#### 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

aforesaid.				
	ACCIDENT STATEMENT			
Date Of Report	29/12/2017 18:20			
Date Of Accident	28/12/2017 18:30			
Exact Location Of Accident	ALONG FAJAR ROAD BEFORE SAUJANA ROAD			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SJP713Z			
Insured/Policyholder				
Name Of Registered Owner	ADVANCE			
Co Reg No	53343169K			
Email Address	TANBENGSENG59@GMAIL.COM			
Mobile Phone No	(LOCAL) +65-92282278			
Alternative Phone No	OFFICE-92282278			
Vehicle Particulars				
Manufacturer	KIA			
Model	CERATO FORTE			
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB			
Are you claiming under your own insurance policy for repair to your vehicle?	NO			
If No, Please state action to be taken	REPORTING ONLY			
Vehicle Category	COMMERCIAL VEHICLE			
Insurance Company				
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD			
Type Of Coverage	COMPREHENSIVE			
Fleet Policy	NO			
Policy Number	5082833140-01			
Cover Note Number				
Driver				
Name of Driver	TAN BENG SENG			

Name of Driver TAN BENG SENG
NRIC No S1346411A
Date Of Birth 03/01/1959
Occupation OUTDOOR
Date Of Driving Pass 16/04/1985

Driving Experience 32 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92282278

Fax Number

Contact Number OTHERS-92282278

EMail Address TANBENGSENG59@GMAIL.COM

Address BLK 374 CLEMENTI AVENUE 4

#07-168

Postcode 120374

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

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Insurance Company of Driver's Own Vehicle

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#### **General Information of the Accident**

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions AFTER RAIN

Road Surface WET

#### Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2
Was any body injured in the Accident? NO Was any injured conveyed to hospital by ambulance? NO

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver) 4

Passenger 1 NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 2 NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 3 NAME: : UNKNOWN

GENDER: : MALE

# **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

## **Circumstances of Accident**

#### PLEASE REFER TO SKETCH PLAN

### Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH CUSTOMER BUT CANNOT VIEW

Was there any audio recorded?

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLV8877B

Vehicle Make/Model/Colour MERCEDES BENZ C200

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver CHENG YU TAO
NRIC/Passport Number S8704829B

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

## IMPORTANT NOTICE

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- 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)
  - (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.
- 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:

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PECLARATION  We declare the foregoing particulars a Couldn clicyholder's Signature	Ray an	Meporting Centre Personnel's bignature n

# Sketch Plan #3



10 Sin Ming Drive Singapore 575701 Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

05 Aug 2016

Our ref 0508160401N013070856

ADVANCE APT BLK 374 CLEMENTI AVENUE 4 #07-168 SINGAPORE 120374

Dear Sir/Madam

# NOTIFICATION OF SUCCESSFUL VEHICLE CONVERSION FOR VEHICLE NO. SIP713Z.

We are pleased to inform you that your vehicle, SJP713Z, has been successfully converted from N18 - Passenger (Co) Company Car (Single Rate) / Normal to Z10 - Private Hire (Chauffeur) Motor Car / Normal with effect from 05 Aug 2016. The Business Transaction Reference No. is 20160805112437460384.

The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

: ADVANCE 1. Name : Business Identification No. Type : 53343169K Identification No. Place Of Passport Issue 4. : SJP713Z 5. Vehicle No. : Z10 - Private Hire (Chauffeur) Vehicle Type 6. Motor Car : Normal Vehicle Scheme : KIA 8. Vehicle Make Description : CERATO FORTE 1.6(A) EX ABS Vehicle Model 9. D/AB 2WD 4DR : To renew the COE, the Prevailing 10. Remarks Quota Premium payable is that of Category A.

#### Sketch Plan #4

#### Annex A

## Transaction ref 20160805112437460384

The owner and vehicle particulars for Vehicle No. SJP713Z as at 05 Aug 2016 are as follows:

1. Name : ADVANCE 2. Identification No. Type : Business 3. Identification No. : 53343169K 4. Place Of Passport Issue 1 -5. Vehicle No. : SJP713Z 6. Previous Vehicle No. 10 7. Effective Date of Ownership : 05 Aug 2016 : 11 Mar 2009 8. Original Registration Date 9. First Registration Date : 11 Mar 2009 : Z10 - Private Hire (Chauffeur) 10. Vehicle Type Motor Car 11. Vehicle Scheme : Normal : No Attachment 12. Attachment 1 13. Attachment 2 0.00 14. Attachment 3 1 -15. Vehicle Make Description : KIA : CERATO FORTE 1.6(A) EX ABS 16. Vehicle Model D/AB 2WD 4DR 17. Year of Manufacture : 2009 18. Primary Colour : Brown 1 -19. Secondary Colour : 4 20. Passenger Capacity : KNAFH221395029410 / -21. Chassis/Trailer Chassis No. : Petrol 22. Propellant : G4FC9H229991 / -23. Engine No./Motor No.

: 1591 / -

: 92.7 / 124 : 1251

24. Engine Capacity(cc)/Power Rating(kW)

25. Maximum Power Output(kW/bhp)

26. Unladen Weight(kg)

## Sketch Plan #5

- 3. Other information pertaining to the conversion is as follows:
  - Not applicable.
- Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you
  have any question.

Yours sincerely

NG LAY CHOO (MS)
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS
VEHICLE SERVICES GROUP
LAND TRANSPORT AUTHORITY

(This is a computer-generated notice that requires no signature.)































