SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 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

THE RESERVE OF THE PARTY OF THE PARTY.	ACCIDENT STATEMENT
Date Of Report	05/03/2018 14:50
Date Of Accident	03/03/2018 15:50
Exact Location Of Accident	LOWER DELTA ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD9771H
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTÉ LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666
Vehicle Particulars	
Manufacturer	RENAULT
Model	LATITUDE-2.0 L (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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	
Driver	
Name of Driver	TEO CHER CHAI
NRIC No	S1815482Z
Date Of Birth	21/07/1967
Occupation	OUTDOOR
Date Of Driving Pass	09/10/1985
Driving Experience	32 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85752167
Fax Number	

NOEMAIL

BLK 158 YUNG LOH ROAD Address

#05-50

Postcode 610158

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

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

2

NO

YES

NO

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

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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:

: UNKNOWN

GENDER:

: FEMALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 4

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 5

NAME:

: UNKNOWN

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678

Police Station Address

ROAD: 11 KAMPONG KAPOR ROAD, POSTCODE: 208678, COUNTRY:

SINGAPORE

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Police Station Contact

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT: T/20180304/2057

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Page 2 of 15

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLG8240S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

Sketch Plan #2 Pg. 1

SKETCH PLAN 540 9771r A Retta Rood SLA 82405 13 4= DESCRIBE CIRCUMSTANCES OF THE ACCIDENT poice Report ottach See__ pis I/We declare the foregoing particulars are true in every resp Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder)

Date & Time:

GIARMC SketchPlanForm_V3

NRIC/FIN No.:

POLICE REPORT Pg. 1





1 of 3

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678

Report No. T/20180304/2057

Tel No: 1800-2949999

REPORT	OF A TRAFFIC	CACCIDENT				
Date/Time Report Made: 04/03/2018 15:47			Vide Report No.:	Station Diary No.: 73		
Informa	nt's Partic	ulars				
	f Informant: IER CHAI		Address: APT BLK 158 YUNG L	OH ROAD #05-50 SINGAPORE 610158		
ID Type / ID No.: NRIC NO / S1815482Z			Contact No.: Home/Office:	Mobile: 85752167		
National SINGAP	ity: ORE CITIZ	EN .	Email:			
Sex: Age: Date of Birth: Male 50 21/07/1967		Type of Informant: Driver				
Race: Chinese			Language:	Institution / School Name:		
Occupat Taxi driv			Driving Licence Informa Class: 3	ation: Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 03/03/2018 15:50		Type of Location Straight Road	
Location: Along Road 1 LOWER DEL Lower Delta F Weather:		Bukit Purmei.		Road	Speed Limit:	
Heavy rain		Wet		Noau	Speed Lillit.	
		Traffic Control: Traffic Light - Wo	iffic Control: iffic Light - Working		Traffic Volume: Moderate	
Dual Carriage				Amue	ne conveyed by	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD9771H	Car	RENAULT	Latitude 2.0L	Red	Slightly Damaged	5
SLG8240S	Car	TOYOTA	Wish	White	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT Pg. 1



T/20180304/2057

Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road 2 of 3 Report No. T/20180304/2057

11 Kampong Kapor Road SINGAPORE 208678

Tel No: 1800-2949999

CONTINUATION OF REPORT

Name	TEO CHER CHAI			ID No		S1815482Z
Related Vehicle	SHD9771H (Car)			Conta	ct No.	85752167
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	fInjury	NIL	

Brief Details

On 03/03/2018 at about 1550hrs, I was driving my taxi reg plate number: SHD9771H along Lower Delta Road together with 4 kids and one female adult inside my said taxi. I had stopped at the junction of Lower Delta Road and Bukit Purmei. I was at the 2nd left lane going straight towards Lower Delta Road. When the traffic light turned green, I had moved off forward and out of a sudden, I felt a car had hit onto my rear. I then alighted from my taxi and went to the rear. I then approached the driver (SLG8240S) however she did not alight from the car. The said driver then whined down the window and informed me that she did not hit onto my taxi. She then alighted from her car and she informed that she had hit onto my taxi however there was no damages on my taxi. She also informed me to not cause any trouble. I was unable to get her particulars and went back to my taxi. I had asked if my passenger if they were injured however they informed me that they are all alright. My taxi bumper had suffered some dents and scratches on the rear bumper.

POLICE REPORT Pg. 1





Police Station Of Origin: Rochor N.P.C 11 Kampong Kapor Road SINGAPORE 208678 Tel No: 1800-2949999 3 of 3 Report No. T/20180304/2057

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: A / Staff Sgt TAUFIQ BIN JUPRII SET Tan Jung Signature Of Interpreter: Not applicable	Date/Time: 04/03/2018 15:47
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case:
Authentication Stamp NP468 Signature: Singapore Folice Force	

Enquire PARF/COE Rebate for Registered Vehicle

ehicle Owner Particulars	
wner ID Type:	Company
wner ID:	3878K
ehicle Details	
ehicle No.:	SHD9771H
ehicle to be Exported:	Yes
ntended De-registration Date:	05 Mar 2018
ehicle Make:	RENAULT
ehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
rimary Colour:	Red
lanufacturing Year:	2013
ngine No.:	M9R8839C001053
hassis No.:	VF1ABL15AUC277287
laximum Power Output:	127.0 kW (170 bhp)
pen Market Value:	\$19,998.00
riginal Registration Date:	31 Mar 2014
rst Registration Date:	31 Mar 2014
ransfer Count:	0
ctual ARF Paid:	\$12,498.00
tended PARF Rebate Details	
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	30 Mar 2022

whichever is earlier.

COE Expiry Date:	30 Mar 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$58,745.00
COE Rebate Amount:	\$29,865.00
Total Rebate Amount:	\$39,238.00
Message	
Please note that the 8-year COE for	this vehicle cannot be further renewed. The vehicle must be

The information contained herein is correct as at 05 Mar 2018

OK

de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable),