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 22/05/2023 14:06 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 20/05/2023 13:30 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG WOODLANDS INDUSTRIAL PARK D STREET 2 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

1500

Vehicle Registration Number SKD5588L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner WONG KUM CHUEN NRIC No S7877587D Email Address KUMCHUEN@HOTMAIL.COM Mobile Phone No (Phone) +65-92997560 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Mobilio 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? No - Claiming third party Vehicle Category Private car Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited. Policy Number / Cover Note Number P10150719R04

DRIVER

Name of Driver WONG KUM CHUEN NRIC No S7877587D Date Of Birth 03/09/1978 Occupation Indoor

Date Of Driving Pass 04/06/2003 Driving experience 19 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-92997560 Alt. Phone Number Email Address KUMCHUEN@HOTMAIL.COM Address 245 PASIR RIS STREET 21, #08-81 Address complement Postcode 510245 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 Chain Collision
Weather Conditions Clear
Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident	Yes 4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	6
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	-
FOREIGN VEHICLE 1	

Vehicle Registration Number WTG103
Vehicle Category Private car

PASSENGER 1

Name WIFE Gender Female

PASSENGER 2

Name HELPER Gender Female

PASSENGER 3

Name SON Gender Male

PASSENGER 4

Name SON Gender Male

PASSENGER 5

Name DAUGHTER Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Phone No

Traffic Police

(Phone) +65-65470000

(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?

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFF1313M Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car 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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMN5261C Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car 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)

DETAILS OF OTHER VEHICLE PROPERTY 3

 Vehicle Registration Number
 WTG103

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Private car

 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)		_

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	_
Address Complement	_
Post Code	_
Approximate Age Years Old	_
Injuries Sustained	
Injured person in which vehicle?	_
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	_



IMPORTANT NOTICE

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- 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.

Any false reporting may be referred to the Traffic Police Department for investigation.

- 6. 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.
- 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)

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 figns), which may be sited outside of Singapore, for one or more of the above Purposes

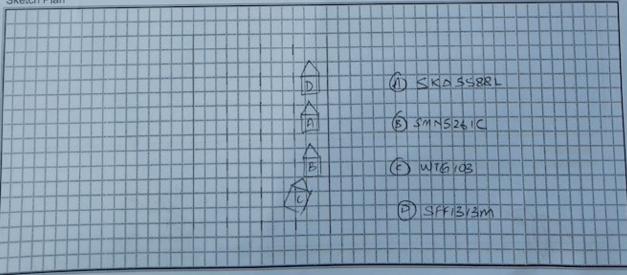
Policyholde & Signature / Date & Time

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

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

Tarkes Tan

Sketch Plan



Describe Circumstanc	e of the Accident	
	REFER TO POLICE REPORT	
	KEHBE 10 TOUGE PETGET	
	73%	
Declaration I/We declare the foregoin	g particulars are true in every respect.	
		Town
AV		
Policyholder's Signature / Dat		James Tan Witnessed by Reporting Centre Personnel
	& Time	(Name as in NRIC/ID card)
		2





