

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	09/12/2022 23:25 (SGT)
Reported by	Driver
Date of Accident	08/12/2022 11:05 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TOWARDS CHANGI AIRPORT BEFORE ENG NEO AVE EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNH5775G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MERCEDES-BENZ FLEET MANAGEMENT SINGAPORE PTE. LTD
Company Reg No	199803778Z
Email Address	derrick.lee@mercedes-benz.com
Mobile Phone No	(Phone) +65-68498118
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Tesla
Model	MODEL Y RWD
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 your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	999995580

DRIVER

Name of Driver	LOH CHENG TUAN MALCOLM
NRIC No	S1813915D
Date Of Birth	20/12/1967

Occupation	Indoor
Date Of Driving Pass	26/12/1985
Driving experience	37 YEARS
Gender	Male
Mobile Number	(Phone) +65-90295677
Alt. Phone Number	-
Email Address	mloh77@yahoo.com.sg
Address	Braddell Heights Estate, 6 Chiltern Drive
Address complement	-
Postcode	S359723
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	5
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	-

PASSENGER 1

Name	PHUAH SOCK PIN
Gender	Female

PASSENGER 2

Name	QUEK PAK HOON
Gender	Female

PASSENGER 3

Name	PHUAH SOCK TIN
Gender	Female

PASSENGER 4

Name	MARITES ARACAN
Gender	Female

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 Thu 8 December 2022, at 11:05am, I was driving along lane 2 of PIE towards Changi Airport before the Eng Neo Avenue exit. The car in front suddenly braked and came to a complete stop. I also had to apply the brakes and also managed to come to a complete stop.

A few moments later, we felt an impact from behind. The car behind hit into my car causing it to move forward and hit the car in front, With me in the car were the following persons

- my wife, Phuah Sock Pin, who was seated in front with me
- my sister-in-law, Phuah Sock Tin, Doris who was seated behind my wife
- my mom-in-law, Quek Pak Hoon, who was seated in the middle
- my mom-in-law's domestic helper, Marites Anacan

The 3 passengers behind felt the impact from the car at the back. Doris, who is a pharmacist had her glasses thrown on the floor of the car as a result of the impact. Her head hit the back seat twice from the impact and for 5 minutes, she felt a sharp pain at the back of her head. It subsided but a dull pain persisted around her cervical spine area, which was tensed up. Her head was spinning, and she had to take paracetamol/ orphenadrine tablet 2 times that day. Her lumbar spine area also ached, and her uterus seemed to be moving back and forth 2 days after the accident. She had headache and her cervical spine area seemed tensed and hurt. She had to take paracetamol/ orphenadrine tab again to relieve the tension and pain.

My mom-in-law had bruises on her left arm, and also swelling below her eyes.

My wife felt tightness in her chest and also had a big bruise on the left side of her thigh just below the hip area. She went to see a doctor and was diagnosed to suffer from chest contusion, shoulder and backache as a result of the impact from the rear vehicle.

The helper had bruises on her right arm, felt dizzy and had a headache.

(PLEASE REFER TO ATTACHED DESCRIBE CIRCUMSTANCE OF THE ACCIDENT)

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 SMW2339K
Vehicle Manufacturer Toyota
Vehicle Model Camry
Vehicle Variant -
Vehicle Colour Gray
Vehicle Category Private car
Name of Driver TAN BEE CHOO
Contact Number (Phone) +65-91006838
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

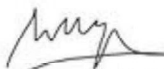
Vehicle Registration Number SKX2193G
Vehicle Manufacturer Nissan
Vehicle Model Almera
Vehicle Variant -
Vehicle Colour Red
Vehicle Category Private car
Name of Driver SENG PUAH CHOR
Contact Number (Phone) +65-90128016
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) 1

SKETCH PLAN**IMPORTANT NOTICE**

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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.
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, 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.



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed By Reporting Officer
Hashim Bin Kamari

Witnessed by Reporting Centre
Personnel

Sketch Plan

REFER TO ATTACHED ACCIDENT DIAGRAM

Describe Circumstances of the Accident

REFER AS PER ATTACHED SELF RECORDED STATEMENT BY HIRER.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

Driver's Signature (If driver is not the policyholder) / Date
& Time

Witnessed By Reporting Officer
Hashim Bin Kamari

Witnessed by Reporting Centre
Personnel

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- (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 / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

ENJ NEO AVE

Exit 22

(A) -> SNH 5775G

(B) -> SMW 2339K

(C) -> SKX 2193G

PTE

Describe Circumstances of the Accident



On Thu 8 December 2022 at 11:05 AM, I was driving along Lane 2 of PLE towards Changi Airport before the Eng Neo Exit. The car in front suddenly braked and I also braked.

The car behind then hit into my car causing my car to move forward and hit the car in front.

Declaration

We declare the foregoing particulars are true in every respect.

We declare the foregoing particulars are true in every respect.

 Policyholder's Signature / Date & Time	 8/12/2022 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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Witnessed by Reporting Centre
Personnel

susan@ajaxmars.com

From: Malcolm Loh <mloh77@yahoo.com.sg>
Sent: Sunday, 11 December 2022 7:05 pm
To: group@ajaxmars.com
Subject: Fw: Your accident report has been successfully submitted
Attachments: image0.jpeg; Untitled attachment 00023.html; Full_accident_report_8770106_09-12-2022_232558.pdf; Untitled attachment 00026.html

Hi there

Please make the following amendments to the accident report

(1) page 2: my wife's surname should be "Phuah" and not "Phua"

(2) page 7: please amend as follows:

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A few moments later, we felt an impact from behind. The car behind hit into my car causing it to move forward and hit the car in front,

With me in the car were the following persons

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My mom-in-law had bruises on her left arm, and also swelling below her eyes.

My wife felt tightness in her chest and also had a big bruise on the left side of her thigh just below the hip area. She went to see a doctor and was diagnosed to suffer from chest contusion, shoulder and backache as a result of the impact from the rear vehicle.

The helper had bruises on her right arm, felt dizzy and had a headache.

As for myself, I stepped out of the car to examine it and was shocked to see that the car behind had its entire bonnet crushed inward and the airbags were also activated. She had obviously been driving dangerously very fast. Had it not been for my car being in between hers and the car in front, she would have caused very serious injury or even death to the driver of the car that was in front of me.

(3) to add as page 20

photo of the car behind with its airbags activated.