SS2X236N000E / SME MOTOR PTE LTD ENTRY DATE & TIME: 24/06/2023 09:37 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (24/06/2023 09:37 (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.

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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 24/06/2023 09:37 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 23/06/2023 08:10 (SGT) Exact Location of Accident KPE, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mazda

1500

Vehicle Registration Number SNA749C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN ONG CHAI SIDNEY NRIC No S7804617A Email Address SIDNEYTANOC@GMAIL.COM Mobile Phone No (Phone) +65-83220034 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model

CC

3 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5131829292

DRIVER

Name of Driver TAN ONG CHAI SIDNEY NRIC No S7804617A Date Of Birth 14/02/1978 Occupation Outdoor

Date Of Driving Pass 22/01/2000 Driving experience 23 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-83220034 Alt. Phone Number Email Address SIDNEYTANOC@GMAIL.COM Address BLK 995C BUANGKOK CRESCENT #12-963 Address complement Postcode 536995 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? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name VANESSA KHOO LI YING Gender **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20230623/7041. ATTACHMENT(S) Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

No

Was there any video captured by Car Camera?

Vehicle Registration Number	SMS9678G
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	VEHICLE B
No. Of Passenger (Including Driver)	_

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLG7923L
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	VEHICLE C
No. Of Passenger (Including Driver)	-
- , - ,	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLZ4428U
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	VEHICLE D
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN ONG CHAI SIDNEY
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SNA749C

Were seat belts worn? Yes Was this injured conveyed to hospital by ambulance? No INJURED 2 Name of injured person VANESSA KHOO LI YING Gender Female Phone No Address Address Complement Post Code Approximate Age Years Old
Injuries Sustained Injured person in which vehicle? SNA749C Were seat belts worn?
Was this injured conveyed to hospital by ambulance? Yes No

SKETCH PLAN

IMPORTANT NOTICE

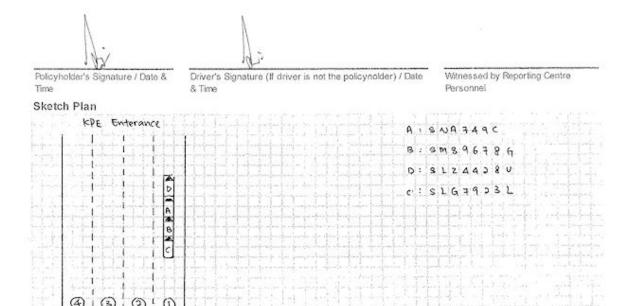
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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. 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 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' 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;
- (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' 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

Refer to P	lice Report : T/20230623/7041
	
 	
Declaration	
We declare the foregoing particula	rs are true in every respect
The coolers are reregonly particula	a ma nua maranji respecti.
Λ	N
//	1/.
195	14
Policyholder's Signature / Date & Firne	Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre & Time Personnel
E I I	A mos





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 4 Report No. T/20230623/7041

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/06/2023 14:29		/lade:	Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: TAN ONG CHAI, SIDNEY			Address: 995C BUANGKOK CRESCENT #12-963 SINGAPORE 536995			
ID Type / ID No.: NRIC NO / S7804617A		17A	Contact No.: Home/Office;	Mobile: 83220034		
Nationality: SINGAPORE CITIZEN		EN	Email: sidneytanoc@gmail.com			
Sex: Age: Date of Birth: Male 45 14/02/1978			Type of Informant: Driver			
Race: Chinese			Language: English			
Occupation: Construction manager		ger	Driving Licence Information: Class: 3	Date of Expiry:		

General Inform	nation of the Acci	dent		
Type of Accident:	ype of Injury		Date/Time of Accident: 23/06/2023 08:10	Type of Location: Straight Road
Location:				
KPE ENTERA	ANCE TOWARDS A	AIRPORT RD		
Weather:	7.2025	Road Surface:	0	
Clear		Dry		
Traffic Flow: Traffic Control: One Way Not Controlled			Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLG7923L	Car					0
SLZ4428U	Car					0
SMS9678G	Car					0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230623/7041

CONTINUATION OF REPORT

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SNA749C	Car	MAZDA	MAZDA3 5- DOOR HATCHBAC K 1.5L SP.6EAT	Blue		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNA749C	NTUC Income Insurance Co-Operative Limited	5131829292	20/11/2022	19/11/2023

Details of Perso	n Involved				
Any Pedestrian I	rvolved: No				
No. of Pedestrians Injured: NIL			Use of Pe	destrian Cr	ossing: NA
Driver					
Name	TAN ONG CHAI, SIDNEY			ID No.	S7804617A
Related Vehicle	SNA749C (Car)			Contact N	No. 83220034
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	N	L
No. of Days granted Medical Leave 05			Degree of	f Se	erious
Passenger					
Name	VANESSA KHOO LI YING			ID No.	NIL
Related Vehicle	NIL			Contact N	No. NIL
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	N	IL
No. of Days gran	ted Medical Leave	05	Degree o	Degree of Serious	



T/20230623/7041

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20230623/7041

CONTINUATION OF REPORT

Brief Details.

On 23.06.2023 at 8.10am, before entering KPE entrance, SLZ4428U stop in front of SNA749C which is why SNA749C also stop. As this happens, SMS9678G collides the rear of SNA749C, causing SNA749C to move forward and collides the rear of SLZ4428U.





4 of 4

Report No. T/20230623/7041

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

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: 23/06/2023 14:29
Officer In Charge Of Case: TP / TPIB / TAN JEOK LENG LESLIE Contact No.: 65476151	Classification Of Case:

NP168