# 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 5. Intermitted in provided midst be as it dufficing and accurate as possible. Any white misteries estimation of witholding of material facts may allow insurance companies to reputing 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 16/01/2023 13:52 (SGT) Reported by Date of Accident 14/01/2023 12:50 (SGT) Exact Location of Accident KPE, Singapore Additional Location Information BEFORE AIRPORT RD EXIT Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SGX1283J

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SEOW KOK LIM NRIC No S8263500I Email Address ERIC0085@HOTMAIL.COM Mobile Phone No (Phone) +65-96986442 Alternative Phone No

## VEHICLE PARTICULARS

Manufacturer Toyota Model Harrier Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto 1998

#### INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10574016R01

# DRIVER

Name of Driver SEOW KOK LIM NRIC No S8263500I Date Of Birth 26/07/1982 Occupation Indoor

Date Of Driving Pass 08/05/2012 Driving experience 10 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-96986442 Alt. Phone Number Email Address ERIC0085@HOTMAIL.COM Address BLK 526 HOUGANG AVE 6 #10-145 Address complement Postcode 530526 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 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 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Nο 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 PASSENGER 1 Name TENG WEI EE JUSTINA Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20230114/7050. 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 SKK4824A Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver TAY JIAMEI Contact Number (Phone) +65-90269178 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident **VEHICLE B** No. Of Passenger (Including Driver)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SMF1540R Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident **VEHICLE C** No. Of Passenger (Including Driver)

## **INJURED PERSONS DETAILS**

#### INJURED 1

Name of injured person TENG WEI EE JUSTINA Female Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SGX1283J Were seat belts worn? Was this injured conveyed to hospital by ambulance? **INJURED 2** Name of injured person SEOW KOK LIM Gender Male

#### SKETCH FLAN

#### IMPORTANT KOTICE

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- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
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- 4. The reave and acceptance of this Form by insurance companies is not an edmission of goldy, lability on the part of the insurance. 10798798
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- F. The report will be forw sided by the insurers of the GIA Records Management Cartile established by the Gane at heurance Assignation
- of Singapore (SIA) for archiving and that copies of this report will for a fee be nede size able onch application by interested parties.
- By the trageners of the report to the members with hereby consent to the architing of this report at the pertue and to copies of the aport being made averable aforesaid
- E Consent under the Personal Data Protection Act (PDBA)
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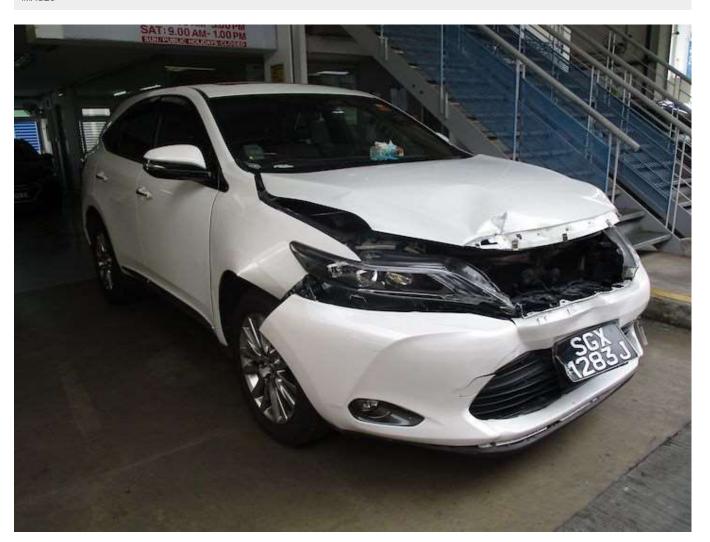
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AIRPORT ROAD TXIT 3 KPE TOWARDS CITY

A: SGX 1283 J B: SKK 4824 A

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PLEASE	RETER	70	POLICE	REPORT.	
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T/20230114/7050

1 of 4 Report No. T/20230114/7050

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/01/2023 17:42			Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: SEOW KOK LIM			Address: 526 HOUGANG AVENUE 6 #10-145 SINGAPORE 530526			
ID Type / ID No.: NRIC NO / S8263500I			Contact No.: Home/Office:	Mobile: 96986442		
Nationality: MALAYSIAN		Email: ERIC0085@HOTMAIL.COM				
Sex: Male	Age: 40	Date of Birth: 26/07/1982	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation:			Driving Licence Inform Class: 3	ation: Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/01/2023 12:50	Type of Location Straight Road
Location: AIRPORT RO	)AD			
r a reconstruction		Road Surface:		
Weather: Clear		Dry		Road Speed Limit: 80 Km/h
		Company of the second		

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SGX1283J	Car	TOYOTA	HARRIER 2.0 PREMIUM CVT	White	Seriously Damaged	5
SKK4824A	Car	MERCEDES BENZ	GLC	White	Slightly Damaged	0



