# **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 09/03/2023 17:07 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 08/03/2023 21:15 (SGT) Exact Location of Accident Napier Rd, Singapore Additional Location Information Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SGY313H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner JULIE KUAH LEE JOO NRIC No SXXXX806J Email Address davidlumlk@gmail.com Mobile Phone No (Phone) +65-96371108 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model E250 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 - Reporting only Vehicle Category Private car Transmission Auto CC 1991

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2100485507-06

DRIVER

Name of Driver DAVID LUM LAM KONG NRIC No SXXXX878H Date Of Birth 01/01/1951 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	25/02/1976 47 YEARS AND 1 MONTH Male (Phone) +65-96371108 - davidlumlk@gmail.com 1 CLAYMORE DRIVE #16-02 - 229594 No Spouse No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe 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 Female
DETAILS OF POLICE ACTION	
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 SKETCH PLAN AND POLICE REPORT T/20	0230503/7029
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP6054D
Vehicle Manufacturer	Toyota
Vehicle Model	Axio
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	PENG JIAN LUN
NRIC No	SXXXX157B
Contact Number	(Phone) +65-90272919
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	-

Insurer
Veh No:
DOA

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 managementation or withholding of material facts may allow insurance companies to regudiate 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.
- 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 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)

l 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.

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Office Accident report SN0823390002

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REPORTING ONLY	OWN DAMAGE ( )	THIRD PARTY ( )	OWN WORKSHOP ( )
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Declaration			
	articulars are true in every respect.		1
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fluch 9/3/22	1.30pm Sturdl-	328 30 PM	de 01/08/2021
			sed by Reporting Centre Personnel

