

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 truthful and accurate as possible. Any willful misrepresentation or withholding 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	11/12/2017 16:13
Date Of Accident	05/12/2017 09:30
Exact Location Of Accident	DRIVEWAY @ TOPIARY - 15 FERNVALE LANE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ832U
Insured/Policyholder	
Name Of Registered Owner	PREMIER RENT A CAR PTE LTD
Co Reg No	200612929E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62141101

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX-1.6 (A)

Exact Purpose for which vehicle was being used at time of accident

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 CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	B 28944751 TMC
Cover Note Number	

Driver

Name of Driver	LEE JIA KEE
Passport No/FIN	A26858273
Date Of Birth	14/09/1983
Occupation	OUTDOOR
Date Of Driving Pass	28/09/2015
Driving Experience	2 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85879957
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	C/O : RMA FIVENTURES ASIA-PACIFIC PTE LTD, 37 TANNERY LANE #04-08, TANNERY HOUSE
Postcode	347790
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RENTAL
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD ON COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
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)	1

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

BOTH VEHICLES - NO PAX

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	SHA8086A
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B
Name of Driver	UNKNOWN
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	

SKETCH PLAN

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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.

PREMIER RENT A CAR PTE LTD
23 CHANGI SOUTH AVE 2
#01-01
SINGAPORE 486443
TEL : 6214 1201

& Jacky

[Signature]

Policyholder's Signature
Date & Time:

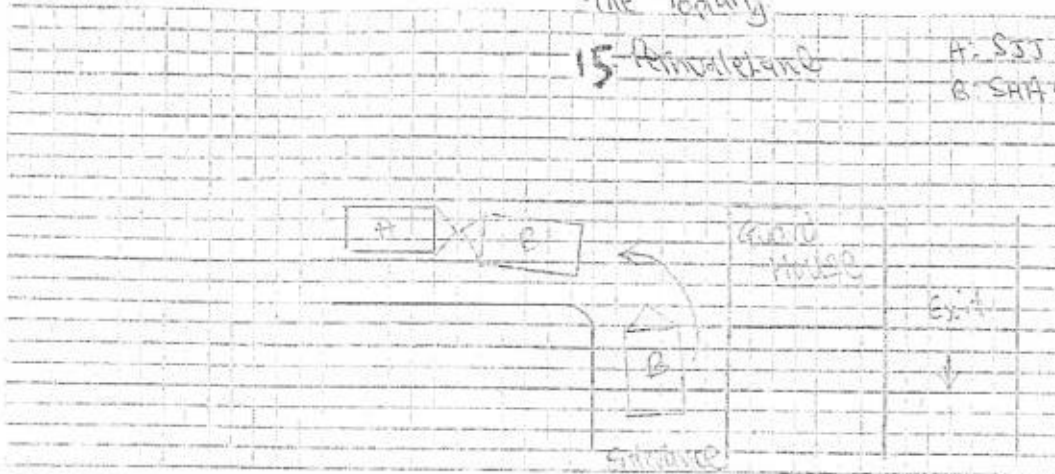
Driver's Signature
(If driver is not the policyholder)
Date & Time: 11th Dec 2017, 11.38am

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

SKETCH PLAN

The Topiary
15. Animal Land

A. SJJ 8324
B. SAA 8086A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Roller Hitch

DECLARATION

I/We declare the foregoing particulars are true in every respect.

PREMIER RENT A CAR PTE LTD
13 CHANGI SOUTH AVE 2, #01-01
SINGAPORE 486443
TEL : 8214 1101

Policyholder's Signature _____
Date & Time: _____

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11th Dec 2017, 11.38am

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

Sketch Plan Pg. 3

• Describe Circumstance of the Accident.

ON THE DAY 05.12.17 @0930HRS, I WAS DRIVING MY VEHICLE SJJ832U ALONG THE DRIVEWAY OF THE TOPIARY- 15 FERNVALE LANE

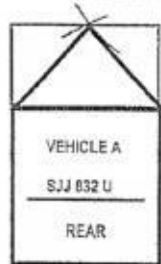
AS I WAS TRAVELING, I NOTICED VEHICLE B(SHA8086A) TURNED IN FROM THE ENTERANCE AS SUCH I CAME TO A HALT, HOWEVER VEHICLE B DON'T SEEMS TO NOTICE MY VEHICLE AND COLLIDED ONTO THE FRONT PORTION OF MY VEHICLE.

DUE TO THE IMPACT, MY VEHICLE WAS DAMAGED ON THE FRONT PORTION.

NO INJURY INVOLVED.

BOTH VEHICLE NO PASSENGER ON BOARD.

DAMAGES FOUND ON VEHICLE A, B





Driver's Signature
Monday, December 11, 2017