

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 withholding 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	15/05/2023 19:51 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	13/05/2023 09:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Junction of Arab Street & North Bridge Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT625J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Lim Chwee Kuong
NRIC No	S1674673H
Email Address	ansonlck@singnet.com.sg
Mobile Phone No	(Phone) +65-94567620
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Lexus
Model	Rx300
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 car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ23-001651

DRIVER

Name of Driver	Lim Chwee Kuong
NRIC No	S1674673H
Date Of Birth	26/06/1964
Occupation	Indoor

Date Of Driving Pass	09/02/1991
Driving experience	32 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94567620
Alt. Phone Number	-
Email Address	ansonlck@singnet.com.sg
Address	Blk 21 Hillview Avenue #01-01
Address complement	-
Postcode	669556
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	Side Swipe
Weather Conditions	Clear
Road 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?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	wife
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

refer attached report.

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	SBH3030C
Vehicle Manufacturer	Toyota
Vehicle Model	Harrier
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Wee Swee Yong
NRIC No	S0187231A
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

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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.


15/5/23
Policyholder's Signature / Date & Time

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


KIM HIN AUTO PTE LTD
TEL: 6452 7018
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan — As Attached

See attached

Describe Circumstance of the Accident

As Attached.

Declaration

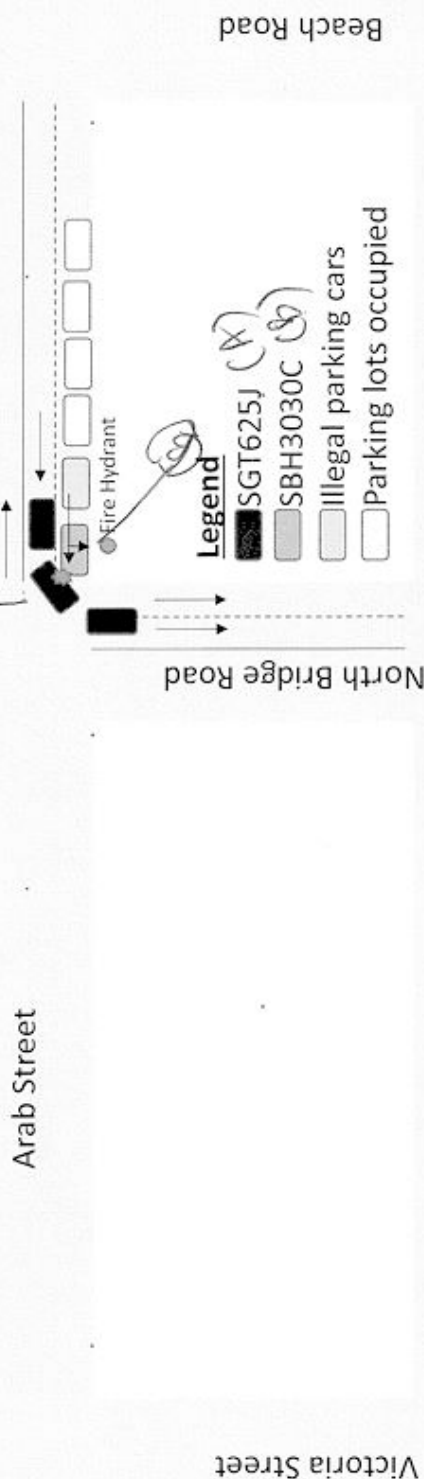
I/We declare the foregoing particulars are true in every respect.

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)

Accident on 13 May 2023, 0950hrs at the junction of Arab Street and North Bridge Road