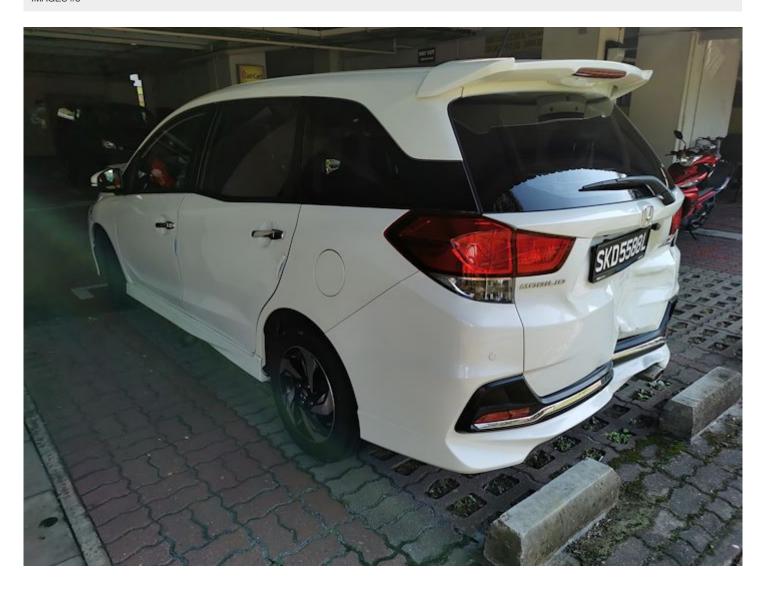






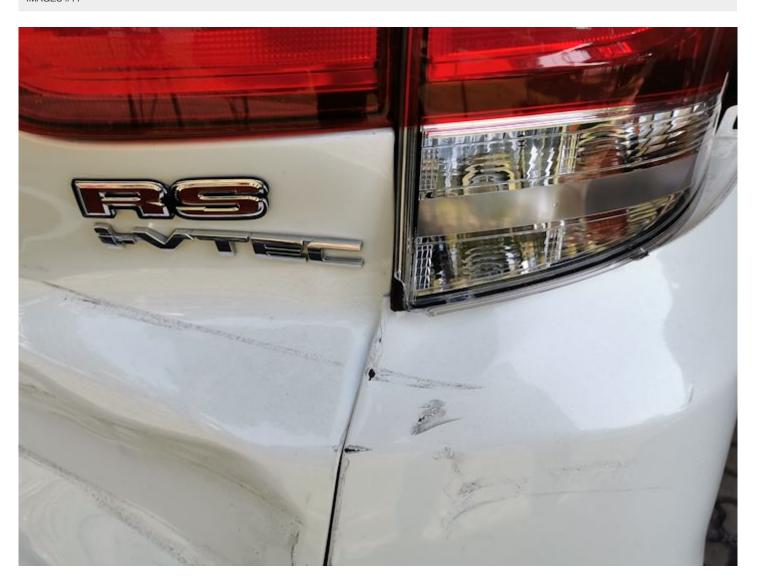










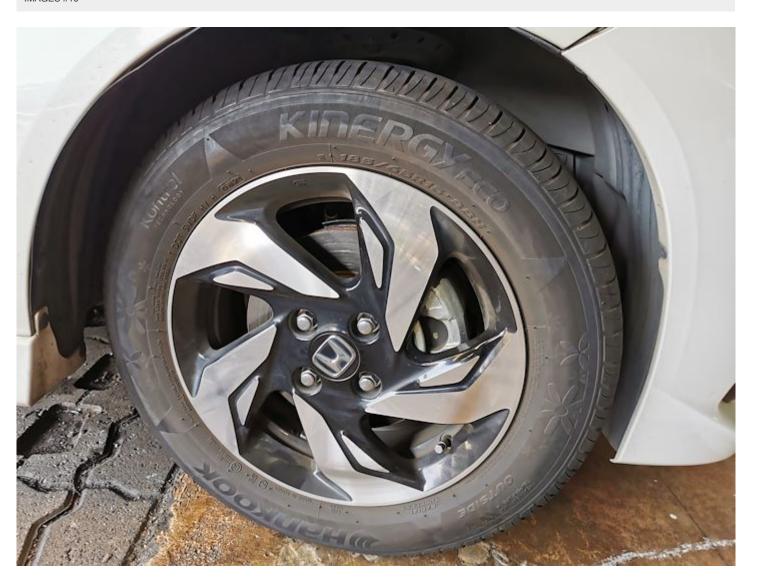






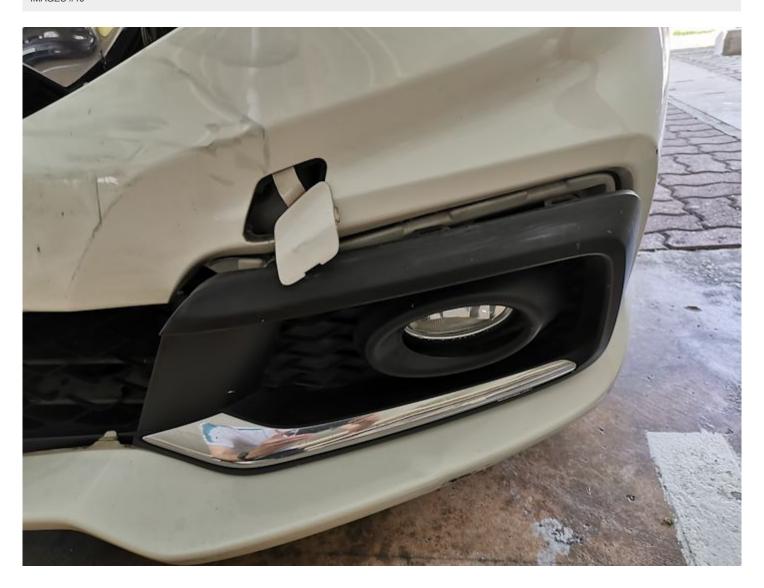




















Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 4 Report No. T/20230521/7001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/05/2023 00:14		Vide Report No.: Station Diary L/20230520/0077					
Informa	rmant's Particulars						
	Informant: KUM CHUE		Address: 245 PASIR RIS STREET 21 #08-81 SINGAPORE 9				
ID Type / ID No.: NRIC NO / S7877587D			Contact No.: Home/Office: Mobile: 92997560				
Nationality: SINGAPORE CITIZEN			Email: KUMCHUEN@HOTMAIL.COM				
Sex: Age: Date of Birth: Male 44 03/09/1978			Type of Informant: Driver				
Race: Chinese			Language: English				
Occupation: Managing director/Chief executive officer			Driving Licence Informa Class: 3	ation: Date of Expiry:			

Type of Accident: Injury Attended by Police		Drink Drive: No	Date/Time of Accident: 20/05/2023 13:30	Type of Location Straight Road
WOODLAND	S INDUSTRIAL PARK D	STREET 2		
V1.5.10 150				
		Road Surface: Dry		
Weather: Sunny Traffic Flow: One Way				Traffic Volume: Heavy

Details of V	ehicle Invo	olved		WK		01
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SFF1313M	Car		Mitsubishi	Brown	Slightly Damaged	2
SKD5588L	Car	HONDA	MOBILIO SV 1.5 CVT	White	Seriously Damaged	6
SMN5261C	Car		Honda Freed	Grey	Seriously Damaged	7





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230521/7001

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
WTG103	Car	ТОУОТА	Alphard	White	Seriously Damaged	1

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SKD5588L	AUTO & GENERAL INSURANCE (SINGAPORE) PTE, LIMITED	P10150719R04	30/03/2023	29/03/2024		

Details of Perso	n Involved					
