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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of withouting of material facts may allow insurance companies to reputial 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 20/04/2023 11:16 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 19/04/2023 10:25 (SGT) Exact Location of Accident Bernam St, Singapore Additional Location Information JUNCTION OF BERNAM STREET AND PALMER ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLQ3589S**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YEO KWAN SOON NRIC No SXXXX451E Email Address FRANCISYEOKS0612@GMAIL.COM Mobile Phone No (Phone) +65-92765156 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mazda Model Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto 1500

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Policy Number / Cover Note Number 22-MS009901-R03

DRIVER

Name of Driver YEO KWAN SOON NRIC No SXXXX451E Date Of Birth 06/12/1956 Occupation Outdoor

Date Of Driving Pass	21/12/2007
Driving experience	15 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92765156
Alt. Phone Number	-
Email Address	FRANCISYEOKS0612@GMAIL.COM
Address Address complement	BLK 3D UPPER BOON KENG ROAD #03-650
Postcode	-
Is the driver the policyholder?	384003
If No, Relationship of the Driver with the Insured	Yes -
Does Driver Own Other Vehicles?	- No
Vehicle Registration Number of Other Vehicle Owned by Driver	NO
vertice registration runniber of outlet vertice owned by briver	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Cide Curine
Weather Conditions	Side Swipe
Road Surface	Clear
Noau Surface	Dry
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?	No
Was any injured conveyed to hospital by ambulance?	<u>.</u>
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	NO
Translator's ID	-
Translator's phone number	•
Translator's email	
Original language used in the statement	
DETAILS OF POLICE ACTION	
DETAILS OF TOLISE ACTION	
Mos the assident reported to the police?	N.
Was the accident reported to the police? Was notice of intended Prosecution given?	No
<u> </u>	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
ON 19.04.2023 AT ABOUT 10:25 HOURS AT JUNCTION OF BEF	RNAM STREET AND PALMER ROAD, I MOVED FORWARD INTO
	TURN INTO ANSON ROAD. SUDDENLY, I HEARD A LOUD BANG
AND FELT A GREAT IMPACT. I THEN REALISED IT WAS VEHIC HENCE COLLIDED ONTO THE RIGHT HAND SIDE PORTION O	
HENCE COLLIDED ONTO THE RIGHT HAND SIDE PORTION O	FINIT VEHICLE (A).
VEHICLE (A): SLQ3589S	
VEHICLE (B): SMM1107Y	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
	··-
DETAILS OF OTHER	VEHICLE PROPERTY 1
	VEHIOLETNOPENTITIE
Makiela Danistustian Nonelasu	0.11.4.40.777
Vehicle Registration Number Vehicle Manufacturer	SMM1107Y

Vehicle Model

Vehicle Variant Vehicle Colour	-
Vehicle Category	NA / Unknown
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

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- 4. The issue and acceptance of this Form by Insurance companies is not an admission of policy (lability 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 SIA Records Management Centre established by the General Insurence 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 fodgement of this report to the incurers, you hereby consent to the archiving of this report at the centre and to copies of the
 report boing made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

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 (all insurers) 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 of 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 exclor 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 times, maylare 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 filtrd-party service providers or agents (including their lawyers/law firms), which may be alled outside of Singapore, for one or more of the above Purposes.

Policyholdar's Signaturu / Date & Time

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

& Time

Witnessed by Reporting Centre Passannel (Name as in NRICAD card)

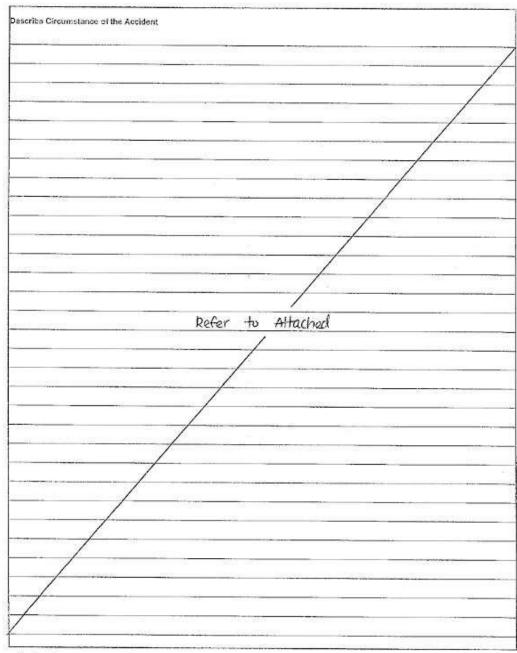
013182820

Sketch Plan

Palmes 26 act

Billing

1



Declaration

IWe declare the foregoing particulars are true in every respect.

Policyholde/'s Signature / Date & Time

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

OTT TO SECOND

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID care)

2

On 19.04.2023 at about 10:25 hours at Junction of Bernam Street and Palmer Road, I moved forward into the lane 3 of Palmer Road as I need to make a right turn into Anson Road. Suddenly, I heard a loud bang and felt a great impact. I then realised it was vehicle (B) from behind, came to overtake my vehicle hence collided onto the right hand side portion of my vehicle (A).

Vehicle (A): SLQ 3589S

Vehicle (B): SMM 1107Y

Joseph.