vJun2022

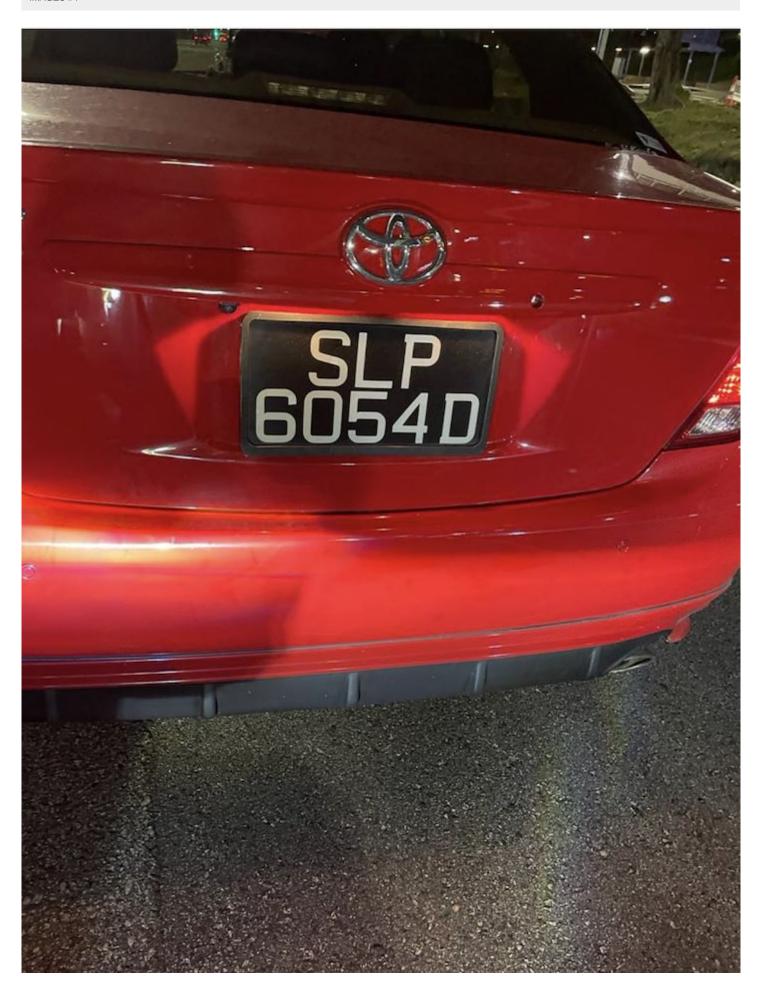


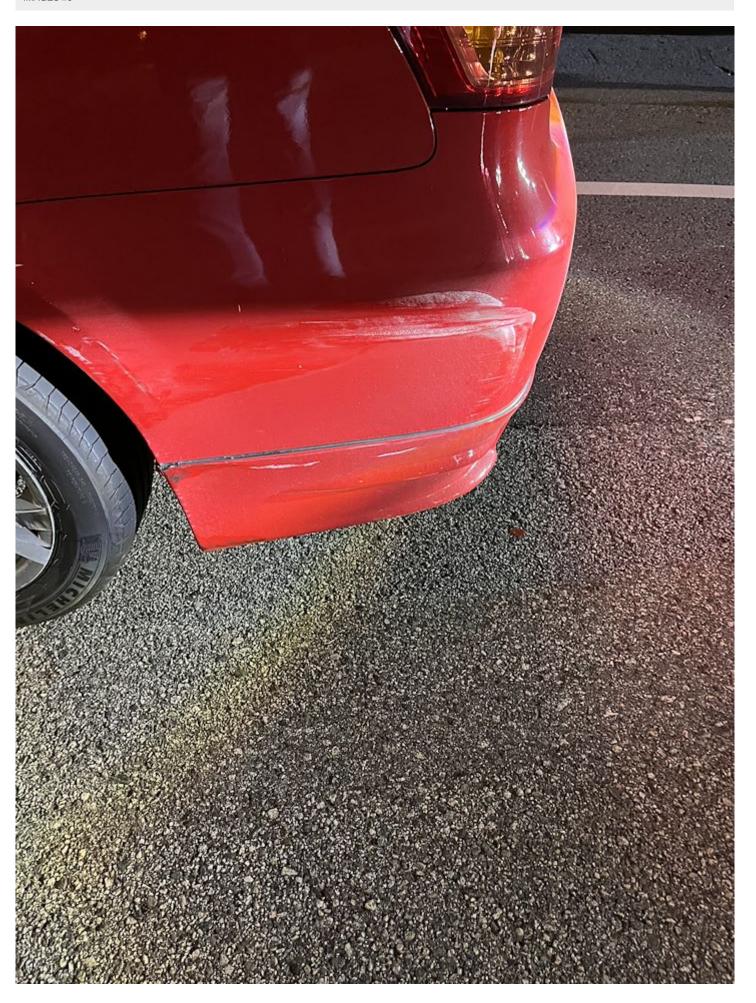
















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 4 Report No. T/20230503/7029

	e Report M 23 12:06	fade:	Vide Report No.:	Station Diary No.
Informa	nt's Partice	ulars		TOWN THE PERSON THE PERSON
	Informant: UM LAM K	ONG	Address: 1 CLAYMORE DRIVE #16-02	SINGAPORE 229594
ID Type NRIC NO	ID No.: 0 / S01478	78H	Contact No.: Home/Office:	Mobile: 96371108
National SINGAP	ty: ORE CITIZ	EN	Email: DAVIDLUMLK@GMAIL.COM	
Sex: Male	Age:	Date of Birth: 01/01/1951	Type of Informant: Driver	
Race: Chinese			Language: English	
Occupat	ion: e sales age	ent/broker	Driving Licence Information: Class: 3	Date of Expiry:

	Injury	dent Drink Dat	te/Time of	Type of Location
Type of Accident:	Others	Drive: Acc	oident: 03/2023 21:20	Straight Road
_ocation:				
NAPIER ROA	ND.			
Weather:		Road Surface: Dry		
CONTROL OF THE PARTY OF THE PAR		1 101 1		The state of the s
Clear Traffic Flow; One Way		Traffic Control: Controlled by Others e.c	g. Workmen	Traffic Volume: Light

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SGY313H	Car	MERCEDES BENZ	e200	Blue	Slightly Damaged	0
SLP6054D	Car	TOYOTA	Vios	Red	Slightly Damaged	0





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

2 of 4 Report No. T/20230503/7029

#### CONTINUATION OF REPORT

Details of V	ehicle Insurance	2622 - 1021	1075	17.5
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGY313H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	HARLING RECORDS ARVE		
SLP6054D	NTUC Income Insurance Co-Operative Limited			