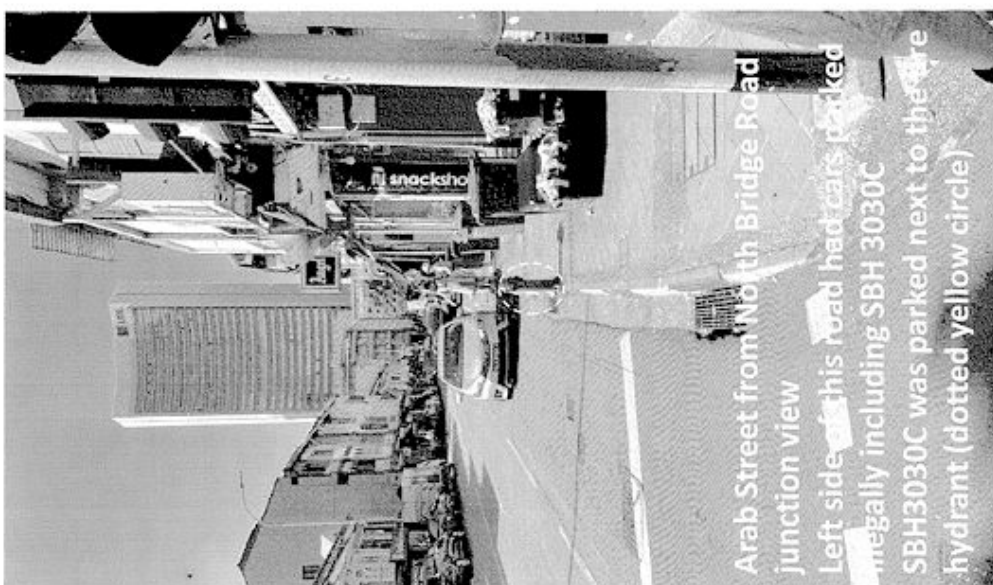
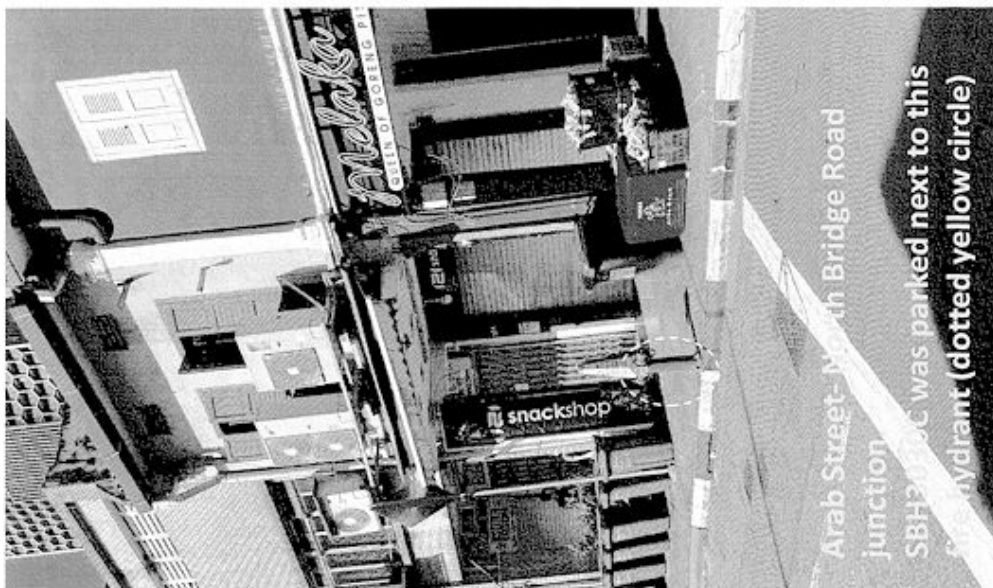
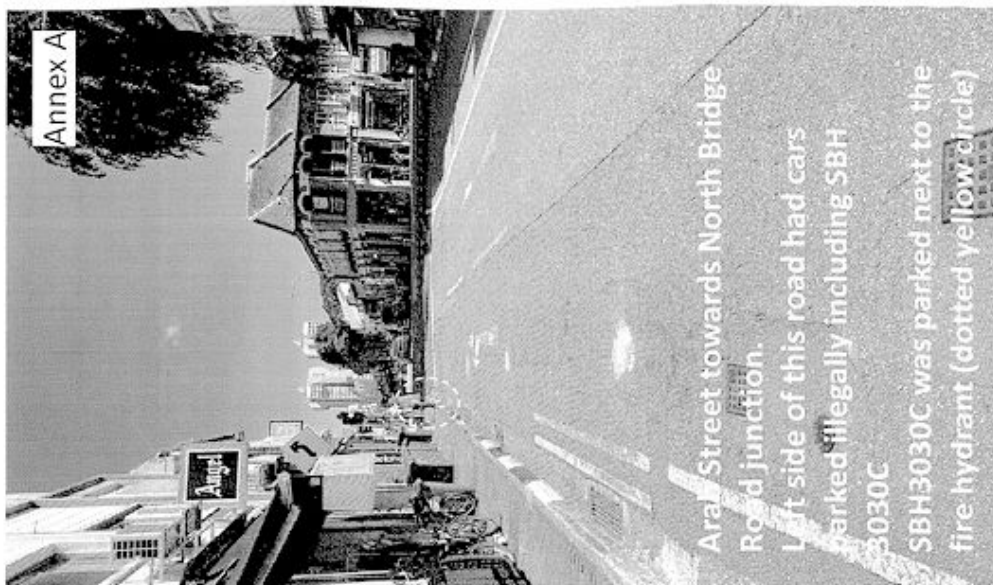
Rochor Street

On 13th May 2023, around 0950 hours, I, NRIC 1674673H, Lim Chwee Kuong, was driving my Lexus RX 300, SGT 625J, at about 35km/hr along Arab Street towards Victoria Street.

I wanted to make a turn left at Arab Street – North Bridge Road junction towards Rochor Street when I noticed the extreme left-turning lane were occupied by illegal parking cars including **SBH3030C**. SBH3030C was parked next to a fire hydrant, and inside sat Mdm Wee Swee Yong, NRIC S0187231A, of age 70, behind the wheels awaiting for her husband to board from his shopping. (Annex A, B and C)
Not being able to switch to the left turning lane, I made a left turn. The sharp turning radius unfortunately resulted my left side of SGT625J scraped onto to right bumper of SBH3030C. The pictures of damages on SBH3030C (Annex D) and SGT625J (Annex E) were taken by both parties. No injuries were incurred on any party.

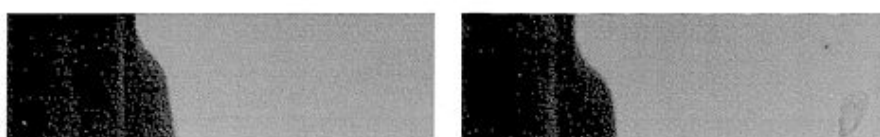
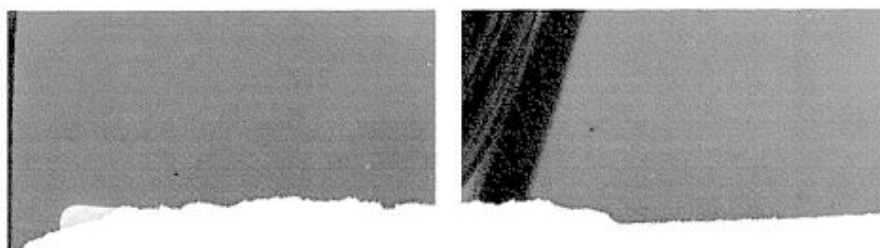
We exchanged our particulars amicably and left the incident scene at 10.00.am.

I made a report to EQ Insurance (Ms Meda) on 13 May 2023 at 1445hrs, and K. Kim Hin Auto Pte Ltd (Ms Sandra Khong) at 1450hrs. Both advised me to report the accident to the authorised workshop on Monday 15 May 2023, as they do not operate on weekends.

