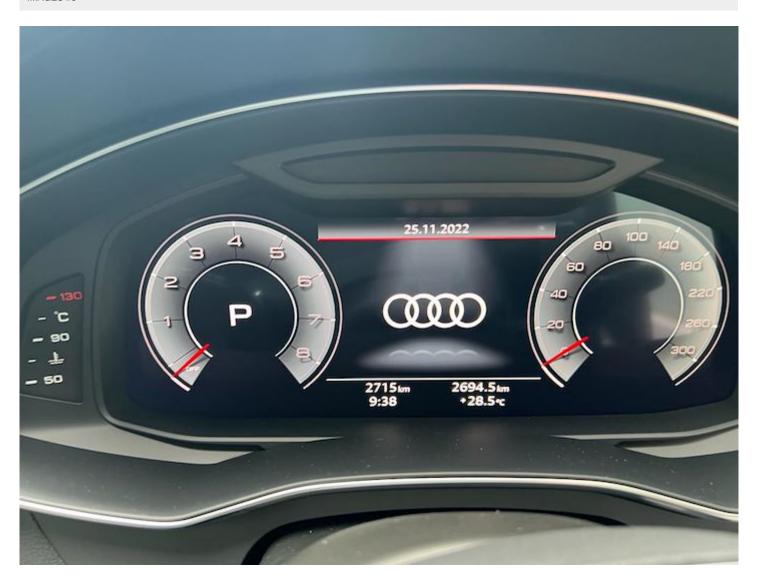
























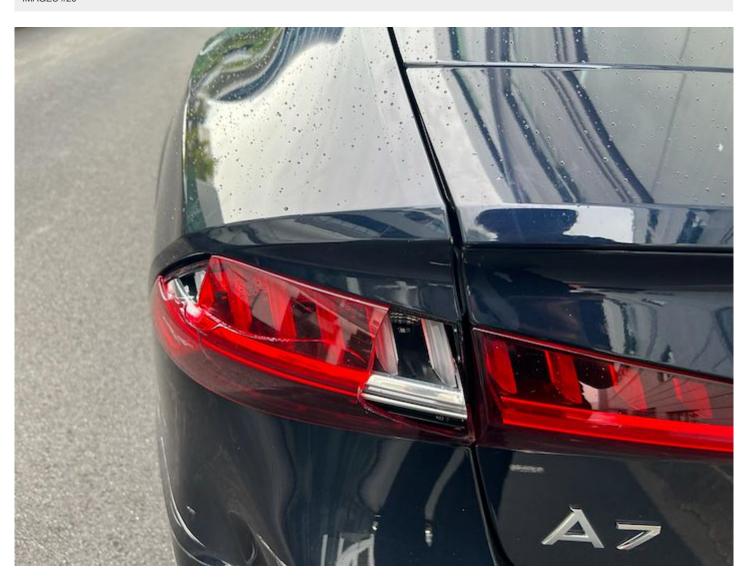


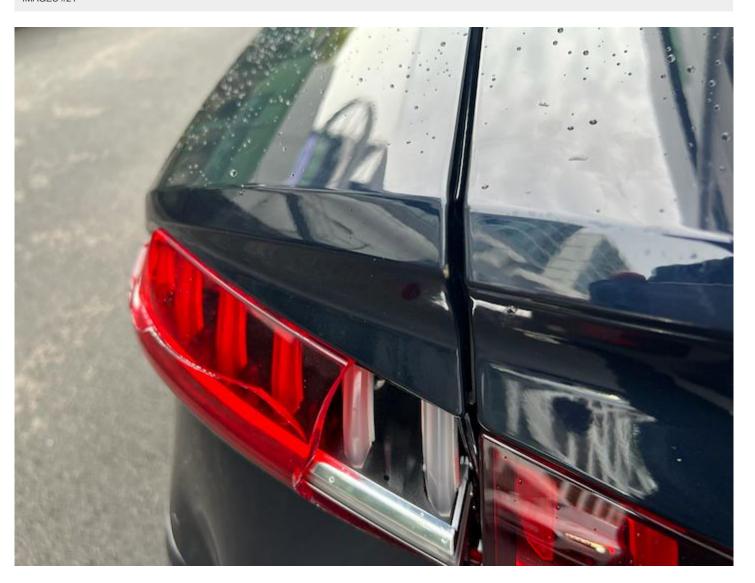




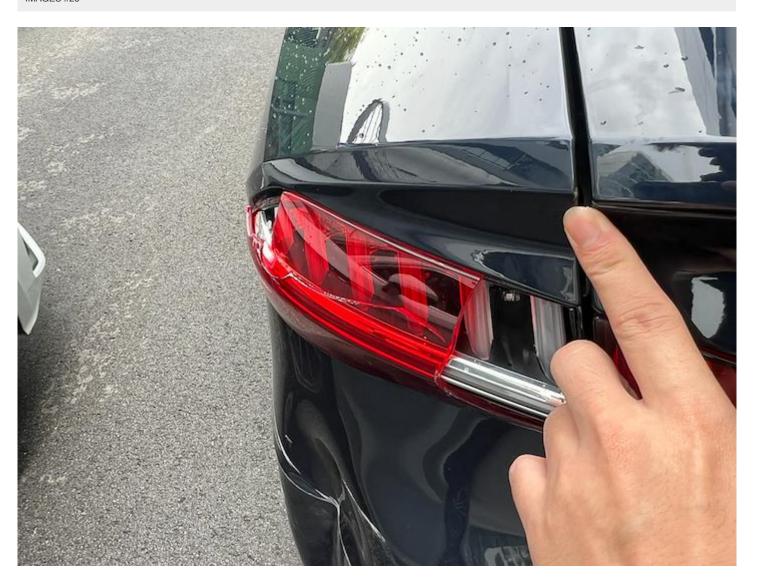




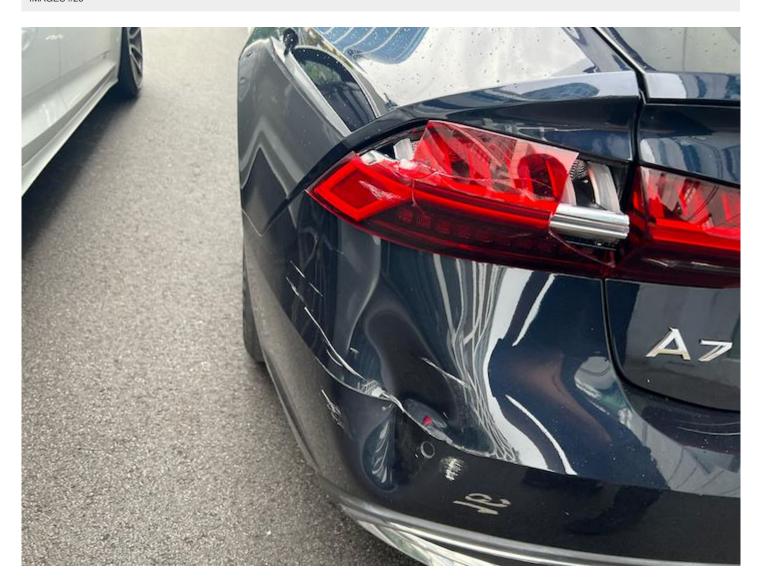






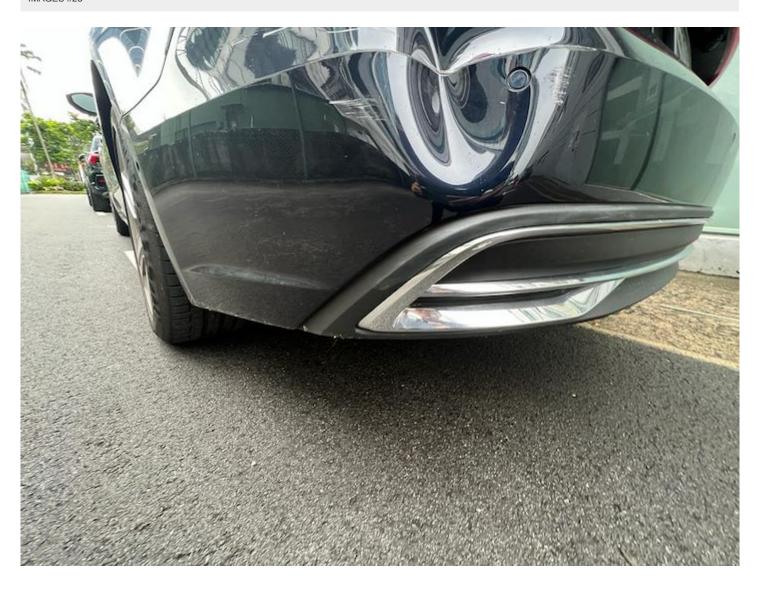
















1 of 2

Report No. G/20221125/2007

POLICE REPORT (NP299)

Police Station Of Origin Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

Date/Time Report Made 25/11/2022 00:52	Vide Report No.		Station Diary No. 5	
Name Of Informant TAY POH CHEOK	Address 27 PASIR RIS GROVE #15-54 SINGAPORE 518073			
ID Type / ID No. NRIC NO / S0646304E	Contact No. Home/Office		Mobile 97525291	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation	Sex	Age	Date of Birth	Race
Managing director/Chief executive officer	Male	74	03/03/1948	Chinese
Institution/School Name	Language English			
Date/Time Of Incident 24/11/2022 19:30	Location Of Incident 1 NEW LOYANG LINK SHELL PASIR RIS SINGAPORE 506931			

Brief details.

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Signature Of Officer Recording The Report: G / SR STAFF SGT MUHAMMAD SHAHMEER BIN ABDUL REHMAN	Signature Of Informant:	Rawley	
Signature Of Interpreter: Not applicable	Date/Time: 25/11/2022 00:52		
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (2) CHENG ZAI HONG BENJAMIN Contact No.:	Classification Of Case:		



G/20221125/2007

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20221125/2007

lorry. We signed a piece of paper agreeing that we had settled the minor accident between ourselves. No one was injured nor other vehicle were involved. No other property within the premises were damaged.

I did not take pictures of the damage to the said lorry nor the said piece of paper that the other driver and myself had signed. I also did not exchange particulars nor take down the vehicle number of the said lorry thinking that we had already settled the said matter. My car suffered scratches and dents on the rear left bumper and also cracked left tail light. There are also damages to the back portion of my car. I am lodging this report for my own reference as I want to file a claim from my own insurance to get the repair done for my car.

Signature Of Officer Recording The Report: G / SR STAFF SGT MUHAMMAD SHAHMEER BIN ABDUL REHMAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 25/11/2022 00:52
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (2) CHENG ZAI HONG BENJAMIN Contact No.:	Classification Of Case: