

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 21/03/2023 20:37 (SGT)
Reported by Driver
Date of Accident 20/03/2023 16:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information SEMBAWANG ROAD (BEFORE YISHUN AVE 1)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKR6332C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LOKE HENG SENG
NRIC No S7635743I
Email Address hsloke76@gmail.com
Mobile Phone No (Phone) +65-98592883
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model POLO GP 1.2 TSI A/T ABS D/AIRBAG 2WD 5DR
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1197

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd
Policy Number / Cover Note Number DMPPHQ22-005621

DRIVER

Name of Driver KWANGTUNG AMORNAT
NRIC No S8067531C
Date Of Birth 25/05/1980
Occupation Indoor

Date Of Driving Pass	27/03/2019
Driving experience	4 YEARS
Gender	Female
Mobile Number	(Phone) +65-92218173
Alt. Phone Number	-
Email Address	hsloke76@gmail.com
Address	31 SPRINGSIDE DRIVE SINGAPORE 786950
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Raining
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	LOKE YONG SHENG
Gender	Male

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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER WITH ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH INSURED

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ5316X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KWANGTUNG AMORNRAT
Gender	Female
Phone No	(Phone) +65-92218173
Address	31 SPRINGSIDE DRIVE SINGAPORE 786950
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	MOUNT ALVERNIA HOSPITAL - 3 DAYS MC
Injured person in which vehicle?	SKR6332C
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

INJURED 2

Name of injured person	LOKE YONG SHENG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	MOUNT ALVERNIA HOSPITAL - 3 DAYS MC
Injured person in which vehicle?	SKR6332C
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN**IMPORTANT NOTICE**

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5. Any false reporting may be referred to the Police for investigation.
6. The 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.
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")

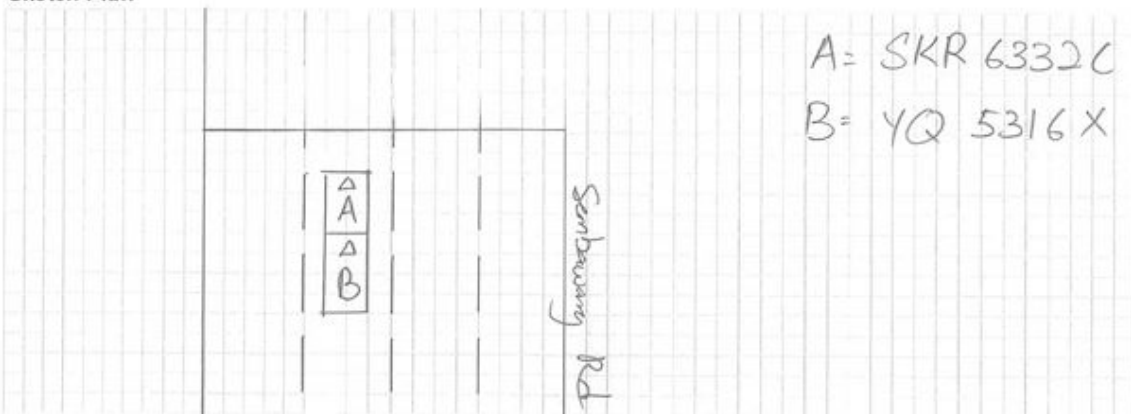
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan


Please Refer to the police report no. :

T/20230321 / 7063

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre
Personnel





















**SINGAPORE
POLICE FORCE**



T/20230321/7063

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

1 of 4
Report No. T/20230321/7063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/03/2023 17:48		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: KWANGTUNG AMORNRAT			Address: 31 SPRINGSIDE DRIVE SINGAPORE 786950		
ID Type / ID No.: NRIC NO / S8067531C			Contact No.: Home/Office: Mobile: 92218173		
Nationality: THAI			Email: lokechanel23@gmail.com		
Sex: Female	Age: 42	Date of Birth: 25/05/1980	Type of Informant: Driver		
Race: Thai			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/03/2023 16:15	Type of Location: Straight Road
Location: SEMBAWANG ROAD				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKR6332C	Car	VOLKSWAGO N	POLO GP 1.2	Grey	Seriously Damaged	2
YQ5316X	Lorry					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20230321/7063

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

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Report No. T/20230321/7063

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR6332C	EQ INSURANCE COMPANY LTD.	DMPPHQ22-005621	26/08/2022	25/08/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	LOKE YONG SHENG		ID No.	T1224409B
Related Vehicle	SKR6332C (Car)		Contact No.	NIL
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry	Class: ,3A Date of Expiry: NIL
Date	20/03/2023		Date	20/03/2023
No. of Days granted Medical Leave		03	Degree of	Serious
Driver				
Name	KWANGTUNG AMORN RAT		ID No.	S8067531C
Related Vehicle	SKR6332C (Car)		Contact No.	92218173
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	20/03/2023		Date	20/03/2023
No. of Days granted Medical Leave		03	Degree of	Serious

Brief Details.

ON 20.03.2023 ABOUT 0418 PM I WAS TRAVELLING ALONG SEMBAWANG ROAD. I WAS STATIONARY DUE TO THE FRONT TRAFFIC. SUDDENLY THE VEHICLE (YQ 5316X) COLLIDED ONTO REAR PORTION OF MY VEHICLE (SKR 6332C).

I HAVE ONE PASSENGER(LOKE YONG SHENG, NRIC:T1224409B) IN MY VEHICLE .

I HAVE VIDEO FROM MY IN-CAR CAMERA.

I FELT PAIN ON MY NECK, MY SHOULDER, MY BACK HEAD AND MY THIGH. I WAS GIVEN 3 DAYS MC FROM "MOUNT ALVERNIA HOSPITAL". MY PASSENGER GOT 3 DAYS MC ALSO.



**SINGAPORE
POLICE FORCE**



T/20230321/7063

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

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Report No. T/20230321/7063

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20230321/7063

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

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Report No, T/20230321/7063

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
21/03/2023 17:48

Classification Of Case:

NP168

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N

**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF**PRIVATE CAR
Comprehensive Classic****Certificate No. : DMPPHQ22-005621**

Classic Plan - EQ Authorised Workshop Only

Form: MX2

Excess:

Insured/Named Driver:

S\$500.00

Unnamed Drivers:

S\$1,000.00

YEID Additional:

S\$3,000.00

1. Index Mark and Registration Number of Vehicles

SKR6332C

2. Name of Policyholder

LOKE HENG SENG

3. Effective Date of the Commencement of Insurance for the purpose of the Act

26/08/2022

4. Date of Expiry of Insurance

25/08/2023

5. Person or Classes of persons entitled to drive*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission
permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover :

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

*Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Tokyo Century Leasing (Singapore) Pte Ltd

A000019/Elvis Kua Yong Huat
Date of Issue : 13/07/2022 13:53

Authorised Signatory
EQ Insurance Company Limited

Exp No. : DMPPHQ21-006173

A Member of Citystate