### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Mobile Number
Fax Number
Contact Number
EMail Address

- 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 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	31/01/2018 15:46	
Date Of Accident	29/01/2018 22:40	
Exact Location Of Accident	CAR PARK DRIVE WAY OF TAMPINES STREET 81	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHC4060P	
Insured/Policyholder		
Name Of Registered Owner	SMRT TAXIS PTE LTD	
Co Reg No	198905369K	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-80000000	
Vehicle Particulars		
Manufacturer	CHRYSLER	
Model	300C-3.0 D (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	TAXI	
Insurance Company		
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD	
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT	
Fleet Policy	YES	
Policy Number	D-17087562MFSH	
Cover Note Number		
Driver		
Name of Driver	WEE LIANG JUAN	
NRIC No	S0064963E	
Date Of Birth	01/09/1949	
Occupation	OUTDOOR	
Date Of Driving Pass	11/09/1970	
Driving Experience	47 YEARS AND 4 MONTHS	
Gender	MALE	
Mobile Number		

**NOEMAIL** 

930 TAMPINES STREET 91 Address

12-477

Postcode 520930

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

COLLISION - MAJOR/MINOR RD Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : HARINA GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes.Please state which Police Station

Police Station Name TAMPINES N.P.C

Police Station Address ROAD: TAMPINES N.P.C, POSTCODE: 529682, COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES NO

NO

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SH8745P

Vehicle Make/Model/Colour **COMFORT TAXI** 

**Details Of Properties** 

Vehicle Category **TAXI** 

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

### SKETCH PLAN

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- 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.

Sh Ri

Policyholder's Signature
Date & Time:

Jump .

Driver's Signature
(If driver is not the policyholder)
Date & Time: 31120160 1546

Ju 31/1/21A

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

# Sketch Plan Pg. 2

SKETCH PLAN			
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DESCRIBE CIRCUMSTANCES O	F THE ACCIDENT		
REFER TO	POLICE REPORT.		
		Additional to the state of the	
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DECLARATION  I/We declare the foregoing particu	lors are true in A		
I/ we declare the foregoing particu	lars are true in every respect.		
	of dim		du 31/10/1018
319			CM .
Policyholder's Signature	Driver's Signature		re Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:	
1001.0 t. 1001.0 t. ma	Date & Time: 311 2018	NRIC/FIN No.:	
MEAN DESIMEDICAL WY	@ 1546 lm		

Annex D

### NOTICE OF REPORTING NON-INJURY TRAFFIC ACCIDENT

This is to confirm that Wee Liang Juan; NRIC: S0064963E, Blk 930 Tampines Street 91, #12-477 HP: 94515686, has reported to the Police a non-injury traffic accident which occurred at the entrance carpark of Blk 815 Tampines Street 81 on 29/01/2018 at about 2240hrs involving the following vehicles: SHC4060P and SH8745P.

On 29/01/2018 at around 2240hrs, I was travelling straight inside the carpark of Blk 815 Tampines Street 81 when suddenly another taxi suddenly turned right and hit onto the right side of my vehicle causing damages to it. The taxi was supposed to stop at the stop line but the driver instead move off causing an accident to happen.

I spoke with the driver of the vehicle and he informed to only take the plate number without his particulars. Photographs taken of the damages itself altogether. The driver then left afterwards.

I would like to state that there was no traffic police or ambulance at scene. There were no visible injuries on both parties. I am lodging this report for my own record purposes and insurance claim.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT T91065 Ibrahim Bin Chemad

Date: 30/01/2018 Time: 1436hrs

S/D Ref: 106

Police Post/Unit: Tampines NPC

Tampines NPC
No. 6 Tampines Avenue 4
Singapore 529682
Tel: 1800-5871999









