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 31/01/2023 08:14 (SGT) Reported by Date of Accident 30/01/2023 13:45 (SGT) Exact Location of Accident Singapore Additional Location Information CTE MERGING INTO PIE CHANGI AIRPORT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Peugeot

Vehicle Registration Number SLS4749E

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SEOW PEI THENG, PELECIA NRIC No SXXXX791I Email Address chubbyjot@gmail.com Mobile Phone No (Phone) +65-98250205 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model 3008 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 No - Claiming third party your vehicle?

Vehicle Category Private car Transmission Auto CC 1199

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00143362200

DRIVER

Name of Driver SEOW PEI THENG, PELECIA NRIC No SXXXX791I Date Of Birth 29/10/1980 Occupation Indoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	20/11/1999 23 YEARS AND 2 MONTHS Female (Phone) +65-98250205 - chubbyjot@gmail.com 13 STANGEE PLACE - 424076 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name Gender	No 2 No - Yes 2 No UNKNOWN Male
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED POLICE REPORT - T/2023	30130/7050
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Was there any video captured by Car Camera?

Vehicle Registration Number	YN2685R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	RAMAN VELPANDI
Passport No/FIN	GXXXX746N
Contact Number	(Phone) +65-87476436
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

SKETCH PLAN

IMPORTANT NOTICE

- Pleas ereport correctly the details of the accident to speed up the claims process.
- 2. This Firm 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 lalse 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 Singatore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the organient of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the reportbeing made available aforesaid.
- 8. Conse m under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insider, 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 issured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectiveTyreferred 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 cartain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mall
- (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.

30 01 2022

Policyholder's Signature / Date & Time

Actual Driver's Signature (if driver is not the

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

Sketch Plan CTE MERGING INTO PIE CHANGI AIRPORT

scribe Circumstance of the Accident		
1		
1		
Please Refer to the	Affrehed police Report	
	The parties of the pa	
- 7/20230130/70	050-	
* *	. ,	
	· ·	
eclaration		
ectaration Ve declare the foregoing particulars are true in every respect.		
6.4.4		
105 211		
20/01/2022.	grund 3/1/2003	



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



2 of 3 Report No. T/20230130/7050

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLS4749E	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.	DMPCSNW001433 62200	11/06/2022	10/06/2023	

Details of Perso	DUXES AND DESCRIPTION OF THE PERSON OF THE P			BELSE.	A PRINCE	MARKET HE STORESON
Any Pedestrian I						
No. of Pedestriar	ns Injured: NIL		Use of Pe	destrian	Cross	sing: NA
Driver	ESSENSIA DE L'ANGLE DE	ras (assassus)	5 5 5 W	J. Section	ALCOHOL:	REAL PROPERTY AND ADDRESS OF THE PARTY OF TH
Name	SEOW PEI THENG	, PELECIA		ID No		S8032791I
Related Vehicle	SLS4749E (Car)			Conta	ct No.	98250205
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL	NIL Date			NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

Traffic was slowing down merging to PIE towards Changi Airport from CTE at the entrance of the merging Lane. My vehicle was in the lane slowing down as we were going into the road leading to PIE when a lorry that was behind me didn't slow down and hit my car from behind.

I have a video at the back of my car showing the impending collision before and when it hit our vehicle.

Photos and videos cannot be uploaded and I can send it to the IO after this report.





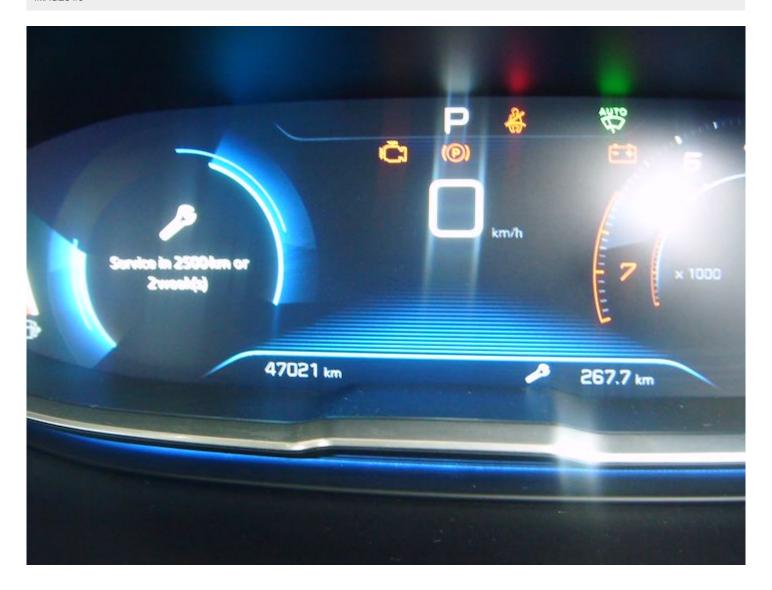


















1 of 3

Report No. T/20230130/7050

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time 30/01/202	Charles and Charles	fade:	Vide Report No.: A/20230130/0145	Station Diary No.:	
Informan	t's Particu	ulars		《三班》	
Name of I SEOW PE		, PELECIA	Address: 13 STANGEE PLACE SINGA	PORE 424076	
ID Type / NRIC NO		911	Contact No.: Home/Office:	Mobile: 98250205	
Nationality: SINGAPORE CITIZEN		EN	Email: CHUBBYJOT@GMAIL.COM		
Sex: Female	Age: 42	Date of Birth: 29/10/1980	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information: Class: Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 30/01/2023 13:45	Type of Location CTE merging to PIE towards Changi Airport
Location: POTONG PA	SIR AVENUE 1			
Weather:		Road Surface: Dry	The state of the s	oad Speed Limit: 0 Km/h
Weather: Drizzling Traffic Flow: One Way			9 T	TOTAL KALLY DOLLARS

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLS4749E	Car	PEUGEOT	3008 ALLURE PURETECH 1.2 EAT6	Grey		0



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



2 of 3 Report No. T/20230130/7050

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLS4749E	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001433 62200	11/06/2022	10/06/2023	

Any Pedestrian I	nvolved: No		V			
No. of Pedestriar	s Injured: NIL		Use of Per	destrian	Cross	ing: NA
Driver	与19号的是从400号的是189个数	THE PERSON	PROFESSION TO	Various C	CONTRA	PARTY CHANGE THE
Name	SEOW PEI THENG	, PELECIA		ID No.		S8032791I
Related Vehicle	SLS4749E (Car)			Contac	ct No.	98250205
Hospital/Clinic	NIL			Class of Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
Date	NIL	NIL			NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

Traffic was slowing down merging to PIE towards Changi Airport from CTE at the entrance of the merging Lane. My vehicle was in the lane slowing down as we were going into the road leading to PIE when a lorry that was behind me didn't slow down and hit my car from behind.

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

Sketch Plan

Informant is not able to provide sketch



3 of 3 Report No. T/20230130/7050

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of The identity of been authenti required.
Signature Of Interpreter: Not applicable	Date/Time: 30/01/2023 15
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification

The ide	re Of Informant: ntity of the person making this report has
been au required	thenticated by Singpass. No signature is it.
Date/Tir 30/01/2	me: 023 15:48
Classific	cation Of Case:

NP168