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.

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 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 12/06/2023 14:33 (SGT) Reported by **Actual Driver** Date of Accident 10/06/2023 16:00 (SGT) Exact Location of Accident Hill St. Singapore Additional Location Information STAMFORD ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

1991

Vehicle Registration Number SJG1008S

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Mercedes-Benz Singapore Pte. Ltd. (MBS) Company Reg No 199000355E **Email Address** thanh son.nguyen@mercedes-benz.com Mobile Phone No (Phone) +65-98504838 Alternative Phone No (Office) +65-91085157

VEHICLE PARTICULARS

Manufacturer

Model BENZ E300E AVANTGARDE LEDHL 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 Yes your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003915046

DRIVER

CC

Name of Driver ANG SZE HONG JANNIFER NRIC No S6929477D Date Of Birth 08/09/1969 Occupation Outdoor

Date Of Driving Pass 11/07/1991 Driving experience 31 YEARS AND 11 MONTHS Gender Female Mobile Number (Phone) +65-98504838 Alt. Phone Number Email Address thanh_son.nguyen@mercedes-benz.com Address 157E TAMARIND ROAD #03-06 Address complement Postcode 806109 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 - Change/cross lane Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 10/06/2023 AT ABOUT 1600HRS I WAS DRIVING VEHICLE A (SJG1008S) ALONG HILL STREET ON LANE 4. WHILE DRIVING NEAR TO LOKE YEW STREET JUNCTION THERE'S A VEHICLE INFRONT OF ME SLOWING DOWN TO MAKE A LEFT TURN TOWARDS LOKE YEW STREET. I SIGNAL RIGHT TO MAKE A LANE CHANGE, MY VEHICLE HAVE A LANE CHANGE ASSIST TO ALERT ME IF THERE'S INCOMING VEHICLE. AFTER CHECKING I PROCEED TO MAKE A LANE CHANGE, WHILE DOING SO SUDDENLY VEHICLE B (SMA5525K) FROM LANE 2 MAKE A LANE CHANGE AS WELL AND COLLIDED ONTO VEHICLE A FRONT RIGHT POTION. NOBODY WAS INJURED DURING THE ACCIDENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberSMA5525KVehicle ManufacturerToyotaVehicle ModelCOROLLA ALTISVehicle Variant-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM SIOW CHENG
NRIC No	S1731948E
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

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- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any willful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
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- 6. The 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.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

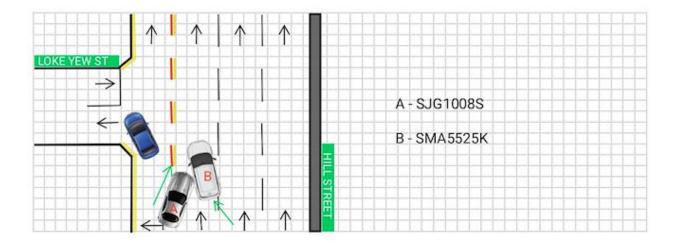
- (a) My insurer , my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively 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.
- (ii) 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.

FLASH ACCIDENT
REPORTING OFFICER
FRO NAZREEN

Policyholder's Signature / Date & Time Driver's Signature (If driver is not the policyholder) / Date & Time 11/06/2023 1245HRS

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

ON 10/06/2023 AT ABOUT 1600HRS I WAS DRIVING VEHICLE A (SJG1008S) ALONG HILL STREET ON LANE 4. WHILE DRIVING NEAR TO LOKE YEW STREET JUNCTION THERE'S A VEHICLE INFRONT OF ME SLOWING DOWN TO MAKE A LEFT TURN TOWARDS LOKE YEW STREET. I SIGNAL RIGHT TO MAKE A LANE CHANGE, MY VEHICLE HAVE A LANE CHANGE ASSIST TO ALERT ME IF THERE'S INCOMING VEHICLE. AFTER CHECKING I PROCEED TO MAKE A LANE CHANGE, WHILE DOING SO SUDDENLY VEHICLE B (SMA5525K) FROM LANE 2 MAKE A LANE CHANGE AS WELL AND COLLIDED ONTO VEHICLE A FRONT RIGHT POTION. NOBODY WAS INJURED DURING THE ACCIDENT.	

Declaration

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

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 11/06/2023 1245HRS

FLASH ACCIDENT

Witnessed by Reporting Centre Personnel