T/20230114/7050

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230114/7050

#### CONTINUATION OF REPORT

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMF1540R	Car	KIA	CERATO	Blue	Slightly Damaged	0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SGX1283J	AUTO & GENERAL INSURANCE (SINGAPORE) PTE LIMITED	P10574016R01	16/06/2022	15/06/2023		

Details of Perso	n Involved		3337				
Any Pedestrian Ir	nvolved: No						
No. of Pedestrian	is Injured; NIL		Use of Pe	Use of Pedestrian Crossing: NA			
Passenger							
Name	TENG WEI EE, JUSTINA			ID No		S8019075A	
Related Vehicle	SGX1283J (Car)			Conta	ct No.	94774162	
Hospital/Clinic	MY FAMILY CLINIC (HOUGANG CENTRAL)			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date	14/01/2023	Date	14/01		/2023		
No. of Days granted Medical Leave 03			Degree o	of	Slight	24 1595	
Driver	Sandalline Cons						
Name	SEOW KOK LIM			ID No	·	\$82635001	
Related Vehicle	SGX1283J (Car)			Conta	ct No.	96986442	
Hospital/Clinic	MY FAMILY CLINIC (HOUGANG CENTRAL)			Class Drivin Licen Expir	g ce &	Class: 3 Date of Expiry: NIL	
Date	14/01/2023	0.00	Date		14/01	/2023	
No. of Days gran	ted Medical Leave	03	Degree	of	Sligh	(	

# Brief Details.

I was driving along KPE heading to Sims Place before Airport Road exit when the Kia Car in front of me suddenly jam his brake and I was able to stop in time. But another Mercedes vehicle (SKK4824A) behind couldn't and collided into my vehicle rear. Causing my vehicle smashing into the Kia vehicle (SMF1540R). We got a shock and alighted to check on my family members whom is in the car at that moment, Check on the other cars drivers took some on scene pictures. We exchange particulars and just about to leave. Realised that there another car collided into the mercedes car. But didnt take any particulars or picture of the last car. So its a chain collision of 4 vehicles. My family members was shocked due to the





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20230114/7050

CONTINUATION OF REPORT

collision and feeling sore on our neck and back. So we all went to our GP clinic for consultation,



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



4 of 4 Report No. T/20230114/7050

# CONTINUATION OF REPORT

Informant is not able to provide sketch

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: 14/01/2023 17:42
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
NP168	



IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

ADDE	NDUM		
A) PARTICULARS OF PERSON MAKING THE AMENDM			
Original Report No: 392 X231610007	Vehicle Registration No:	SAX1283)	
Original Report No: 390 X 316,000 T	NRIC/FIN/Passport No:	\$82635007	
(*Vehicle Driver/Policyholder) (*) Please delete as			
Address:	91.	_ Singapore ( 18 6440	
Contact (Tel):	Mobile No.:	/a et 10	
Email Address:			
Place of Accident: 401 8070KB	Time of Accident:	250	
Place of Accident: SPE BETOKE	AIRPORT RO EXCL		
	EUDAE7		
- AMEND VEHL	CLE KUMBEK		
Policyholder / Actual Driver's Signature Date:	Reporting Centre Perso Name (as in NRIC/ID c Date:	Charles Committee and a committee of the	

It pays to choose



## Renewal Letter

Comprehensive Car Policy Policy Number: P10574016R01

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02/05/2022

Seow Kok Lim 526 Hougang Avenue 6 #10-145 Singapore 530526

Dear Mr Seow Kok Lim,

Thank you for insuring with Budget Direct Insurance.

Your Car Insurance policy P10574016R00 for SGX1283J expires on 15/06/2022.

We are pleased to provide you with the renewal terms below.

Policy Renewal Period : 16/06/2022 to 15/06/2023

Type of Cover : Comprehensive / Named Driver Plan / Any Workshop

Policy Excess : \$\$ 600.00 (before any applicable GST)
Windscreen Excess : \$\$ 100.00 (before any applicable GST)
Renewal Premium : \$\$ 683.48 (inclusive of applicable GST)

Vehicle Usage : Private and Commuting

No Claim Discount : 50%

Shopping Voucher(s) Entitled : S\$32.00\* (early bird reward if you confirm your

renewal before 16/05/2022)

Policyholder : Seow Kok Lim Main Driver : Seow Kok Lim

Named Driver(s) / Date of : None

Birth

The full terms and conditions of your policy will be set out in your Policy Summary, Certificate of Insurance, Policy Schedule and the Product Disclosure Document.

If any information is missing or incorrect, or there are any changes to your circumstances, please let us know immediately.

## Early Bird Reward Shopping Vouchers!

Don't miss it! Call us before 16/05/2022 to confirm your renewal and enjoy a S\$32.00\* Early Bird reward. Hurry, before our Early Bird offer expires!

\*Worth 5% of renewal premium payable, before GST. Amount may vary based on final premium paid.

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance** 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg