SA1B23430008 / AH LIM MOTOR COMPANY ( BRANCH ) ENTRY DATE & TIME: 03/04/2023 17:49 (SGT) SUBMITTED BY: GERALD CHEW VERSION: 1 (03/04/2023 17:49 (SGT))

# **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 03/04/2023 17:49 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 01/04/2023 19:45 (SGT) Exact Location of Accident Singapore Additional Location Information **BKE FLYOVER TO KJE** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKC7282K

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **CHAN CHEE FOO** NRIC No S1707495D Email Address BENJAMINCHAN6@GMAIL.COM Mobile Phone No (Phone) +65-90721311 Alternative Phone No

# VEHICLE PARTICULARS

Manufacturer Volkswagen Model Jetta 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 - Reporting only your vehicle? Vehicle Category Private car Transmission Auto CC 1400

## **INSURANCE COMPANY**

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10359867R02 (

## DRIVER

Name of Driver **CHAN CHEE FOO** NRIC No S1707495D Date Of Birth 20/02/1965 Occupation Indoor

Date Of Driving Pass 09/09/1988 Driving experience 34 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-90721311 Alt. Phone Number Email Address BENJAMINCHAN6@GMAIL.COM Address BLK 230 ANG MO KIO AVE 3 #07-1254 Address complement Postcode 560230 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 **DRIZZLING** Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name CHIA LILI Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE SKETCH PLAN 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 SLZ2060J

Vehicle Model

Vehicle Manufacturer

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	PARIMALAM
Contact Number	(Phone) +65-94270732
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### SKETCH PLAN

### MPORTANT NOTICE

- I. Please report correctly the details of the accident to speed up the claims process.
- ). This Formmust be completed by the Pollcyholder and/or the Authorised Driver.
- 3. Information provided must be as trutinful and accurate as possible. Any wilful misrepresentation or withholding of material facts may Now 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.
- 3. 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 aforesald.
- B. Consent under the Porsonal Data Protection Act (PDPA)

lunderstand, 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 date/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 law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

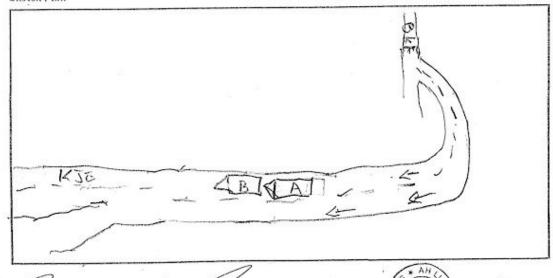
(i) processing, handing and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

- (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, involces, 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

## Sketch Plan



Policyholder's Signature / Date & Time

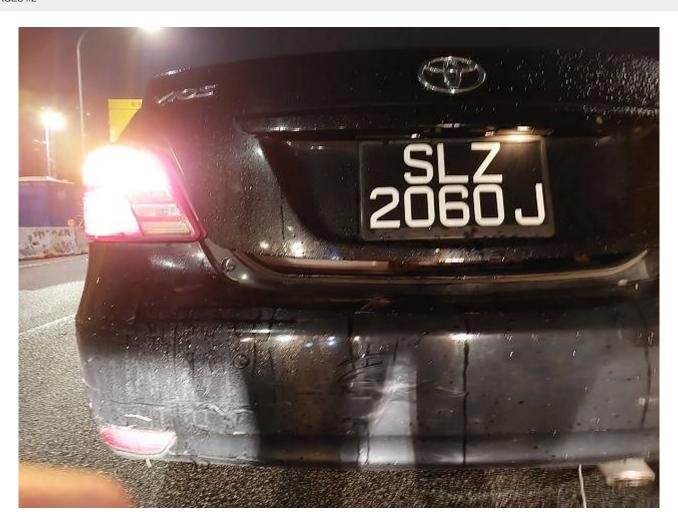
Driver's: Signature (if driver is not the policyholder) / Date