Any Pedestrian In	nvolved: No					
No. of Pedestrians Injured: NIL Use of Pe					Cross	ing: NA
Passenger						
Name	LEA OMEGA WONG				(S7980130E
Related Vehicle	SKD5588L (Car)				ct No.	92997561
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Slight		
Driver						NO-11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name	WONG KUM CHUE	N		ID No.	3	S7877587D
Related Vehicle	SKD5588L (Car)			Contact No.		92997560
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	NIL	Date		NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of		Slight	l e

Brief Details.

Just before the bridge to Woodlands immigration. The traffic was heavy so my car was stationary. I have my wife, 3 kids and a helper in the car. Suddenly we felt a very strong hit from the back of our car and then our car hit the car in front of us and stopped. We were all startled and my wife, my son, my helper all had neck and head pain because of the impact that caused our head to knock against the head rest. The car behind us is a Honda Freed (SMN5261C) and they were hit by a malaysian car (Toyota Alphard - WTF103). Our car in turn hit the car in front (Mitsubishi - S%%1313M). There was injury sustained by the passengers in the car behind us caused by the hit from the Toyota Alphard.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20230521/7001

CONTINUATION OF REPORT

I have provided my car cam for front and back micro SD card to the TP. The TP has already taken pictures and reported, SCDF was also on site.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20230521/7001

CONTINUATION OF REPORT

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: 21/05/2023 00:14
Officer In Charge Of Case: TP / TPIB / MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246	Classification Of Case:
NP168	

