

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 14/12/2022 15:30 (SGT)
Reported by Both
Date of Accident 13/12/2022 11:10 (SGT)
Exact Location of Accident 10D Leith Rd, Singapore 547888
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMM7462G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner QUEK SI MIN
NRIC No S9544966B
Email Address SIMIN95@HOTMAIL.SG
Mobile Phone No (Phone) +65-90119256
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Avante
Variant -
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 1600

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number P10756954R00

DRIVER

Name of Driver QUEK SI MIN
NRIC No S9544966B
Date Of Birth 03/12/1995
Occupation Indoor

Date Of Driving Pass	03/12/2015
Driving experience	7 YEARS
Gender	Female
Mobile Number	(Phone) +65-90119256
Alt. Phone Number	-
Email Address	SIMIN95@HOTMAIL.SG
Address	BLK 104B ANG MO KIO STREET 11 #08-65
Address complement	-
Postcode	561104
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	Side Swipe
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?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20221213/2114

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ3970U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

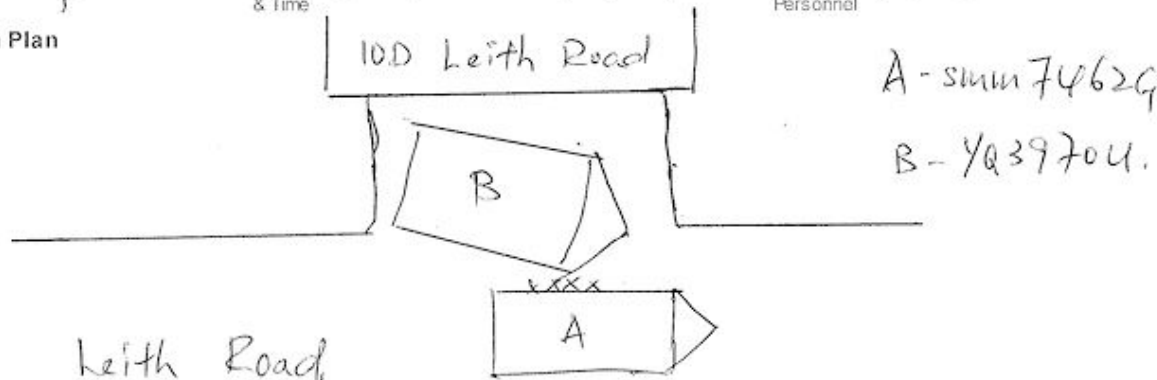
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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' 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 to police report attached.

Declaration

I/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

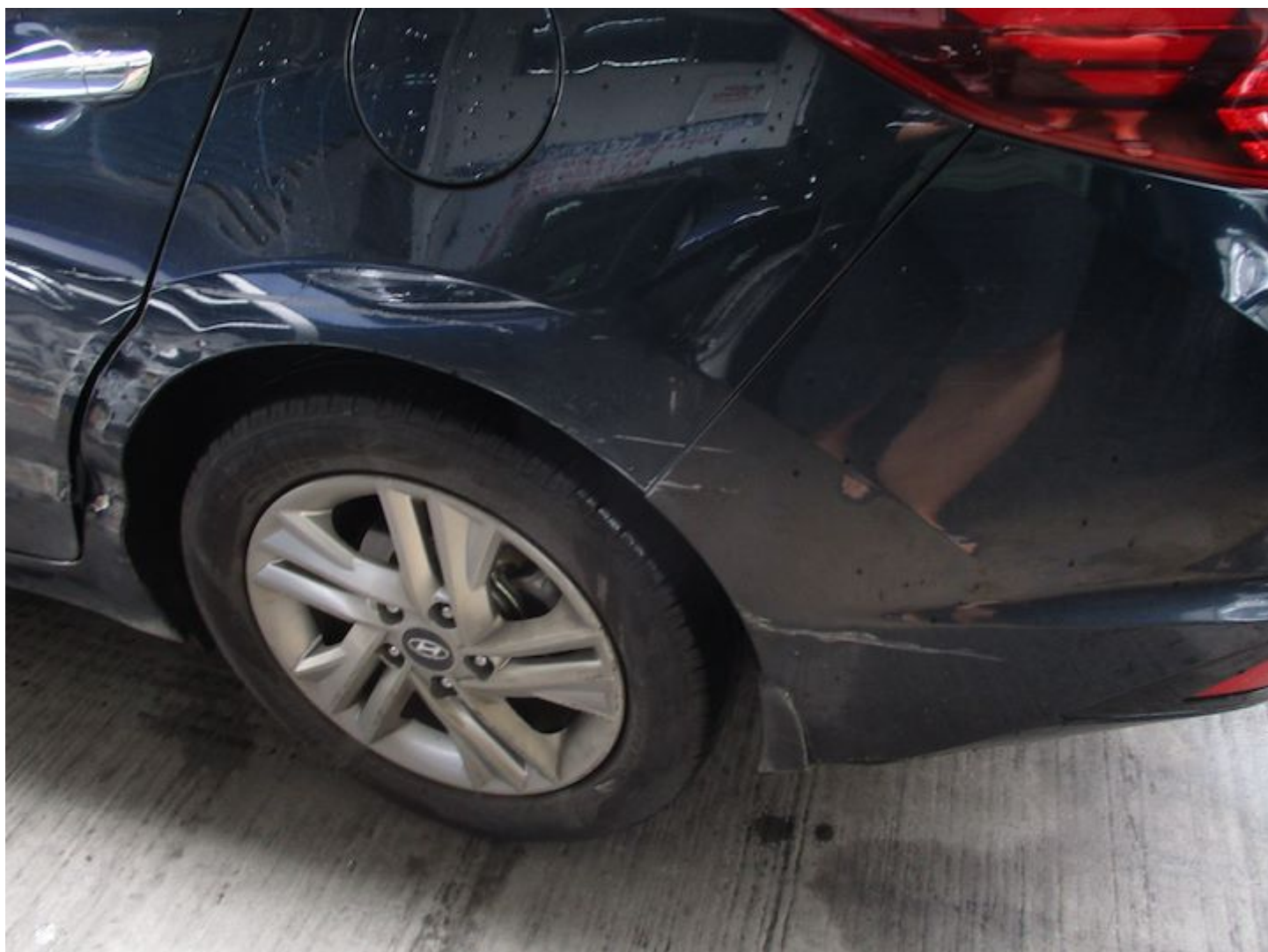
Witnessed by Reporting Centre Personnel

























**SINGAPORE
POLICE FORCE**



T/20221213/2114

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20221213/2114

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/12/2022 22:03 Vide Report No.: Station Diary No. 62

Informant's Particulars

Name of Informant: QUEK SI MIN			Address: APT BLK 104B ANG MO KIO STREET 11 #08-65 SINGAPORE 561104		
ID Type / ID No.: NRIC NO / S9544966B			Contact No.: Home/Office: Mobile: 90119256		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 27	Date of Birth: 03/12/1995	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ADMIN MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 13/12/2022 11:10	Type of Location: Road along Private Estate
Location: LEITH ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMM7462G	Car	HYUNDAI	AD AVANTE 1.6 GLS (A) S	Blue	Slightly Damaged	0
YQ3970U	Lorry				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
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1/20221213/2114

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51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

2 of 3
Report No: 1/20221213/2114

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMM7462G	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10756954R00	06/06/2022	05/06/2023

Brief Details.

On 13/12/2022 at about 1110hrs, i was driving my vehicle (registered plate number: SMM7462G) along Leith Rd near to unit 10D when a vehicle (registered plate number: YQ3970U) hit against the left side of my vehicle. The vehicle (YQ3970U) was driving off from the parking space outside of unit 10D before he hit against my vehicle. We then came out of our vehicle and exchange contact details for insurance purposes. The driver contact number is 97692713. My vehicle (SMM7462G) was damaged on the left side with dents and scratches. The vehicle (YQ3970U) was damaged on the right headlight with cracks. No one was injured. No police and ambulance attended to the scene.

I am lodging this report for insurances purposes and recording purposes.



**SINGAPORE
POLICE FORCE**



T/20221213/2114

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51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

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Report No: T/20221213/2114

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 Adeline Tan Buay Khim

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

Signature Of Informant:

Date/Time:
13/12/2022 22:03

Classification Of Case:

NP168

It pays to choose

Budget
Direct
 Insurance

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10756954R00

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

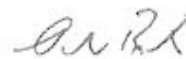
Certificate Number P10756954R00 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	SMY 3667A
Chassis Number	KMHU541CMKUR25e15
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	06/06/2022 (13:52)
3) Date / Time of Expiry of Insurance	05/09/2023 (23:59)
4) Excess (i) Policy	S\$ 600.00
(ii) Windscreen	S\$ 100.00
5) Policyholder	QUEK SI MIN
6) Persons or Classes of Persons Entitled to Drive*	<p>Drivers named as a Main / Named Driver in this Certificate of Insurance only.</p> <p>Provided that the person driving is permitted, in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted, and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation, in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.</p> <p>Main Driver / Date of Birth: QUEK SI MIN/03/12/1955</p> <p>Named Drivers / Date of Birth: Quek Jian peng (24/01/1994)</p>
7) Limitation as to use*	<p>Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, prize-taking, feasibility trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.</p> <p>* Limitations imposed imperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 9 of the Road Transport Act 1987 of Malaysia are not to be included under these headings.</p>
8) Finance Company	NA

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 1960 of Singapore and Part 12 of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on:
 06/06/2022

 Auto & General Insurance (Singapore) Pte. Limited
 Trading as Budget Direct Insurance



 Simon Birch
 Chief Executive Officer