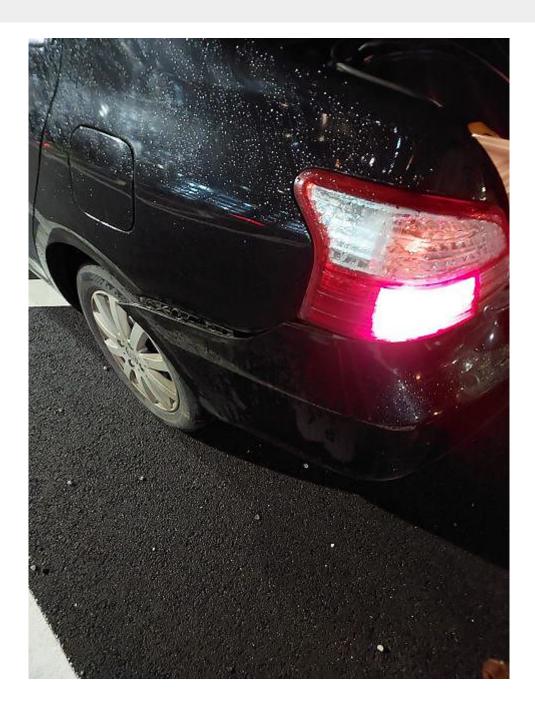
Witnessed by Reporting Centre Personnel

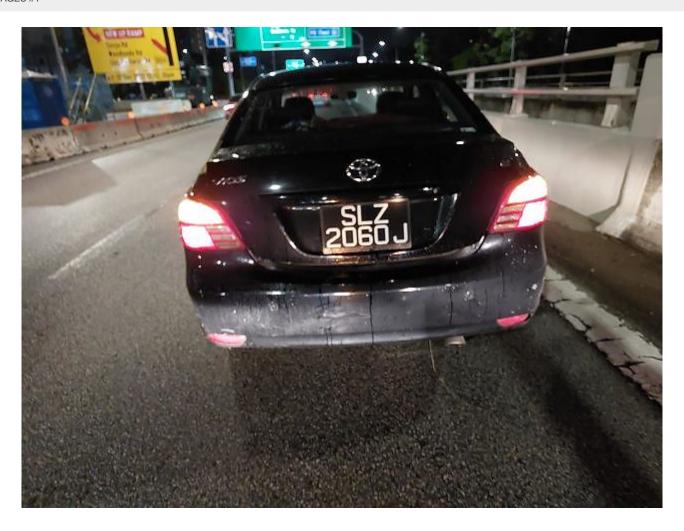
AH LUM MOTOR COMPANY

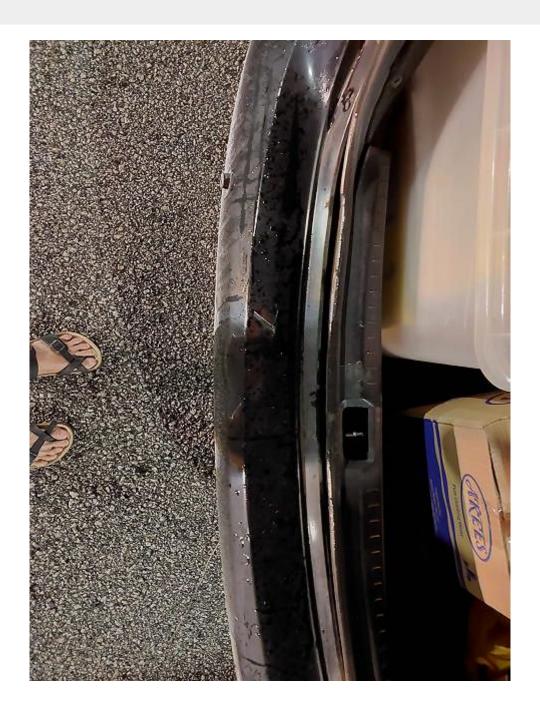
OUT Connected to KIZ Flyover
Date of accident: 1/4/2023 Time: 1945 Location: BKE Connected to KJZ Fly over My Vehicle A: SKC 7282 K Vehicle B: SLZ 20603 Vehicle C:
My Vehicle A: KC   L& L Vehicle B: 3 L4 2000
SKETCH PLAN  Describe Circumstances of the Accident.  I was travelling on the outer lang from On the Phoven  of BKE to KJE direction. The post road was congested  as there is a road work ahead of the Lane.  The travelled Speed was about a Oknih.  The vehicle B ahead of me suddenty man, braked
his Car to Stop, although the traffic ahead was still moving slowly. I sam my brake and the car skielded forward for about 5 metre and bumped into the back of the other vehicle white His Car move about 3 metre aheads after the accident
Notocky was injured in the accident 1 The other  Car has no passenger in the Vehicle
Note: Please take note that your insurer have to days threframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.  Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only  We declare the foregoing particulars use true in every respect.
PolicyNokler's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Personnel  Time Vitnessed by Roporting Centre Personnel  [Januari Motor Constant]

