

# 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              | 05/01/2023 16:28 (SGT)        |
| Reported by                     | Both                          |
| Date of Accident                | 04/01/2023 16:25 (SGT)        |
| Exact Location of Accident      | Paya Lebar Flyover, Singapore |
| Additional Location Information | TOWARDS CHANGI                |
| Country/State of Loss           | Singapore                     |

## DETAILS OF OWN VEHICLE

Vehicle Registration Number SNE5333P

### INSURED/POLICYHOLDER

|                          |                             |
|--------------------------|-----------------------------|
| Is company?              | No                          |
| Name Of Registered Owner | TAN HWA HOON @ NEO KWA HOON |
| NRIC No                  | SXXXX104B                   |
| Email Address            | kpetan@singnet.com.sg       |
| Mobile Phone No          | (Phone) +65-90011142        |
| Alternative Phone No     | -                           |

### VEHICLE PARTICULARS

|  |                           |
|--|---------------------------|
| Manufacturer   | Honda                     |
| Model  | Vezel                     |
| 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 hire              |
| Transmission   | Auto                      |
| C  | 1496                      |

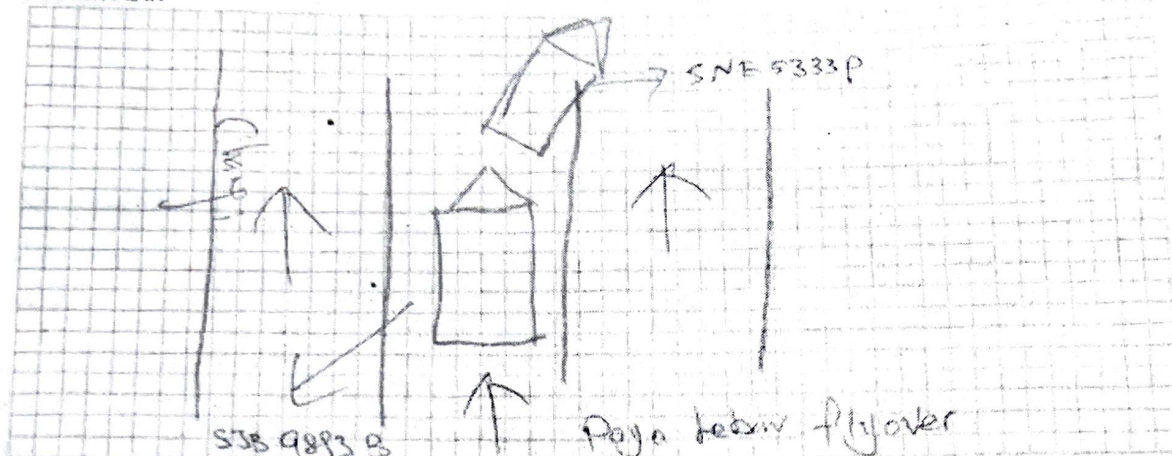
### INSURANCE COMPANY

|                                   |                          |
|-----------------------------------|--------------------------|
| Name of Insurance Company         | Income Insurance Limited |
| Policy Number / Cover Note Number | 5131674457               |

### DRIVER

|                |                             |
|----------------|-----------------------------|
| Name of Driver | TAN HWA HOON @ NEO KWA HOON |
| C No           | SXXXX104B                   |
| Of Birth       | 13/11/1957                  |
| Occupation     | Outdoor                     |

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was traveling along Paya Lebar Flyover towards Changi Airport, the front vehicle slow down. I follow. Suddenly a vehicle SJB 9893 B, came from behind and bang onto my rear, causing my vehicle swerve to RH.

DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

*[Signature]*

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

*[Signature]*

Representative of the Insured Party  
NAME: Joelle Tan  
DATE/TIME: AMK AUTOPoint Pte Ltd  
05.01.2023