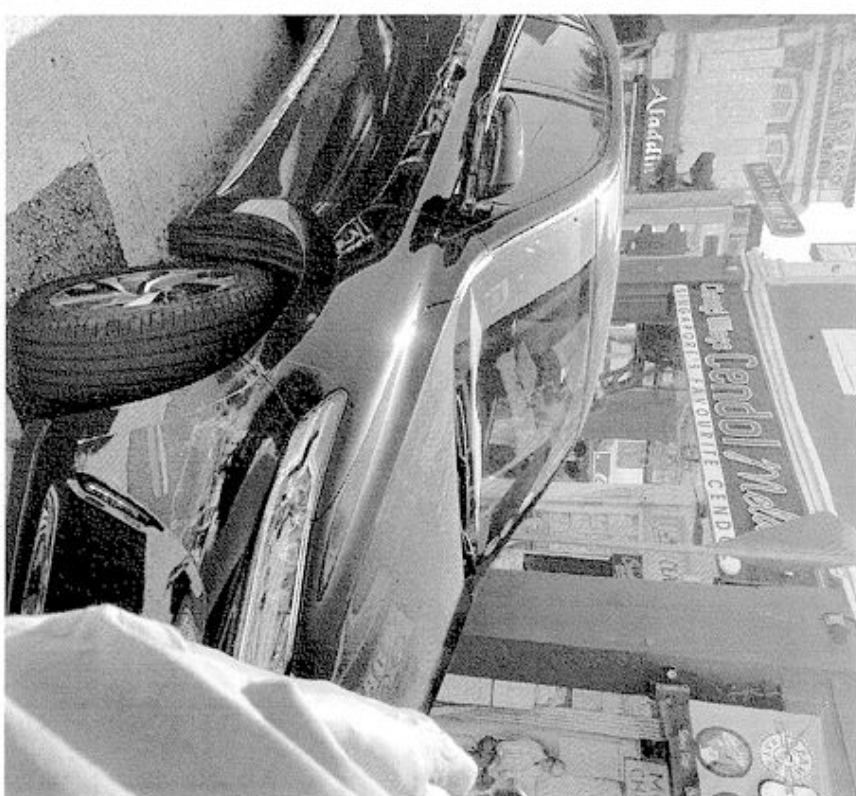
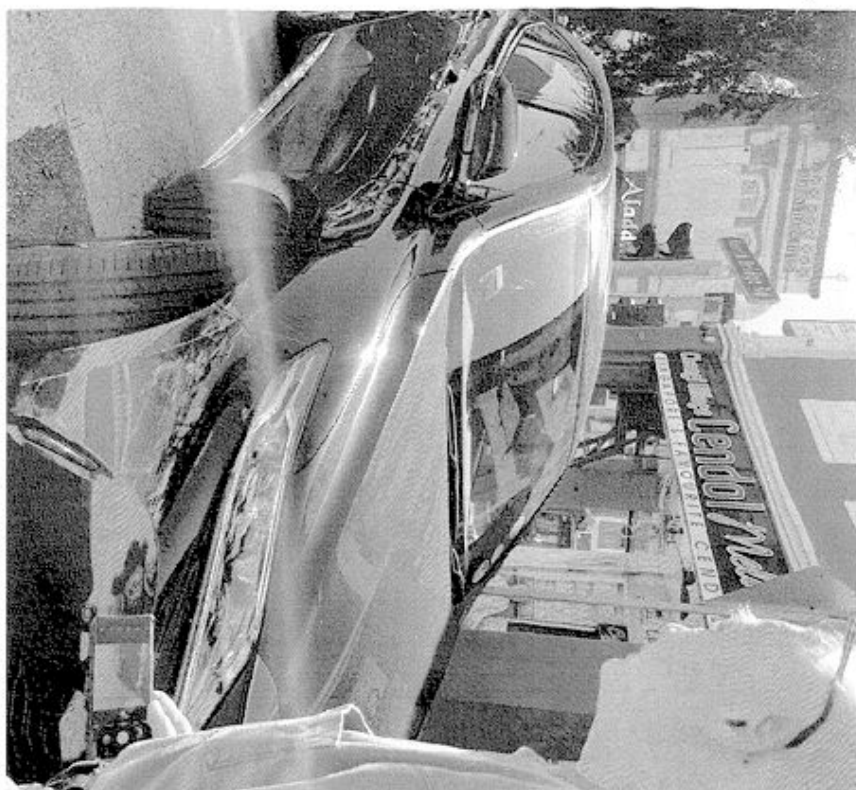




Annex B



Annex C



Annex D



Annex E