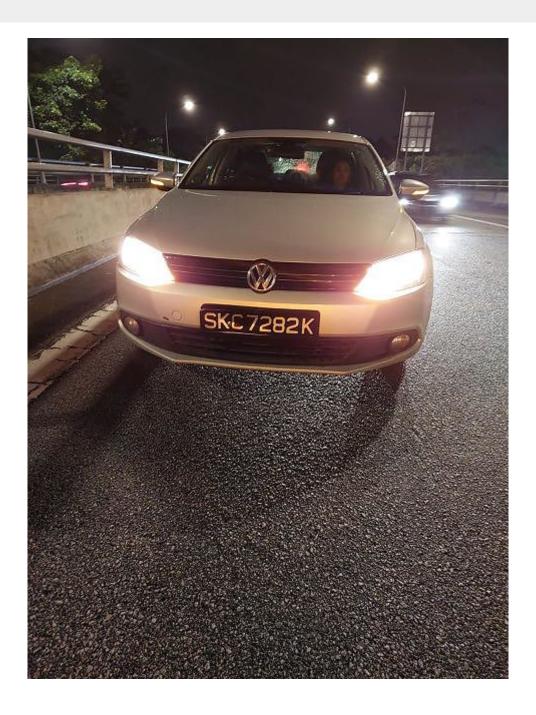


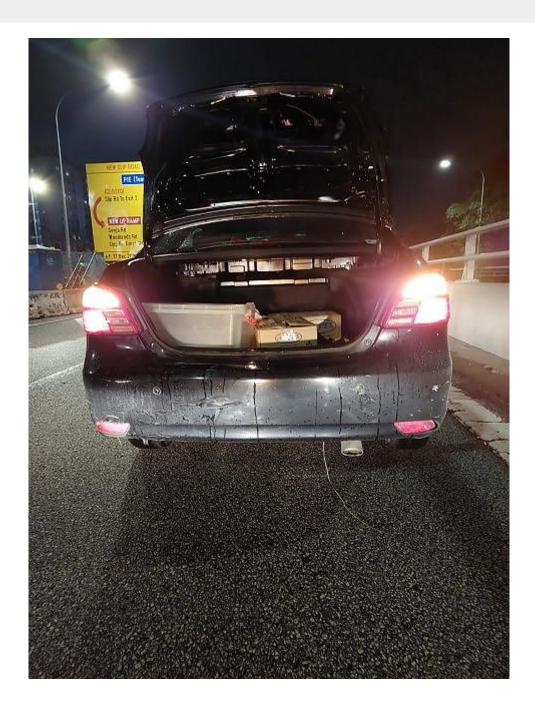








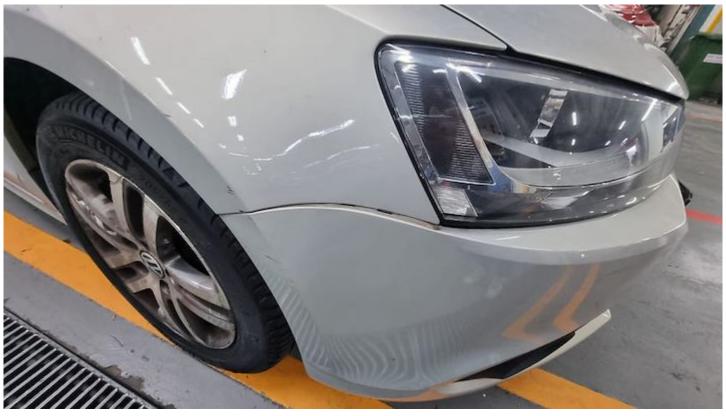








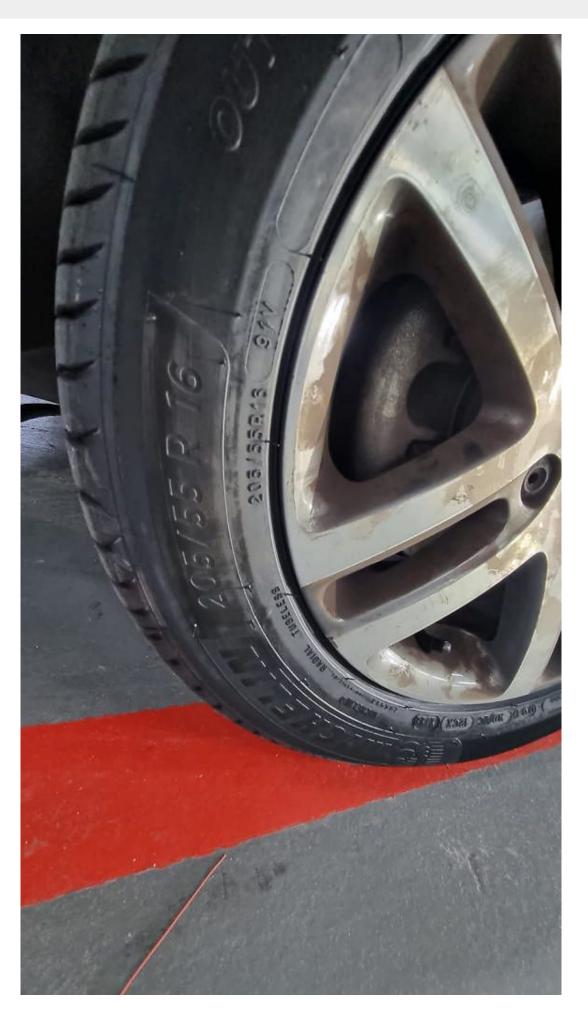


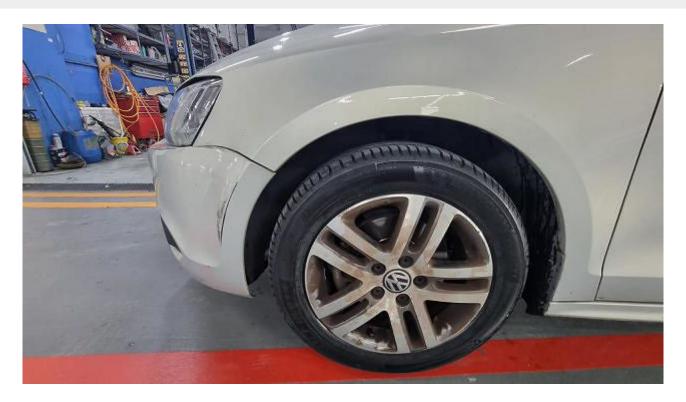


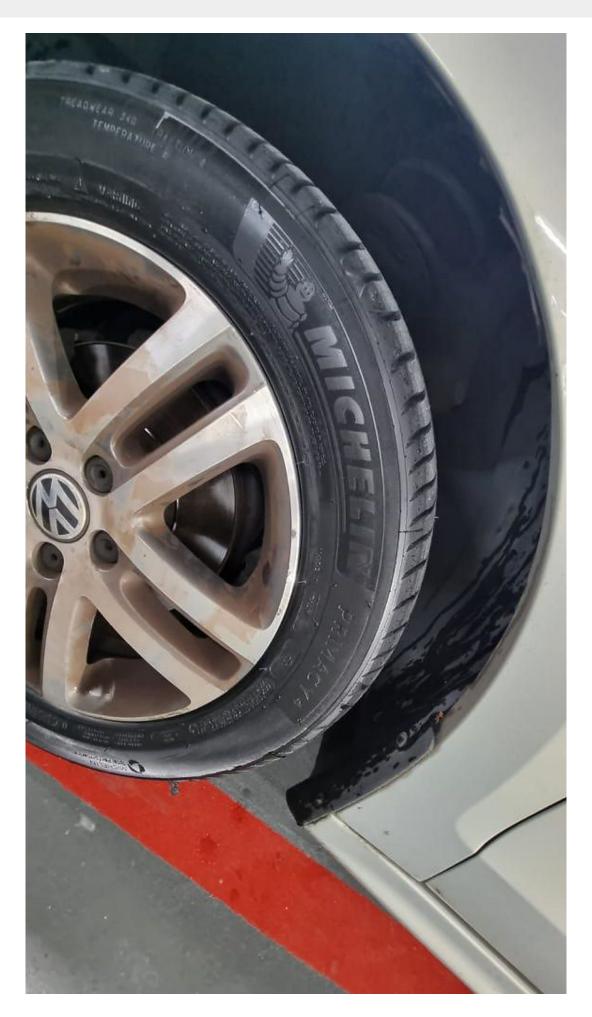
















It pays to choose



# Certificate of Insurance

Comprehensive Car Policy Policy Number: P10359867R02

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

#### Certificate Number P10359867R02 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number

SKC7282K

Chassis Number

WVWZZZ16ZCM005993

 Effective Date / Time of Commencement of Insurance for the Purpose of the Act 27/09/2022 (00:00)

3) Date / Time of Expiry of Insurance

26/09/2023 (23:59)

4) Excess (i) Policy

S\$ 1,000.00

(ii) Windscreen

S\$ 100.00

5) Policyholder

Chan Chee Foo

6) Persons or Classes of Persons Entitled to Drive\*

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any 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 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth

: Chan Chee Foo(20/02/1965)

Named Driver(s) / Date of Birth

Low Kwee Hoon (09/08/1974)

Chan Wen Yi Elizabeth (18/04/1997)

# 7) Limitation as to use\*

Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or 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 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

8) Finance Company

NA

3

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 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on 18/08/2022 Auto & General Insurance (Singapore) Pte. Limited Trading as Budget Direct Insurance

> Simon Birch Chief Executive Officer

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as Budget Direct Insurance 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg