SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

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

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 First Submission 26/07/2023 15:48 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 26/07/2023 07:30 (SGT) Exact Location of Accident Bukit Batok East Ave 6, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKR6181X

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SOON TOH WEI NRIC No S7823063J Email Address FULLSTOP423@GMAIL.COM Mobile Phone No (Phone) +65-97303645 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Estima Variant Exact purpose for which vehicle was being used at time of 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 2362

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2004003133-01

DRIVER

SOON TOH WEI NRIC No S7823063J Date Of Birth 11/08/1978 Occupation Indoor

Date Of Driving Pass	14/02/0007
Driving experience	16.VEADO AND ARREST
Gender	Mele
Mobile Number	That's
Alt. Phone Number	(i risito) 100-0700043
Email Address	FULL STORAGE CMAIL CO.
Address	
Address complement	209 BUKIT BATOK ST 21 #09-188
Posicode	
is the driver the policyholder?	Yes
ir No, Relationship of the Driver with the Insured	res
Does Driver Own Other Vehicles?	- No
venicle Registration Number of Other Vehicle Owned by Driver	NO
######################################	
Insurance Company of Other Vehicle Owned by Driver	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	
Type of Accident Weather Conditions	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Wasanife	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance? Translator's name	No
Translator's ID	
Translator's phone number	
Translator's email	
Original language used in the statement	
g and a garage dood in the statement	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	V
Police Station Name	Yes
Police Station Phone No	Traffic Police
Alt. Police Station Phone No	(Phone) +65-65470000
Police Station Address	(Fax) +65-65474900
Was notice of intended Prosecution given?	10 Ubi Avenue 3 Singapore 408865
If yes, against whom?	No -
CIRCUMSTANCES OF ACCIDENT	
AS A POLICE REPORT.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Von
Nas there any video captured by Car Camera?	Yes No
	3112
DETAILS OF OTHER	VEHICLE PROPERTY 1
/ehicle Registration Number	SLB7404U
/ehicle Manufacturer	-
/ehicle Model	

Vehicle Variant

Vehicle Colour	
Vehicle Category	-
	Private car
Name of Driver	The same same
Contact Number	· ·
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	
0 (-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	0001170111
Gender	SOON TOH WEI
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?	-
rvae the injured conveyed to nospital by ambulance?	-



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number

: SP2004003133-01

Date of Issue

: 30 December 2022

Coverage

: Comprehensive

Policyholder

SOON TOH WEL

Period of Insurance

: 30 January 2023 to 29 January 2024(both dates inclusive)

Registration No

: SKR6181X

Chassis number of Vehicle

: ACR500076977

Persons or Classes of Persons Entitled to Drive*;

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his/her permission

*Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been concelled at the time of accident loss or damage.

Used only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purposes in connection with the Motor Trade

"Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Porty Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

IWE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or Amendment, Act or Acts passed in substitution thereof.

30 December 2022

Issued Date

Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code

: 0000053 INFINITUM FINANCIAL ADVISORY PTE LTD

Excess

: Own Damage

: Windscreen Damage

SGD SGD 600.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

DESCRIBE CIRCUIVIS	TANCES OF THE ACCIDENT
1	
AS a	police Report
4	
ECLARATION	
We declare the foregoi	ng particulars are true in every respect.

& Time:

Policyholder's Signature Date

Driver's Signature

& Time:

(If driver is not the policyholder) Date

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

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 Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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' 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 firms), which may be sited outside of Singapore, for one or more of the above Purposes.

*

Policyholder's Signature Date

& Time:

Driver's Signature

(If driver is not the policyholder) Date

& Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230726/7038

REPORT OF A TRAFFIC ACCIDENT

Date/Time 26/07/202		ade:	Vide Report No.: Station Diary No		
Informant	's Particu	lars	Walter Charles of		
Name of Ir SOON TO			Address: 209 BUKIT BATOK STREET	21 #09-188 SINGAPORE 650209	
ID Type / I	S782306	3J	Contact No.: Home/Office:	Mobile: 97303645	
Nationality	RE CITIZE		Email: ERICSOON_TW@YAHOO.CO	OM.SG	
Sex: Male	Age: 44	Date of Birth: 11/08/1978	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation Managing officer		nief executive	Driving Licence Information: Class: 3	Date of Expiry:	

	Drive:	Accident: 26/07/2023 07:30	Type of Location Bend
Weather: Clear	Road Surface:		
Traffic Flow:	Traffic Control:		Traffic Volume:
One Way	Not Controlled		Moderate

Vehicle No.	Type	Make	The second	NI CALL		
SKR6181X	Car	DESCRIPTION OF THE PARTY OF THE	Model	Color	Conditio	No of
SLB7404U		TOYOTA	estima	Brown	Slightly Damaged	0
JEB/4040	Car	NISSAN	qashqai	Black	Slightly Damaged	0





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

2 of 3 Report No. T/20230726/7038

CONTINUATION OF REPORT

The state of the s	ehicle Insurance			Carrier St.
	Insurance Company	Insurance No	Effective	Expiry Date
Allian	Allianz Insurance Singapore Pte Ltd	SP2004003133	30/01/2023	29/01/2024

Any Pedestrian I	nvolved: No						
No. of Pedestrian Driver	ns Injured: NIL		Use of Pe	destria	n Cross	sing: NA	
Name	SOON TOH WEI			ID No		S7823063J	
Related Vehicle	SKR6181X (Car)			Contact No.		97303645	
Hospital/Clinic	MOUNT ALVERNIA	HOSPITAL		Class Drivin Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL	
Date	26/07/2023		Date	Expiry	26/07	/2023	
No. of Days grant	ted Medical Leave	05	Degree of		Slight		

Brief Details.

while i was travelling out the bend at bukit batok east ave 6, a car SLB7404U bang me on the back of my car, we exchange particular, took some photos of the damage car and we left. The other party was not injured at the point of time, i feel uncomfortable on my neck and back after the incident and went to Mount Alvernia Hospitel to seek medical advise, i was issue 5 days MC and was advise to come back again if i still feel unwell.





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

3 of 3 Report No. T/20230726/7038

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / TPIB / TAY CHUN KEEN Contact No.: 65476436 Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required:

Date/Time: 26/07/2023 12:47

Classification Of Case:

This report is lodged at Bukit Timah NPC Kiosk 1