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.

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 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 28/02/2023 10:56 (SGT) Reported by Driver Date of Accident 27/02/2023 22:00 (SGT) Exact Location of Accident Clementi Ave 6, Singapore Additional Location Information ALONG CLEMENTI AVE 6 BEFORE REGENT PARK NEAR BUS **STOP NO 17059** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Hyundai

1591

Vehicle Registration Number SLW4758H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LAM FAIR FONG NRIC No S8233009G Email Address fair09@yahoo.com Mobile Phone No (Phone) +65-96905395 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Elantra Variant AD 1.6 GLS AT (AMS) 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? Yes Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003930241-01

DRIVER

CC

Name of Driver NEO SZU WAN AARON (LIANG SIYUAN) NRIC No S7733515C Date Of Birth 09/11/1977

Occupation Indoor Date Of Driving Pass 25/03/1999 Driving experience 23 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-92343286 Alt. Phone Number Email Address Neowan17@yahoo.Com.sg Address APT BLK 318B YISHUN AVE 9 #13-128 Address complement Postcode 762318 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured SISTER IN LAW Does Driver Own Other Vehicles? 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 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? 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 DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 27/2/23 AT ABT 2200HRS I WAS TRAVELLING ALONG CLEMENTI AVE 6. AS I WAS ABT TO EXIT THE MINOR ROAD I WAS CHECKING FOR ONCOMING VEHICLE FROM THE RIGHT. I THOUGHT VEHICLE B: YP5931A HAD MOVE OFF THE MOMENT I TURN MY HEAD VEHICLE B WAS STILL THERE & I COULDN'T STOP ON TIME & HIT ONTO THE BACK REAR TAILGATE METAL BAR OF VEHICLE B. 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 YP5931A 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)	-

SKETCH PLAN

IMPORTANT NOTICE

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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.

- 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.
- 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;

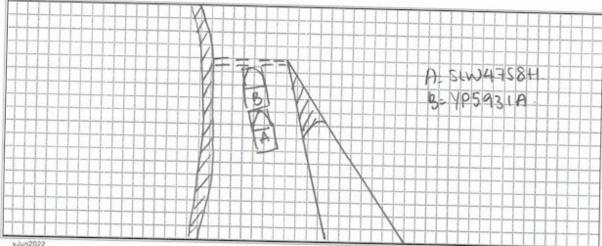
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of 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

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



VJun2022

On 27/2/23 at abt 2200hrs I was travelling Alung Clementi Ave As I was abt to exit the minor road I was checking for oncoming volvicle from the right. I thought vehicle 13:4759311 had more off the moment I turn my head vehicle 3 was still there & I couldn't stop on time & hit onto the back rear tailgate metal bar of vehicle 8.	escribe Circumstance of the Assidant
had move off the moment I turn my head vehicle is was still there & I couldn't stop on time & hit onto the	escribe Circumstance of the Accident
	and move off the moment I turn my head vehicle is was still there & I couldn't stop on time & hit onto the
eclaration	

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vJun2022

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Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

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

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number

: SP2003930241-01

Date of Issue

: 28 December 2022

Coverage

: Comprehensive

Policyholder

: Lam Fair Fong

Period of Insurance

: 13 February 2023 to 12 February 2024(both dates inclusive)

Registration No.

: SLW4758H

Chassis number of Vehicle

: KMHD841CMJU628483

Persons 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/her 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 regulations 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.

Limitation as to Use^:

Used only 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 purposes in connection with the Motor Trade

*Limitation rendered inoperative by Section 8 of 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 Amendment, Act or Acts passed in substitution thereof.

28 December 2022

Issued Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code

: 0000162 EAZY PTE LTD

Excess

Own Damage : Windscreen Damage SGD SGD 0.00 100.00

Allianz Insurance Singapore Pte, Ltd. | UEN 201903913C

79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

