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 27/12/2022 18:52 (SGT) Reported by Driver Date of Accident 25/12/2022 18:52 (SGT) Exact Location of Accident Near 9Q5J+XF Singapore Additional Location Information **Bukit Timah Expressway** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLS8668D**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Liew Ee Liang NRIC No S7070709H Email Address elainehong73@hotmail.com Mobile Phone No (Phone) +65-94881173 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Vellfire Variant 2.5Z CVT 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

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 2493

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2002709019-01

DRIVER

Name of Driver Hong Gek Noi NRIC No S7378476Z Date Of Birth 29/01/1973 Occupation Indoor

Date Of Driving Pass 24/11/2000 Driving experience 22 YEARS AND 1 MONTH Gender Female Mobile Number (Phone) +65-94881173 Alt. Phone Number Email Address elainehong73@hotmail.com Address Apt Blk 535 Bukit Panjang Ring Road #21-821 Address complement Singapore Postcode 670535 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 to Rear Weather Conditions Clear Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes 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 Ang Mo Kio Division Headquarters Police Station Phone No (Phone) +65-18002180000 Alt. Police Station Phone No (Fax) +65-64814246 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT Refer to sketch plan and police report no. F/20221227/7055. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1**

SNF7326S

Accident report SS3722CR0003

Vehicle Registration Number

Vehicle Manufacturer
Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Seah Kheok Boon
NRIC No	S1765856E
Contact Number	(Phone) +65-90072959
Address	<u>-</u>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat helts worn?	Hong Gek Noi Female (Phone) +65-94881173 Apt Blk 535 Bukit Panjang Ring Road #21-821 Singapore 670535 - - SLS8668D
Were seat belts worn? Was this injured conveyed to hospital by ambulance?	

SKETCH PLAN

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.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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)

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.

	M	Teo Wee Keong
Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)
Sketch Plan		

ketch Plan		
Non A: 5158668P		
Ver 8: SNF 73265		
	1 1 1 A A A A A A A A A A A A A A A A A	
	88 FF	

CACcident report SS3722CR0003

Describe Circumstance of the Accident			
Refer to police report no. F/20221227/7055.			

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

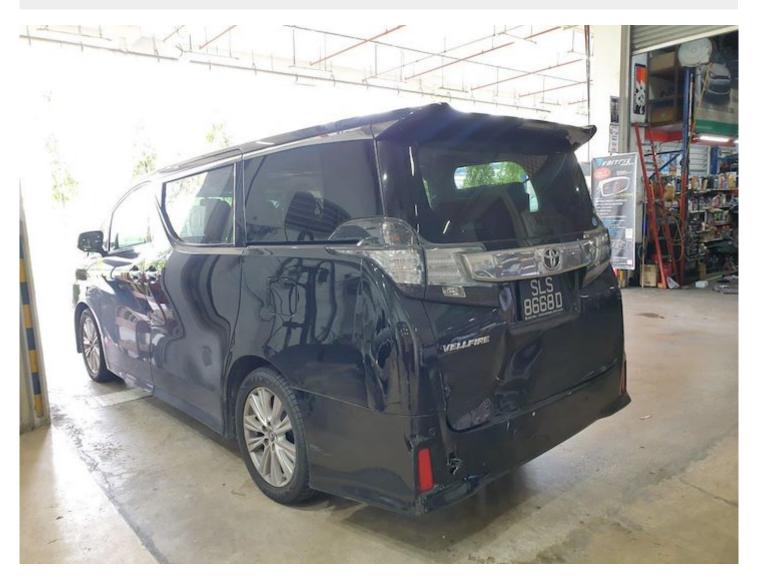
Driver's Signature (if driver is not the policyholder) / Date & Time

Teo Wee Keong

A.P.

