#### 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 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	22/03/2018 17:01
Date Of Accident	22/03/2018 16:00
Exact Location Of Accident	SLIP INTO CTE-PIE/CHANGI
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD1113K
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880
Vehicle Particulars	
Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5095413893
Cover Note Number	
Cover Note Number  Driver	
	TAY BENG CHYE
Driver	TAY BENG CHYE S1251433F
<b>Driver</b> Name of Driver	
Driver Name of Driver NRIC No Date Of Birth Occupation	S1251433F
Driver Name of Driver NRIC No Date Of Birth	S1251433F 12/07/1957
Driver Name of Driver NRIC No Date Of Birth Occupation	S1251433F 12/07/1957 OUTDOOR
Driver  Name of Driver  NRIC No  Date Of Birth  Occupation  Date Of Driving Pass	S1251433F 12/07/1957 OUTDOOR 27/10/1978
Driver  Name of Driver  NRIC No  Date Of Birth  Occupation  Date Of Driving Pass  Driving Experience	\$1251433F 12/07/1957 OUTDOOR 27/10/1978 39 YEARS AND 4 MONTHS
Driver  Name of Driver  NRIC No  Date Of Birth  Occupation  Date Of Driving Pass  Driving Experience  Gender	S1251433F 12/07/1957 OUTDOOR 27/10/1978 39 YEARS AND 4 MONTHS MALE
Driver  Name of Driver  NRIC No  Date Of Birth  Occupation  Date Of Driving Pass  Driving Experience  Gender  Mobile Number	S1251433F 12/07/1957 OUTDOOR 27/10/1978 39 YEARS AND 4 MONTHS MALE

Address

BLK 545 #11-1378 BEDOK NORTH ST 3

Postdode

460545

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

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

#### General Information of the Accident

Type Of Accident

SIDE SWIPE

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?

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

XE3724P

Vehicle Make/Model/Colour

**TANKER** VEH. B

**Details Of Properties** 

**TANKER** 

Vehicle Category Name of Driver

RATHNAVELU DEVARAJAN

NRIC/Passport Number

G7447718L

Contact Number

84344565

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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.

\* A Contraction of the contracti

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

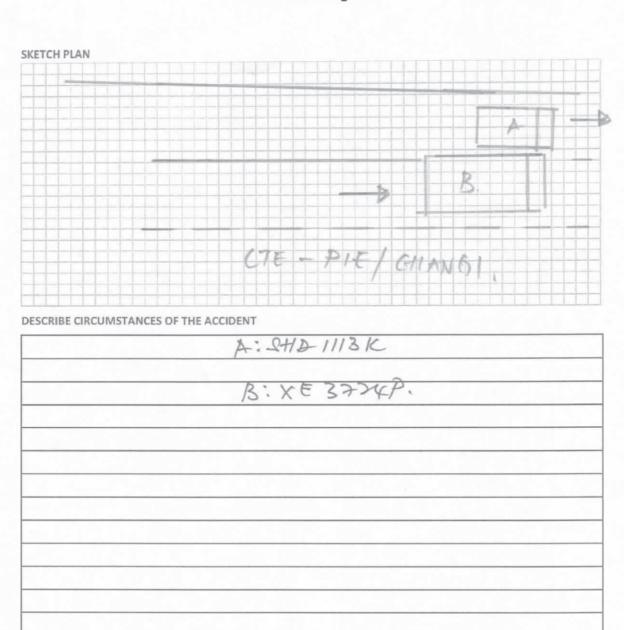
Date & Time:

2 2 MAR 2018

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

## Sketch Plan Pg. 2



DECLARATION

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

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

2 2 MAR 2018

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

GIARMS Stortch Piper Form V

## Describe Circumstance of the Accident.

ON 22/03/2018 @ 1600 HRS, I WAS DRIVING MY TAXI (SHD 1113 K) ALONG CTE-PIE/CHANGI SLIP ROAD, IN THE EXTREME LEFT LANE.

WHILE I WAS MOVING STRAIGHT AHEAD, SUDDENLY I FELT AN IMPACT FROM MY RIGHT.

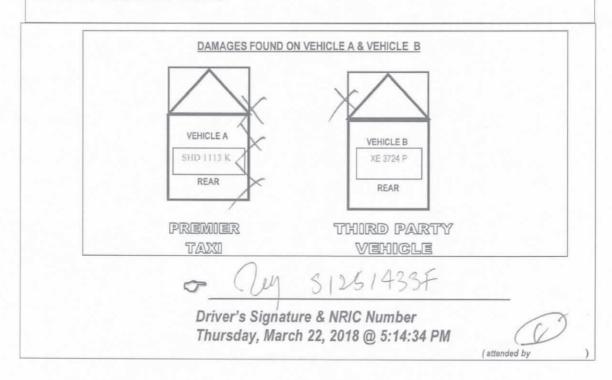
WHEN INSPECTED, I DISCOVERED THAT VEHICLE B ( XE 3724 P -TANKER ) WHICH WAS INITIALLY ON MY RIGHT - FAILED TO KEEP FOR PROPER LOOK OUT & FAILED TO KEEP IN LANE, HAD ENCROACHED ONTO MY PATH ON MY RIGHT ABRUPTLY.

AS SUCH, THE LEFT FRONT PORTION OF VEHICLE B COLLIDED ONTO THE RIGHT PORTION OF MY TAXI.

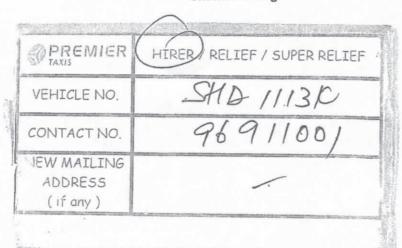
DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE ENTIRE RIGHT PORTION AND VEHICLE B HAD DAMAGES ON THE LEFT FRONT PORTION.

NO INJURY INVOLVED. NO PASSENGERS ONBOARD BOTH VEHICLES

\*VIDEO FOOTAGE CAPTURED.



#### Sketch Plan Pg. 4



REPUBLIC OF SINGAPORE DENTITY CARD NO. \$1251433F



TAY BENG CHYE

Race CHINESE

Cate of birth

12-07-1957

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S 1 2 5 1 4 3 3 F

TAY BENG CHYE

Birth Date: 12 Jul 1957 Insue Date: 11 Nov 2016

|002528121C||||||





илис ио. S1251433F

Date of issue 04-11-2016

APT BLK S45 BEDOK NORTH STREET 3 #44-1278 SINGAPORE 460545

# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 27 Oct 1978 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A







VOCATIONAL LICENCE

Licence No : S1251433F Name : TAY BENG CHYE

Issue Date : 9/11/2016

Please visit www.lfa.gov.sg to check the status of this vocational licence

Text size +

## **Enquire Transaction History**

## Transaction History Details

Log Date/Time:

03 Feb 2016 / 08:47:31

Receipt No.:

AACCK001-AX239-160203-000002

Asset Type:

Vehicle

Transaction Amount:

\$66,720.00

Asset ID:

SHD1113K

Channel:

AA Counterless - CYCLE & CARRIAGE KIA PTE LTD

Transaction Type:

01.02 Register New Vehicle (AA)

**Business Transaction** 

Reference No.:

20160203084731501339

Vehicle No.:

SHD1113K

Vehicle Type:

H10 - Public Transport Taxi (Motor Car)

Vehicle Attachment 1:

Air-Con (Taxi)

Vehicle Attachment 2:

Vehicle Attachment 3:

Vehicle Scheme:

Taxi (Company)

First Registration Date: 03 Feb 2016

Original Registration

03 Feb 2016

Vehicle Make:

KIA

Vehicle Model:

OPTIMA 1.7(A) DIESEL

Chassis No.:

KNAGM414MF5659603

Engine No.:

D4FDFH314359

Motor No.:

Trailer Chassis No .: Propellant:

Diesel

Passenger Capacity:

4

Engine Capacity:

1685

Power Rating:

Unladen Weight:

1584

Maximum Laden Weight:

2050

Primary Color:

Silver

Secondary Color:

2015

Manufacturing Year:

\$22,528.00

Open Market Value:

Minimum PARF Benefit: \$14,124.00

PARF Eligibility:

No. of Transfer.

Effective Ownership

Date/Time:

03 Feb 2016 08:47:31

COE No .:

2016020301003288Z

COE Expiry Date:

02 Feb 2024

COE Bid Category:

Actual QP/PQP Paid Amount:

\$43,040.00

Lifespan Expiry Date:

02 Feb 2024