MSR118033418 / SMRT Automotive Services Pte Ltd - Woodlands ENTRY DATE & TIME: 10/03/2018 11:32 SUBMITTED BY: B. Thaiyal Nayagi

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 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.

 By the lodgement of this report to the insurers, you hereby consaforesaid. 	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	10/03/2018 11:32
Date Of Accident	09/03/2018 19:20
Exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT (EXIT 13)
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB833H
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	TOYOTA
Model	PRIUS TAXI-1.8 (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
Incurance Company	

Insurance Company

Name of Insurance Company

MS FIRST CAPITAL INSURANCE LTD THIRD PARTY FIRE AND/OR THEFT

Type Of Coverage

Fleet Policy

YES

Policy Number

D-17087562MFSH

Cover Note Number

Driver

CHANG KOK HUAH Name of Driver

S6803018H NRIC No 21/01/1968 Date Of Birth **OUTDOOR** Occupation Date Of Driving Pass 01/10/1994

23 YEARS AND 5 MONTHS **Driving Experience**

MALE Gender

Mobile Number Fax Number

Contact Number

NOEMAIL EMail Address

Address

125

Postcode

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

Type Of Accident

COLLISION - HEAD TO REAR

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

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

_

Passenger 1

NAME:

: : ા

: UNKNOWN

GENDER: : MALE

Passenger 2

NAME:

: UNKNOWN

GENDER: :

: FEMALE

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

I WAS TRAVELLING ALONG PIE TOWARDS CHANGI AIRPORT (EXIT 13) WITH TWO PASSENGERS (CHINESE COUPLE) ON BOARD. ALL THE VEHICLES WERE SLOWING DOWN AS THERE WAS AN ACCIDENT AHEAD AND I FOLLOWED SUIT.AFTER WHICH I FELT AN IMPACT AT THE REAR OF MY TAXI. A VEHICLE YK8290Y HAD COLLIDED ONTO THE REAR OF MY TAXI.

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 Vehicle Make/Model/Colour YK8290Y

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

GOSH TOPEN

NRIC/Passport Number

F841772N

Contact Number

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

		2.5	
SKETCH PLAN		PIE	towards Changi Airport' EXIT 13
			FVIT 13
		1	
			A-SHB 833H B-YK8290Y
			Liga
			B-9K8290)
	I I I I I I I I I I I I I I I I I I I		
	B-1		
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
DESCRIBE CIRCONSTANCES	OT THE MODILITY		
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The state of the s			8
-10 SWIFE &			
DECLARATION			. 5
I/We declare the foregoing parti	iculars are true in every respec	t.	22018
12/12/	(116)	. 1	
3113	Man 2-	10/3/	11
Policyholder's Signature	Driver's Signature		Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the poli	cyholder)	Name:
	Date & Time:		NRIC/FIN No.:

Date & Time:

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Sketch Plan Pg. 2

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.
- 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:
 - 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: 193/18

Driver's Signature (If driver is not the policyholder) Date & Time: 3700

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5369K
Vehicle Details	
Vehicle No.:	SHB833H
Vehicle to be Exported:	No
Intended De-registration Date:	14 Mar 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZR8263645
Chassis No.:	JTDKB3FU703576990
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	19 Dec 2017
First Registration Date:	19 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Dec 2025

PARF Rebate Amount:	\$3,750.00	
Intended COE Rebate Details		
COE Expiry Date:	18 Dec 2025	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	8	
PQP Paid:	\$34,159.00	
COE Rebate Amount:	\$33,137.00	
Total Rebate Amount:	\$36,887.00	
Message		
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be deregistered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.		

The information contained herein is correct as at 14 Mar 2018

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