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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 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 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 Report	29/11/2017 18:04	
Date Of Accident	28/11/2017 18:30	
Exact Location Of Accident	JURONG WEST AVENUE 2	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	

	DETAILS OF SWITTERINGE
Vehicle Registration Number	SLP9793J
Insured/Policyholder	

Insured/Policyholder

Name Of Registered Owner GRAB RENTALS PTE LTD

Co Reg No 201617200G Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-98235866

Vehicle Particulars

Manufacturer HONDA

Model VEZEL-1.5 HYBRID X (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company GREAT AMERICAN INSURANCE COMPANY

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number

Cover Note Number MTGRAB20171761

Driver

Name of Driver CHEW KAM FATT(ZHOU JINFA)

 NRIC No
 S7237493B

 Date Of Birth
 03/10/1972

 Occupation
 OUTDOOR

 Date Of Driving Pass
 21/03/2003

Driving Experience 14 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90051527

Fax Number

Contact Number

EMail Address NOEMAIL

BLOCK 525 JURONG WEST STREET 52 Address

#08-265

640525 Postcode

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Was any body injured in the Accident?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

refer to sketch plan

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

YN3417S

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name

CHEW KAM FATT(ZHOU JINFA)

Approximate Age

Injuries Sustain

SORE NECK AND BACK

Injured person in which vehicle?

SLP9793J

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance?

NO

Address

BLOCK 525 JURONG WEST STREET 52 #08-265

Postcode

640525

Sketch Plan Pg. 1

SKETCH PLAN

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- 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:
 - 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: San Law

NRIC/FIN NO .: 28 859896 B

Sketch Plan Pg. 2

SKETCH PLAN		
	Jurgay V	vest Avenue 2
Red 19ht	A E B	A: SLP9793 B: YN3417S
Jurong West Str	• *	
DESCRIBE CIRCUMSTANCES O		
along centre lane of J Batok West Avenue! I Stopped due to the	t about 1830hrs, I was driving my paragraphy wrong West Avenue 2 Sending my paragraphy. Upon reaching the junction near traffic light turned amber. At and realized a lorry (B: YN 341) next day, I started to have a sore	Sterger towards Bukit Jurony West Street 23, this split Second, I felt 78) hit onto the rear portion
DECLARATION I/We declare the foregoing particular policyholder's Signature Date & Time:	Driver's Signature R (If driver is not the policyholder) N	Teporting Centre Personnel's Signature Jame: Sam Low JRIC/FIN No.: S 3 8 59 89618

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type	Company	
Owner ID	7200G	
Vehicle Details		
Vehicle No.	SLP9793J	
Vehicle to be Exported	Yes	
Intended De-registration Date	29 Nov 2017	
Vehicle Make	HONDA	
Vehicle Model	VEZEL HYBRID 1.5X AUTO	
Primary Colour	Gold	
Manufacturing Year	2017	
Engine No.	LEB5948311	
Chassis No.	RU31248292	
Maximum Power Output	112.0 kW (150 bhp)	
Open Market Value	\$25,198.00	
Original Registration Date	23 Jun 2017	
First Registration Date	23 Jun 2017	
Transfer Count	0	
Actual ARF Paid	\$5,000.00	
Intended PARF Rebate Details		
PARF Eligibility	Yes	
PARF Eligibility Expiry Date	22 Jun 2027	
PARF Rebate Amount	\$3,750.00	
Intended COE Rebate Details		
COE Expiry Date	22 Jun 2027	
COE Category	B - Car above 1600cc or 97kW (130bhp)	
COE Period(Years)	10	
QP Paid	\$53,001.00	
COE Rebate Amount	\$42,400.00	
Total Rebate Amount	\$46,150.00	

The information contained herein is correct as at 29 Nov 2017