

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 31/01/2023 15:12 (SGT)
Reported by Both
Date of Accident 30/01/2023 18:03 (SGT)
Exact Location of Accident Singapore
Additional Location Information BUKIT TIMAH ROAD TOWARDS JURONG
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLL4588P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner NEO GIM HANG BENEDICT
NRIC No SXXXX864J
Email Address jaylesneo@gmail.com
Mobile Phone No (Phone) +65-96750910
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mazda
Model 6
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 1998

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Policy Number / Cover Note Number D20MPC0001253_02

DRIVER

Name of Driver NEO GIM HANG BENEDICT
NRIC No SXXXX864J
Date Of Birth 27/05/1978
Occupation Outdoor

| | |
|--|------------------------|
| Date Of Driving Pass | 14/02/2003 |
| Driving experience | 19 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96750910 |
| Alt. Phone Number | - |
| Email Address | jaylesneo@gmail.com |
| Address | BLK 281 TOH GUAN ROAD |
| Address complement | # 18-227 |
| Postcode | 600281 |
| 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 | 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 | 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) | 2 |
| 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 | UNKNOWN |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|---|
| Was the accident reported to the police? | Yes |
| Police Station Name | Nanyang Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18007929999 |
| Alt. Police Station Phone No | (Fax) +65-67912972 |
| Police Station Address | No. 2 Jurong West Avenue 5 Singapore 649482 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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 | SJJ3104T |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | CHA BOON HON DANNY |
| NRIC No | SXXXX243F |
| Contact Number | (Phone) +65-96988910 |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | - |

SKETCH PLAN

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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.
6. 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.
7. By the edgement 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.

[Signature]
31st JAN 2023

[Signature] 31/1/23

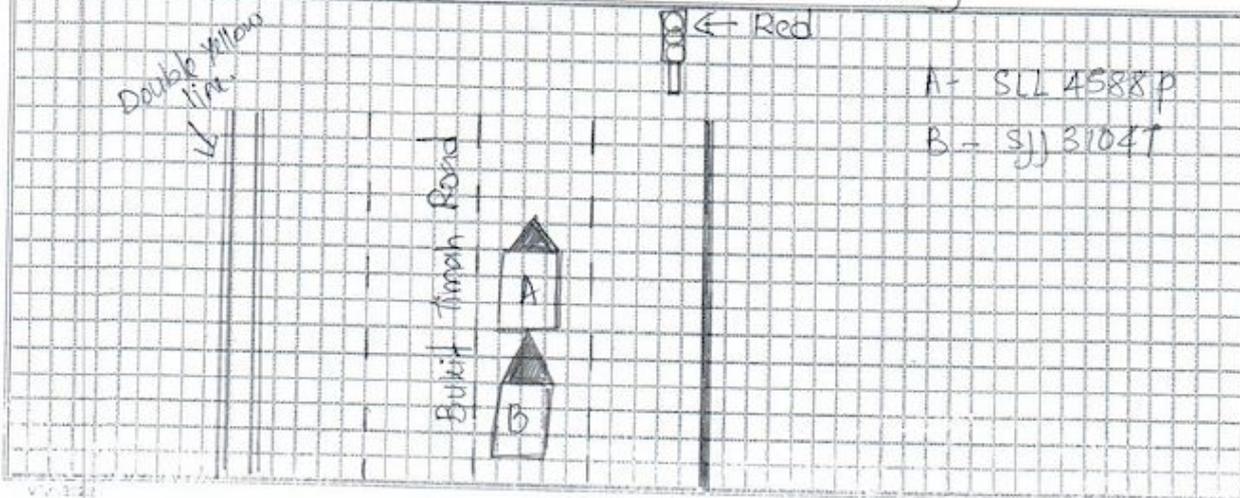
Policyholder's Signature / Date & Time

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

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

Sketch Plan

Bukit Timah Road towards Jurong



Describe Circumstance of the Accident

- Please Refer to the attached statement -
- SP Ref: 88

Declaration

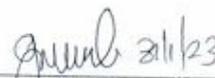
I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

31st JAN 2023

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



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





















Annex D

NOTICE OF REPORTING

This is to confirm that A1) Neo Gim Hang Benedict, Address:Blk 281 Toh Guan Road #18-227 S(600281) NRIC/FIN S7814864J, has reported to the Police a traffic accident. The traffic accident does not consist of the below following criteria:

- i) Involvement with foreign vehicle
- ii) Involvement with Pedestrian/Cyclist
- iii) Involving parties obtained more than 3 days of Medical Leave
- iv) Government Property/Vehicle damage
- v) Hit and Run Accident

On 30/01/2023 at about 1803hrs, I was driving my car V1) SLL4588P along Bukit Timah Road (heading towards the direction of Jurong). When I approached the traffic light junction, I had stopped V1 as the traffic light had turned red. Shortly after stopping V1, I felt an impact coming from the rear of V1. I had then alighted from V1 to make a check and discovered that another vehicle V2) SJJ3104T front portion had collided into the rear of V1. At the time of the accident there were no injuries, thus no police or ambulance were summoned to scene. I then exchanged particulars with the driver of V2 and thereafter left the incident location. I wish to state that V1 is equipped with an in-built vehicle camera, and it had captured the accident.

Vehicle involved as follows:

V1) SLL4588P driven by A1, HP: 96750910

V2) SJJ3104T, Driven by Cha Boon Hon Danny, S7736243F, HP:96988910

If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSgt T91003 Sariffah

Date: 31/01/2023 Time: 0950hrs

S/D Ref: 88

Police Post/Unit: Nanyang NPC

Nanyang NPC
2 Jurong West Ave 5
Singapore 649482
Tel: 1800-792 9999





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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN09231V0006 Vehicle Registration No: SLL4588P
 Name (as shown in NRIC): Neo gimhang benedict NRIC/FIN/Passport No: S7814864J
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: Bukit Timah road # 18-227 Singapore (60)
 Contact (Tel): _____ Mobile No.: 9675 0910
 Email Address: fykneo@gmail.com
 Date of Accident: 30/01/2023 Time of Accident: 18:03
 Place of Accident: Bukit timah road towards Jurong
 Insurance Company: India

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- upload police Report
- upload other documents.

 Policyholder / Actual Driver's Signature
 Date:

gnuef 31/1/23
 Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card):
 Date:

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Singapore 649482
Tel: 1800-792 9999

