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 06/04/2023 13:00 (SGT) Reported by **Actual Driver** Date of Accident 05/04/2023 17:40 (SGT) Exact Location of Accident Near 718A Pasir Ris Street 72, Singapore 511718 Additional Location Information BEFORE THE JUNCTION OF PASIR RIS INDUSTRIAL 1 AND PASIR RIS DRIVE 12 TOWARDS PASIR RIS DRIVE 3 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC4689E

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TAN WAN LEE NRIC No S7973562J Email Address christaltanwl@gmail.com Mobile Phone No (Phone) +65-97129872 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Yaris 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? Yes Vehicle Category Private hire Transmission Auto CC 15

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003182307

DRIVER

Name of Driver PEMA LIM FANG YI NRIC No S9635273E Date Of Birth 30/09/1996

Occupation Indoor Date Of Driving Pass 22/06/2017 Driving experience 5 YEARS AND 10 MONTHS Gender Female Mobile Number (Phone) +65-83836655 Alt. Phone Number Email Address pemalim96@gmail.com Address BLK 709 PASIR RIS DRIVE 10#04-181 Address complement Postcode 510709 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Friend Does Driver Own Other Vehicles? Nο 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No 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 PASSENGER 1 Name NG LIE LING Gender Female PASSENGER 2 Name LIM LIAN KAI 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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT

REFER SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

| Vehicle Registration Number | SNB6224E |
|---|-----------------------|
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | TYE YOKE FOONG GRACIA |
| NRIC No | S7304805B |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | 1 |

DETAILS OF OTHER VEHICLE PROPERTY 2

| Vehicle Registration Number Vehicle Manufacturer | SGT2302C |
|--|--|
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | ADRIAN CHOONG KHAI MUN (ADRIAN ZHONG QIMIN) |
| NRIC No | S7734725I |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | 1 |

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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)

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 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' 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, 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' law yers/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.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Rasin Fis (nahvistris) | Paliv Fis drive (2 foward) | Parsonnel Parson

| Describe Circumstances of the Accident |
|---|
| 0n05 b4/2013 at about 1740 hours before the fruetron of pasir Ris fuolistical 1 |
| and pasir Ris Drive 12 towards Pasir Ris Drive 3. I was travelling on the |
| lane 3 at along pash RR Dru 12 and my four velicle slowed down as |
| Stopped one to red traffic eight and I tried to follow srit, but was in va |
| and collided outo the rear portion of vehicle (B). When I align, I realize |
| it was a chain cullision of 3 vehicles involved. I have 2 passengers on boo |
| and I had confirmed with driver of vehicle (B). THE YOKE FOONE, GRACIA |
| that she oid not sustain any minny. |
| 0 0 |
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| (A) SNC46990 |
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| (B) SNB6224E |
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| (C) SAT2302C |
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| Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under you |
| your own comprehensive policy. Please check your policy for more information. |

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre









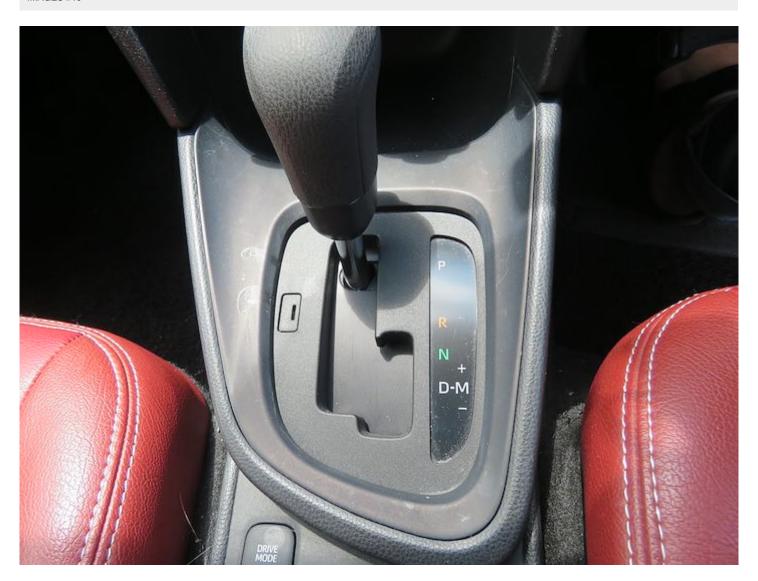


















Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 4 Report No. T/20230406/7017

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 06/04/2023 11:31 | | Vide Report No.: | Station Diary No.: | | | |
|--|-------------|---|---|----------------------------|--|--|
| Informant | t's Particu | ılars | | | | |
| Name of Informant: PEMA LIM FANG YI | | Address: 709 PASIR RIS DRIVE 10 #04-181 SINGAPORE 510709 | | | | |
| ID Type / ID No.: NRIC NO / S9635273E | | | Contact No.: Home/Office: Mobile: 83836655 | | | |
| Nationality | | EN | Email: pemalim96@gmail.com | | | |
| Sex: Female | Age: 26 | Date of Birth: 30/09/1996 | Type of Informant: Driver | | | |
| Race: Chinese | | | Language: English | Institution / School Name: | | |
| Occupation: nurse | | Driving Licence Information: Class: Date of Expiry: | | | | |

| General Infor | mation of the Accide | ent | | | |
|--------------------------------|---------------------------------|-----------------------|---|--|--|
| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 05/04/2023 17:40 | Type of Location: X-Junction | |
| Location: PASIR RIS S | TREET 72 | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: | |
| Traffic Flow: Traffic Control: | | | | Traffic Volume: | |
| Type of Collis Between Mov | sion: ring Vehicles - Head 1 | To Rear | | Anyone conveyed by ambulance: No | |

| Vehicle No. | Туре | Make | Model | Color | Conditio | No of |
|-------------|------|------|-------|-------|----------|-------|
| SGT2302C | Car | | | | | 0 |
| SNB6224E | Car | | | | | 0 |
| SNC4689E | Car | | | | | 2 |



T/20230408/7017

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230406/7017

CONTINUATION OF REPORT

| Any Dodoctrian I | wolved: No | | | | | |
|--|---|---------------------|-----------|--|-------------|-----------------------------------|
| Any Pedestrian Involved: No No. of Pedestrians Injured: NIL Use of F | | | | | | taran KIX |
| | s injured: NIL | 201 | Use of Pe | edestria | n Cross | ing: NA |
| Driver | ADDIAN OUGONO | 121 1 4 1 4 41 14 1 | (ABBIAN) | I ID N | CALL TANK | 077047051 |
| Name | ADRIAN CHOONG KHAI MUN (ADRIAN ZHONG QIMIN) | | | ID No. | | S7734725I |
| Related Vehicle | SGT2302C (Car) | | | Contact No. | | NIL |
| 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 | Degree o | of | NIL | | |
| Driver | | NIL | | | | |
| Name | TYE YOKE FOONG GRACIA | | | ID No |). | S7304805B |
| Related Vehicle | SNB6224E (Car) | | | Contact No. | | NIL |
| Hospital/Clinic | NIL | | | Class Drivin Licer Expir | ng nce & | Class: NIL Date of Expiry: NIL |
| Date | NIL Date | | | | NIL | |
| No. of Days gran | 12 | | | | | |
| Driver | | Market Service | 209.00 | | 1000 | |
| Name | PEMA LIM FANG YI | | | ID No. | | S9635273E |
| Related Vehicle | SNC4689E (Car) | | | Contact No. | | 83836655 |
| Hospital/Clinic | NIL | | | Class of Driving Licence & Expiry | | Class: NIL Date of Expiry: NIL |
| Date | NIL | | Date | | NIL | |
| No. of Dave gran | ted Medical Leave | NIL | Degree | nf | NIL | |

Brief Details.

On 05/04/2023 at about 1740 hours before the junction of Pasir Ris Industrial 1 and Pasir Ris Drive 12 towards Pasir Ris Drive 3. I was travelling on the lane 3 at along Pasir Ris Drive 12 and my front vehicle slow down and stop due to red traffic light and I tried to follow suit, but was in vain and collided onto the rear portion of vehicle (B). When I alight, I realized it was a chain collision of 3 vehicles involved. I have 2 passengers onboard and I had confirmed with driver of vehicle (B), tye yoke foong gracia that she did not sustain any injury.

(A) SNC4689E



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 T/20230406/7017

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Report No. T/20230406/7017

CONTINUATION OF REPORT

(B) SNB6224E (C) SGT2302C





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20230406/7017

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

| 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: 06/04/2023 11:31 |
| Officer In Charge Of Case: TP / TPIB / TAN JEOK LENG LESLIE Contact No.: 65476151 | Classification Of Case: |
| NP168 | |

