SS2X235Q0001 / SME MOTOR PTE LTD ENTRY DATE & TIME: 26/05/2023 09:18 (SGT) SUBMITTED BY: CHRIS ANG VERSION: 1 (26/05/2023 09:18 (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.

 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 26/05/2023 09:18 (SGT) Reported by **Actual Driver** Date of Accident 07/05/2023 02:35 (SGT) Exact Location of Accident Singapore Additional Location Information **RIVER VALLEY ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNF1398Z

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **ECO-SCAPE** Company Reg No 53066903W Email Address OTCAND@SINGNET.COM.SG Mobile Phone No (Phone) +65-93628192 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Porsche Model 718 Exact purpose for which vehicle was being used at time of accident Employment Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private car Transmission Auto 1988

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00035152300

DRIVER

Name of Driver TAY WEI LONG NRIC No S9312022A Date Of Birth 02/04/1993 Occupation Outdoor

Data Of Datains Dasa	201121222
Date Of Driving Pass	08/12/2022
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93628192
Alt. Phone Number	-
Email Address	OTCAND@SINGNET.COM.SG
Address	761 PASIR RIS ST 71 #07-212
Address complement	-
Postcode	510761
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	No
	2
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)	1
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	
Alt. Police Station Phone No	(Phone) +65-65470000
Police Station Address	(Fax) +65-65474900
	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
White Decision is a North of	
Vehicle Registration Number	SHD3135J
Vehicle Manufacturer	-
Vehicle Variant	-
Vanicia Variant	

Vehicle Variant

Vehicle Colour	_
Vehicle Category	Taxi
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

- 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.
- 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>.
- 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;

- (iii) 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

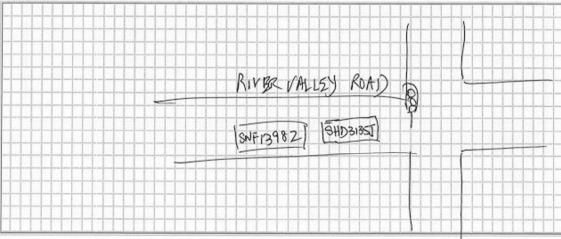
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

olighology Signature / Date & Time

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

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

Sketch Plan



1

Describe Circumstance of the A WAS RAINING STATIONARY	
AND SLIPPZI	DOFF BRAKE PEDAL AND VSHILLS MOVED
TORWARD /	AND TOUCHED BAR OF VEHICLE NO.
8/10/5/3/3	SJ, BOTH DINITERS ALIGHTED AND TOOK AND EXCHANGED TELEPHONES WUMBER.
ACKNONIZ	DGING THAT THERE WERE NO VISIBLE
DAMAG5	TO BOTH VEHICLES.
	the same with rolls to the same with the same of the s
A 1150	
La Parin a Rilar	
141 1479	
	The second secon
	a Chea Keluky Savia
Declaration I/We declare the foregoing particular	sulars are true in every respect
	and the stary respect.
ECO-SCAPE	des
Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel



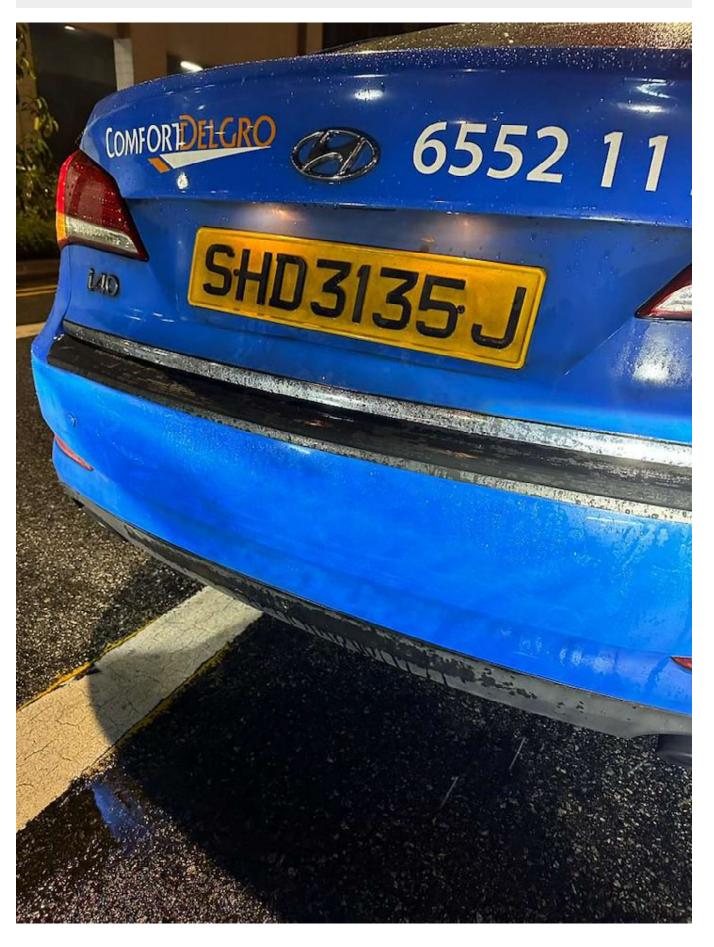
















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Report No. T/20230525/7060

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 25/05/2023 17:20		Vide Report No.: T/20230522/7085	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: ONG TECK CHYE ANDREW			Address: 19 ST. THOMAS WALK #16-19 SINGAPORE 238144			
ID Type / ID No.: NRIC NO / S7004785C		Contact No.: Home/Office:	Mobile: 96804821			
Nationality: SINGAPORE CITIZEN		Email: OTCAND@SINGNET.				
Sex: Male	Age: 53	Date of Birth: 07/01/1970	Type of Informant: Vehicle Owner			
Race: Chinese		Language: English				
Occupation: Company director		Driving Licence Informa Class:	ation: Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 07/05/2023 02:35	Type of Location Straight Road
Location: RIVER VALLE Weather: Raining	EY ROAD	Road Surface:		
Traffic Flow: One Way		Traffic Control:		Traffic Volume:
		Traffic Light - World	King	Light

el Color		The state of the s
31 (0010)	Conditio	No of
	Conditio	1
	Grey	Grey No Damage

Details of V	ehicle Insurance	COMPRESSION STORES		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNF1398Z CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000351 52300	The state of the s	16/02/2024	



T/20230525/7060

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

2 of 3 Report No. T/20230525/7060

CONTINUATION OF REPORT

Details of Perso	on Involved				100	
Any Pedestrian I	nvolved: No					
No. of Pedestria	ns Injured: NIL		Use of Pe	edestria	n Cross	sing: NA
Driver					0.000	ang. To v
Name	TAY WEI LONG			ID No).	S9312022A
Related Vehicle	SNF1398Z (Car)		Contact No.		93628192	
Hospital/Clinic	NIL TO THE RESERVE OF		Class of Driving Licence & Expiry		Class: 3A Date of Expiry: NIL	
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	
Vehicle Owner				incom)		
Name	ONG TECK CHYE AN	IDREW		ID No		S7004785C
Related Vehicle	NIL		Conta	ict No.	96804821	
Hospital/Clinic	NIL		Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date	NIL	47.11	Date		NIL	
No. of Days grant	ed Medical Leave	NIL	Degree of	f	NIL	

Brief Details

Both vehicles (SNF1398Z & SHD3135J) were stationary and stopped at River Valley Rd/ Clemenceau Avenue traffic light junction. Shoe was slippery and slipped off brake pedal and vehicle (SNF1398Z) moved forward and bumped taxi (SHD3135J) slightly on the rear bumper. Both drivers alighted, took photos and exchanged telephone numbers. Both drivers acknowledged that there were no visible damages to both vehicles (See attached file). Taxi driver indicated that he has passengers on board and they may want to submit a claim for damages/ injuries. So, we left taxi driver a Whatsapp message to inform us if they wish to submit a claim as we would have to submit our accident report to our insurers. We were not informed by the taxi driver or his passengers that they were submitting a claim against us and only found out through mail on 22/05/2023 from the Traffic Police Department and our insurers; which is why we delayed in submitting our traffic accident reports to the Traffic Police Dept and our insurers. We have since submitted both the fore-mentioned reports. Our insurer has confirmed that there were no damages to our vehicle. We are resubmitting traffic accident report because we did not receive via email of our previous submission (T/20230522/7085) and insurer requires us to attach a traffic accident report. No one suffered any injuries in SNF1398Z.



T/20230525/7060

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

3 of 3 Report No. T/20230525/7060

CONTINUATION OF REPORT

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 25/05/2023 17:20
Classification Of Case: