

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 05/06/2023 15:49 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 05/06/2023 10:16 (SGT)
Exact Location of Accident Singapore
Additional Location Information ALONG TIONG BAHRU RD TOWARDS LOWER DELTA RD
BEFORE BUKIT HO SWEE LINK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFF8768M

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner WOO CHOOK HEY
NRIC No SXXXX452D
Email Address SENJAMAN608@GMAIL.COM
Mobile Phone No (Phone) +65-80287545
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Elantra
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 0

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5098255312-05

DRIVER

Name of Driver WOO CHOOK HEY
NRIC No SXXXX452D
Date Of Birth 27/09/1967

Occupation	Indoor
Date Of Driving Pass	18/07/1992
Driving experience	30 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-80287545
Alt. Phone Number	-
Email Address	SENJAMAN608@GMAIL.COM
Address	BLK 608 SENJA ROAD #14-16
Address complement	-
Postcode	670608
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	Collision - Head to Rear
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	WONG KUM OI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Panjang Neighbourhood Police Centre
Police Station Address	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED

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	SLJ2236D
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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)	-

SKETCH PLAN

IMPORTANT NOTICE

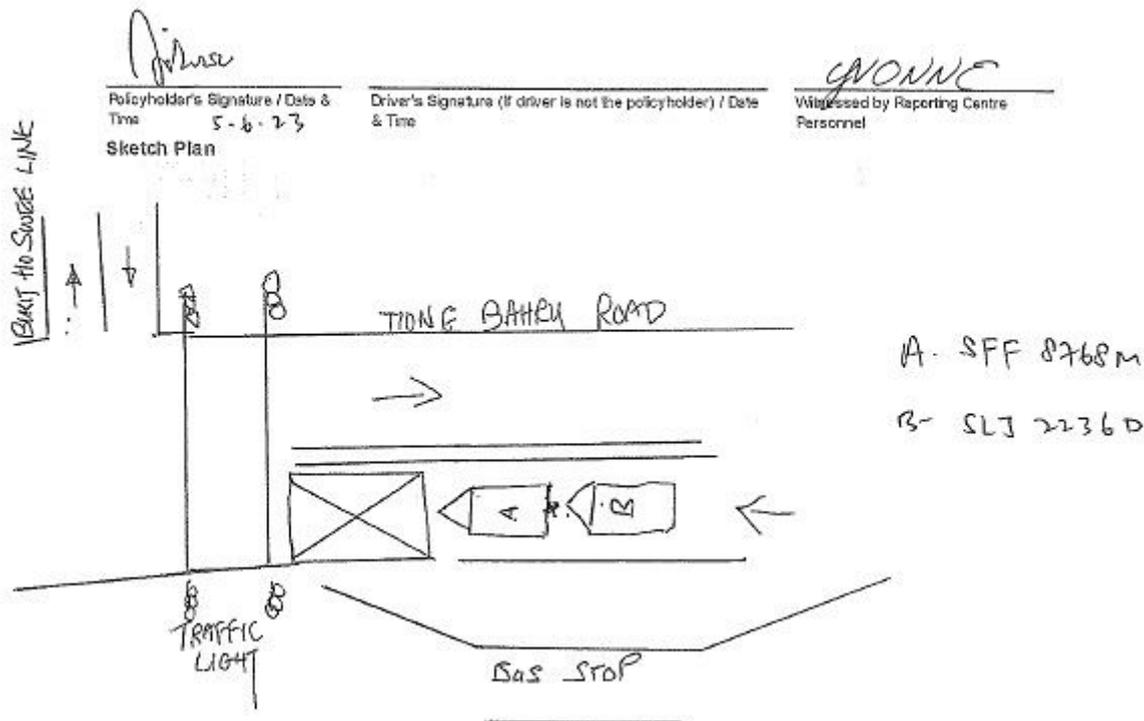
1. Please report correctly the details of the accident to speed up the claims process.
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8. Consent under the Personal Data Protection Act (PDPA)

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' 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 envelops/pastal 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.

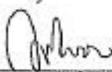


Describe Circumstances of the Accident

I WAS DRIVING TIONG BAHRU ROAD TOWARDS LOWER DELTA ROAD ON 05/06/2023, AT AROUND 10.16AM, I STOPPED AT THE TRAFFIC JUNCTION JUST BEFORE BUKIT HO SWEE LINK AND ABOUT TO MOVE WHEN THE TRAFFIC LIGHT TURNED GREEN. SUDDENLY I HEARD A LOUD BANG & FROM MY CAR REAR AND FOUND OUT THE HONDA PHILE (LICENSE PLATE: SLT2236D, DRIVER: MR. PANG SENG CHUAN, NRIC: S1339092D) HAD HIT THE BACK OF MY CAR. THE DRIVER OF CAR SLT2236D FAILED TO STOP HIS CAR IN TIME AND HIT MY CAR FROM THE REAR.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date & Time
 5.6.23

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


 Witnessed by Reporting Centre Personnel



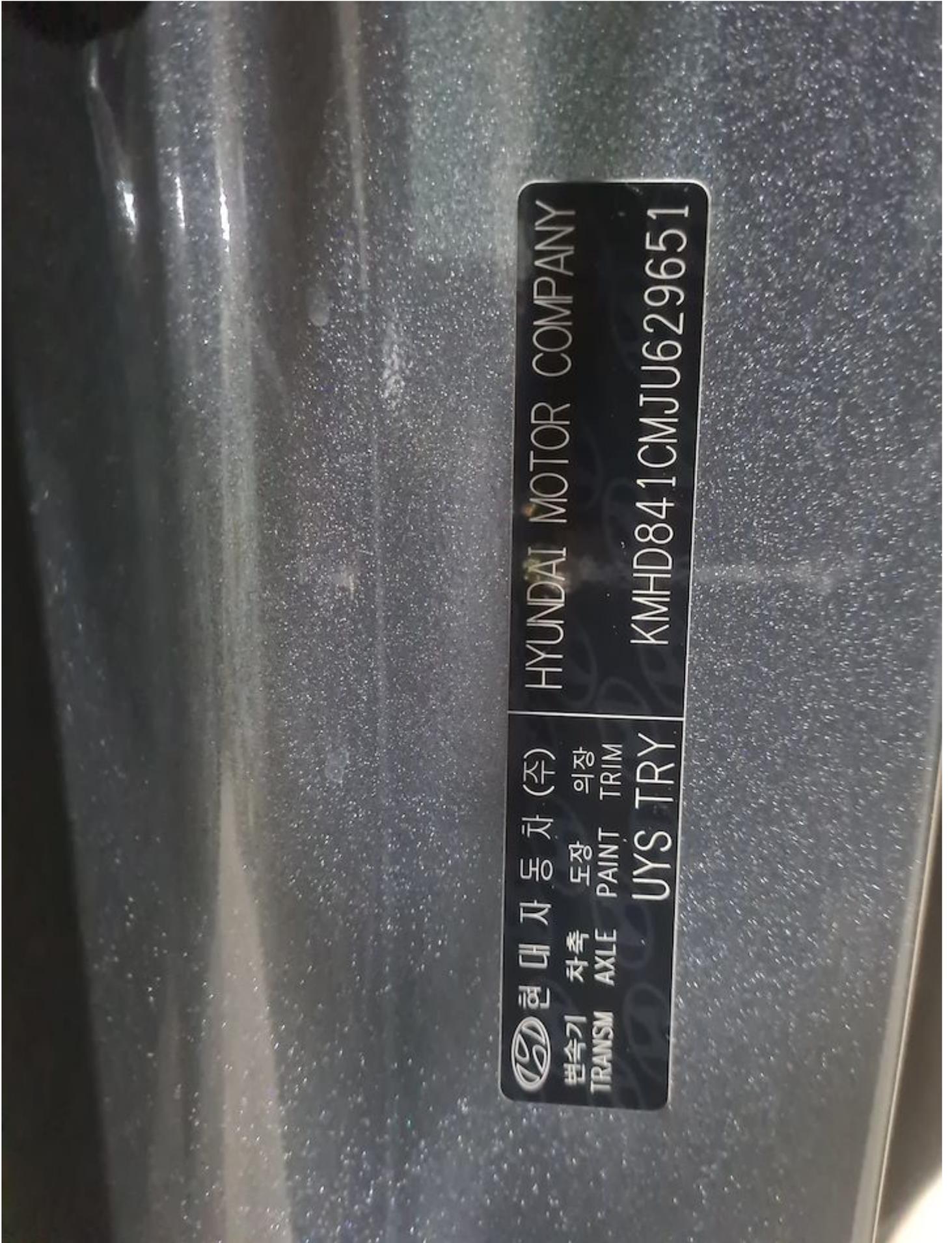






















CONFIDENTIAL

NOTICE OF COMPLIANCE

Wilson
This is to inform that Woo Chook Hey HP: 80287545 NRIC/FIN S1807452D, residing at Blk 608 Senja Road #14-16 has reported to the Police a non-injury traffic accident, which occurred at along Tiong Bahru Rd towards Lower Delta Rd, before Bukit Ho Swee Link on 05/06/2023 at 10.16am involving the following vehicles:

- I SFF8768M (Complainant's vehicle: Grey Hyundai Elantra)
 - II SLJ2236D (Driver: Pang Seng Chuan S1339092D HP:80304145)
(Black Honda Shuttle)
2. If the accident was reported to Police within 24 hours of its occurrence, He/she therefore had complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of issuing Officer : SC/CPL Lee Jong Sung
Date : 05/06/2023
Time : 1219hrs
S/D Ref : 35
Police Post/ Unit : Bukit Panjang NPC

Wilson
Bukit Panjang NPC
1 Segar Road #01-05
Singapore 67738
Tel : 6892 9999