SN09236S000F / National Assessment Centre Services [408933] ENTRY DATE & TIME: 28/06/2023 17:29 (SGT) SUBMITTED BY: NIVITHA VERSION: 1 (28/06/2023 17:29 (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 28/06/2023 17:29 (SGT) Reported by **Actual Driver** Date of Accident 22/06/2023 22:20 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS TUAS BEFORE CHANGI SOUTH EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Auto

2982

Vehicle Registration Number PC3930R

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SIANG HOCK HOLDING PTE LTD Company Reg No 1XXXXX681M Email Address car.rental@sianghock.com.sg Mobile Phone No (Phone) +65-62568888 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Hiace 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 Commercial vehicle Transmission

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd Policy Number / Cover Note Number D-23100894MFBP/6

DRIVER

CC

Name of Driver LEONG MUN FEI, KENNETH NRIC No SXXXX325F Date Of Birth 17/02/1989 Occupation Outdoor

Date Of Driving Pass 16/12/2009 Driving experience 13 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-96708386 Alt. Phone Number Email Address car.rental@sianghock.com.sg Address APT BLK 293D BUKIT BATOK STREET 21 Address complement # 14-536 Postcode 654293 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 - 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 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? Yes Police Station Name Jurong Division Headquarters Police Station Phone No (Phone) +65-18007910000 Alt. Police Station Phone No (Fax) +65-68965647 Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED POLICE REPORT - J/20230623/7008 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 SNB6250D

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

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- 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' 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 enquines 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 GR to their third party service providers or agents (including their law yers/law firms), which may be sted outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature and a Driver's Signature (If diver is not the policyholder) / Date Wineshed by Reporting Centre Personnel

Sketch Plan PIE Towards Tuas Before Changi South Gait

Policyholder's Signature and a Signature (If diver is not the policyholder) / Date Wineshed by Reporting Centre Personnel

AD B

B

AD B

A: pc3930R B: SNB 6250D

Descr	ibe Circumstances of the Accident
AT	Attached police Report - J 20230623 /7008-
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	die to I notice the west lights late and new-ended onto him
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Declaration

IWe declare the foregoing particulars are true in every respect.

May (S)

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre





Report No. J/20230623/7008

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No:1800-7910000

Date/Time Report Made 23/06/2023 02:24	Vide R	eport No.		Station Diary No.
Name Of Informant LEONG MUN FEI, KENNETH	Addres 293D B 654293	UKIT BATO	OK STREET 21 #1	4-536 SINGAPORE
ID Type / ID No. NRIC NO / S8906325F	Contact No. Home/Office: Mobile:			
Nationality SINGAPORE CITIZEN Occupation	96708386 Email Address KENN_170289@HOTMAIL.COM			
Security manager	Sex Male	Age 34	Date of Birth 17/02/1989	Race Chinese
Institution/School Name	Language English		Chinese	
Date/Time Of Incident 22/06/2023 22:20 - 23/06/2023 01:00	Location Of Incident 293D BUKIT BATOK STREET 21 #14-536 SINGAPORE 654293			
Brief details	034293			

Brief details.

Just after exiting from Airport Boluevard Road on PIE. While on a straight road, i was noticed the vehicle infront jam break and I immediately applied the brake but was not in time to avoid the collision. About 2 secs the to impact after applying the brakes

After collision about a minute from recovery from the impact. The driver and myself started to converse.

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 02:24
Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20230623/7008

He mention he was slowly breaking and noticed I did not stop.

I mention I noticed the break light suddenly and could stop in time.

Driver called TP and agreed to private settlement initially as there were no bodily injury.

Thus we decided to move the vehicle from the the middle lane to road shoulder.

EMAS arrived shortly. Driver called for his rental company for advise but when I understand they did not pick up.

EMAS asked Driver several times if he needs a AB as they notice he was tapping his back constantly and mentioned pain felt.

After much consideration AB and TP was activated.

Subsequently LTA Marshal arrived to gather details for accident.

AB and TP arrived around same time.

AB performs assemenet on me and I signed a waiver form for not wanting to be conveyed to hospital.

TP took my statement. And took possession on vehicle dashcam SD card.

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Officer In-Charge Of Case:	Classification Of Case:









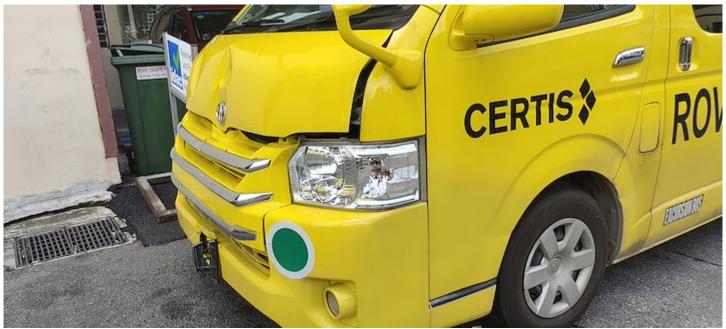






















Report No. J/20230623/7008

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No:1800-7910000

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293D B	UKIT BATO	OK STREET 21 #1	4-536 SINGAPORE
Contact No. Home/Office: Mobile:			
96708386 Email Address KENN_170289@HOTMAIL.COM			
Sex Male	Age 34	Date of Birth	Race
Language English Location Of Incident 293D BUKIT BATOK STREET 21 #14-536 SINGAPORE			Chinese
			-

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Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299) CONTINUATION OF REPORT

Report No. J/20230623/7008

Driver was conveyed to CGH. I was realised from accident scene.

That's all

Victim			
Person Name	LEONG MUN FEI, KENNETH		
ID Type	NRIC NO	ID No	S8906325F
Gender	Male	Age	34
Race	Chinese	Language	English
Occupation	Security manager	Address	293D BUKIT BATOK STREET 21 #14-536 SINGAPORE 654293
Mobile No	96708386	Is Informant A Victim?	Yes
Person Name	Yazid		
Gender	Male	Age	50
Race	Malay		30
Person Name	LEONG MUN FEI, KENN	ETH (Informant)	

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	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 02:24
Officer In-Charge Of Case:	Classification Of Case: