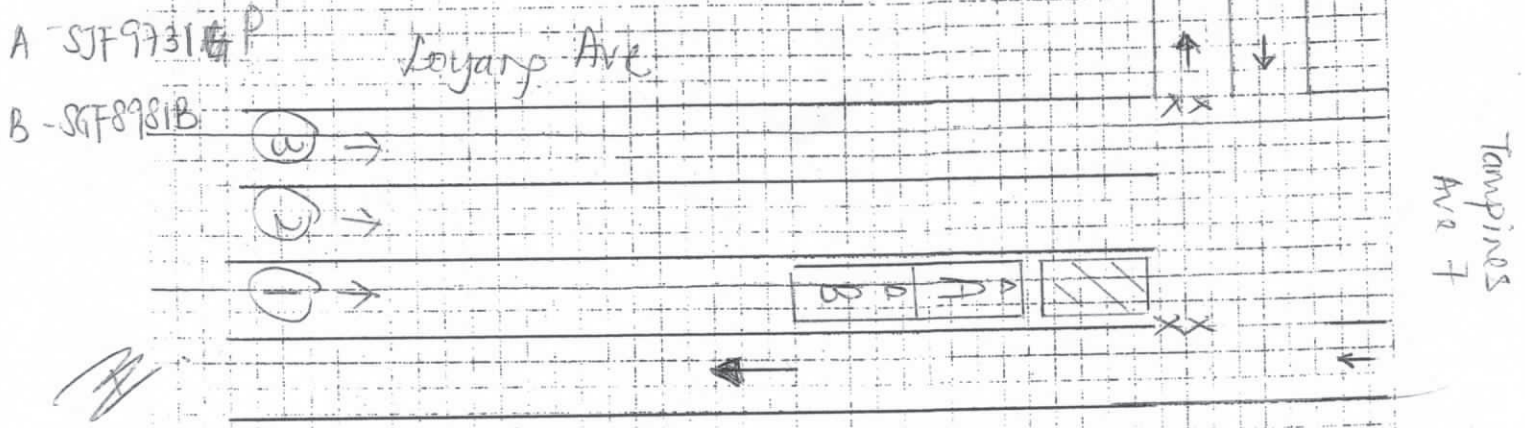


Date of Accident : 27/11/17 Accident Time: 1530 (24-HR-FORMAT)  
Accident Place : Loyang Ave twds Tampines Ave 7  
Vehicle Reg. No (Car plate No.) : SJF 9731GP  
Vehicle Make/Model : MT. Kancor FX  
Insurance Company : Aviva Policy No. \_\_\_\_\_  
Owner or Company Names /IC NO: Bay Serene 88527139C  
Owner or Company Contact No. : \_\_\_\_\_ Owner's HP \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name & IC no. : Zhao Wen Lie Benson 581414156  
DRIVER'S Date of Birth : \_\_\_\_\_ DRIVER'S License Pass Date 7/3/2  
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : BLK 34 Fernvale Link #19-14 5797532  
DRIVER'S Contact No./ Alt No. : 1) 98266394 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)  
Email Address : \_\_\_\_\_  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Ins  
Number of Passengers (including Driver): 01  
Was the accident reported to the police? YES \ NO  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

**Other Party Driver's Particulars (if any)**

Vehicle Reg No: <u>SGF 8987B</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: <u>98565155</u>	IC NO. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Loyang Ave towards Tampines Ave 7 before Junction of Old Tampines Road on lane 1. My vehicle stopped due to the "RED" traffic light. Suddenly vehicle B hit my vehicle rear portion.

## 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:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:




**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.
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. 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.
7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

\_\_\_\_\_  
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.:

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type	Singapore NRIC
Owner ID	7139C
<b>Vehicle Details</b>	
Vehicle No.	SJF9731P
Vehicle to be Exported	Yes
Intended De-registration Date	29 Nov 2017
Vehicle Make	MITSUBISHI
Vehicle Model	LANCER 1.5 MIVEC GLS 4A/T
Primary Colour	White
Manufacturing Year	2008
Engine No.	4A910100249
Chassis No.	JMYSRCY2A8U007917
Maximum Power Output	80.0 kW (107 bhp)
Open Market Value	\$16,230.00
Original Registration Date	18 Jun 2008
First Registration Date	18 Jun 2008
Transfer Count	2
Actual ARF Paid	\$16,230.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility	Yes
PARF Eligibility Expiry Date	17 Jun 2018
PARF Rebate Amount	\$8,115.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date	17 Jun 2018
COE Category	A - Car (1600cc & below)
COE Period(Years)	10
QP Paid	\$16,930.00
COE Rebate Amount	\$935.00
<b>Total Rebate Amount</b>	<b>\$9,050.00</b>

The information contained herein is correct as at 28 Nov 2017

OK