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2







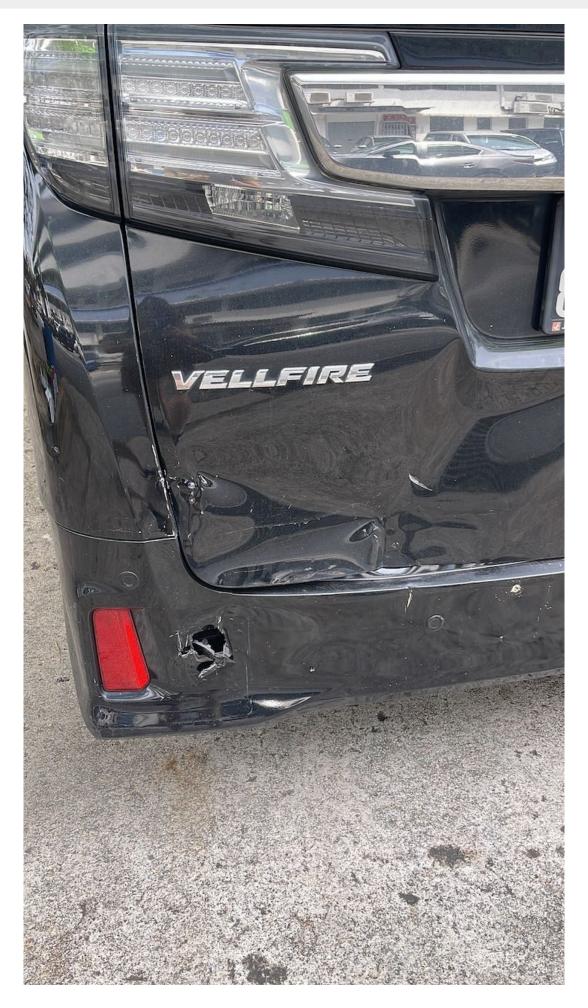


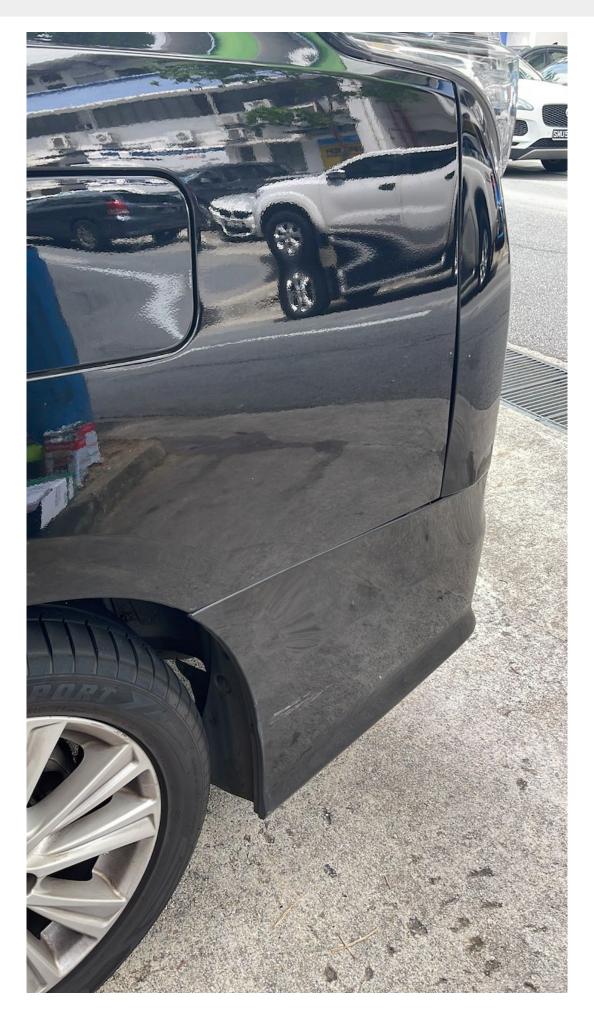




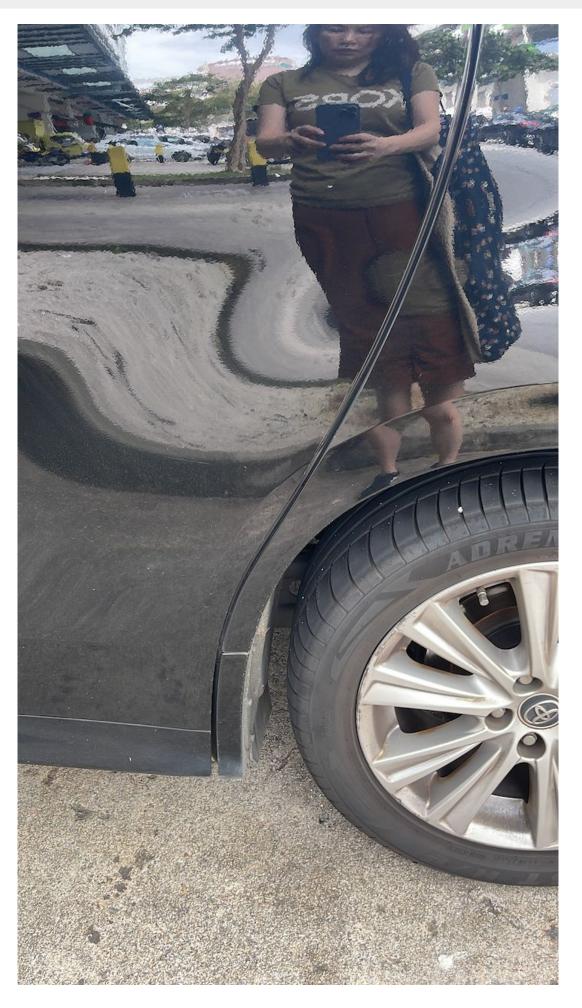


















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Report No. F/20221227/7055

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No:1800-2180000

Date/Time Report Made	Vide Rep	ort No.		Station Diary No.
27/12/2022 17:59 Name Of Informant	Address			
HONG GEK NOI		T PAN IAI	NG RING ROAD #	21_821
HONO GEN NOI	SINGAPORE 670535		21-021	
ID Type / ID No.	Contact N	lo.	VS5-7-1	
NRIC NO / S7378476Z	Home/Of	ice:	Mobile:	
30 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A			94881173	
Nationality	Email Address			
MALAYSIAN	elainehong73@hotmail.com			
Occupation	Sex	Age	Date of Birth	Race
Financial/Investment adviser	Female	49	29/01/1973	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
25/12/2022 18:50 - 25/12/2022 18:55	BUKIT TIMAH EXPRESSWAY			
Brief details.				

Am driving along BKE on the 3rd lane, there was a stalled vehicle (GBG6124B) on the 3rd lane, shortly after BKE dairy farm exit towards PIE direction. The car infront of mine braked to avoid banging into the stalled vehicle, I slow down and braked to avoid any collison. But the car (SNF7326S) behind me, banged into my car's rear (SLS8668D). The rear left side of my car was badly damaged and dented by SNF7326S (which was driven by NRIC No: S1765856E - Mr Sean Kheok Boon)

I suffered collison impact on my head, neck and shoulder. After setting the car, I sought medical

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: 27/12/2022 17:59		
Officer In-Charge Of Case:	Classification Of Case:		





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20221227/7055

consulation at Mount Elizabeth Novena A&E. I were treated with medicine and issued 3 days medical certificate.

Victim			
Person Name	HONG GEK NOI		
ID Type	NRIC NO	ID No	S7378476Z
Gender	Female	Age	49
Race	Chinese	Language	English
Occupation	Financial/Investment adviser	Address	535 BUKIT PANJANG RING ROAD #21-821 SINGAPORE 670535
Mobile No	94881173	Is Informant A Victim?	Yes

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: 27/12/2022 17:59
Officer In-Charge Of Case:	Classification Of Case:



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, 1960
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

: SP2002709019-01 : 25 August 2022 Certificate Number Date of Issue : Comprehensive Coverage Policyholder

: 01 September 2022 to 31 August 2023(both dates inclusive) Period of Insurance

: SLS8668D Registration No. Chassis number of Vehicle : AGH300128098

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 his/her permission

*Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Mator 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 Motor 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
- (a) use for fire 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.

25 August 2022

Issued Date

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

Intermediary Code

: 0000245 PFPFA PTE LTD

: Own Damage : Windscreen Damage

SGD

600.00 100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

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