Details of Perso	n Involved	Had had a	2845	
Any Pedestrian Ir	rvolved: No			
No. of Pedestrian	s Injured; NIL	Use of Peo	destrian Cros	ssing: NA
Driver	Section of the second section of	Wall Mary	550 F 60 T 6	
Name	DAVID LUM LAM KONG		ID No.	S0147878H
Related Vehicle	SGY313H (Car)		Contact No	96371108
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	NIL	
Driver			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	KW-
Name	PENG JIANLUN		ID No.	S8838157B
Related Vehicle	NIL		Contact No	90272919
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Slig	ht

#### Brief Details

i was driving past the traffic junction at Napier Road and Cluny Road when the lights turned green and move into the second leftmost lane, my wife was with me in the car, suddenly i saw a workman waving cars away, i noticed there were cones placed into the middle of the

suddenly I saw a workman waving cars away. I noticed there were cones praced into the middle of the second lane, there were no lights on the cones nor was the workman holding a red light torch, i have to quickly swerve to the right to avoid hitting him and as a result i swiped into the car(SLP6054D) on my right, my right front fender was scratched against his left rear fender, it was not a direct hit on a front to back basis, the driver emerged from the car with a passenger much taller than he is, and we exchanged insurance companies and nric details, the passenger said they were in a hurry and suggested we talk the following day ending with they prefer to report to the insurance.

the driver and the passenger were not injured when we talked, and my wife and I were not





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

3 of 4 Report No. T/20230503/7029

CONTINUATION OF REPORT

injured too.

As both sides were not injured, we then made a report to the insurers on the next day, we then went overseas for 6 weeks and returned last Monday, we are making this report as the driver/passenger now claims that he was injured.



T/20230503/7029

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

This report is lodged at Buona Vista NPP Klosk 1

, 4 of 4 Report No. T/20230503/7029

CONTINUATION OF REPORT

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: 03/05/2023 12:06
Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168



	ADDEND	UM		
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENT	'S:		
	CHOCKE WARRANT COLOR	_ Vehicle Regis	stration No. S	GY 313 H
	Name (as shown in NRIC): David Lum Lam Kong		assport No: S	
	(*Vehicle Driver/Policyholder) (*) Please delete as app		assport (40	
	Address: 1 Claymore Drive #16-02			_ Singapore (229594
	Contact (Tel):	_ Mobile No.: _	96371108	
	Email Address: davidlumlk@gmail.com			
	Date of Accident: 8 March 2023	Time of Accid	<sub>lent:</sub> 21:15 S	GT
	Place of Accident: Napier Road, Singapore			
	Insurance Company: AIG Asia Pacific Insurance Pte	Ltd		
В)	ADDITIONAL INFORMATION /AMENDMENTS:  I have made a report on the above-mentioned accident make the following amendments:	and would like		10.000000000000000000000000000000000000
В)	I have made a report on the above-mentioned accident	and would like	ned report no	T/20230503/7029
В)	I have made a report on the above-mentioned accident make the following amendments:  1. I have been requested by AIG to file a police rep	and would like	ned report no	T/20230503/7029
В)	I have made a report on the above-mentioned accident make the following amendments:  1. I have been requested by AIG to file a police rep 2. I wish to include a photo of the actual damage su captured at the of accident.	and would like ort. See attach estained by TP	ned report no vehicle (SLP	: T/20230503/7029 6054D)
B)	I have made a report on the above-mentioned accident make the following amendments:  1. I have been requested by AIG to file a police rep  2. I wish to include a photo of the actual damage su	and would like ort. See attach estained by TP	ned report no vehicle (SLP	: T/20230503/7029 6054D)
В)	I have made a report on the above-mentioned accident make the following amendments:  1. I have been requested by AIG to file a police rep 2. I wish to include a photo of the actual damage su captured at the of accident.  3. the TP photo uploaded on date of reporting depict	and would like ort. See attach estained by TP	ned report no vehicle (SLP	: T/20230503/7029 6054D)
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v3un2023

LETTER OF AUTHORISATION
ACCIDENT INVOLVING SAY 88 H AND SLP 6054 D
ON 8 Navan-2023 ALONG Napler Read
1, Julie Kuch Lee Joo of NRIC no. SO 44806/I
hereby authorise Down Lum Lam Kong of NRIC
No. 90149878/14 to sign all
relevant documents pertaining to the above accident.
Dated this Day of March 2023
20 25
Name: Tulsa Kuch Las Ta
Name: Julie Kuch Lee Joo