MVMG18051576 / Vermogen Ace Pte Ltd - HQ ENTRY DATE & TIME: 18/04/2018 17:26 SUBMITTED BY: Noor Roszaline Bte Rosli

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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.
- 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

	ACCIDENT STATEMENT			
Date Of Report	18/04/2018 17:26			
Date Of Accident	18/04/2018 10:55			
Exact Location Of Accident	THE FULLERTON HOTEL (DROPOFF POINT)			
Country/State of Loss	SINGAPORE			
•	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SLF6426S			
Insured/Policyholder				
Name Of Registered Owner	LION CITY RENTALS PTE LTD			
Co Reg No	201504621K			
Email Address	NOEMAIL			
Mobile Phone No				
Alternative Phone No	Office-66944919			
Vehicle Particulars				
Manufacturer	HONDA			
Model	VEZEL			
Exact Purpose for which vehicle was being used at time of accident	HIRER			
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	PRIVATE CAR			
Insurance Company				
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.			
Type Of Coverage	COMPREHENSIVE			
Fleet Policy	YES			
Policy Number	999995141			
Cover Note Number				
Driver				
Name of Driver	YOW TUCK KEONG			
NRIC No	S1363599D			
Date Of Birth	15/12/1959			

OUTDOOR

20/05/1980

37 YEARS AND 10 MONTHS

Gender **MALE**

(LOCAL) +65-90106639 Mobile Number

Fax Number

Contact Number

EMail Address NOEMAIL

Address 44 BENOI ROAD BLOCK B (ENTTRANCE B) ENTRANCE 6 BENOI SECTOR

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

ambulance?

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 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?

If Yes, against whom?

NO

NO

Circumstances of Accident

PLEASE REFER ATTACHED. THANK YOU

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

SHD3025T Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties VEH. B Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

97546568

Accident Sketch Plan

SKETCH PLAN

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 withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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 aforesald.
- 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.
- (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 Signati Date & Time:

work the establishment of the

Driver's Signatu

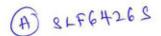
(If driver is not the policyholder)

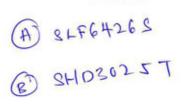
Date & Time:

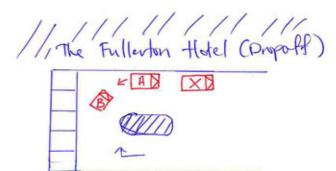
Reporting Centre Name:

NRIC/FIN No.:

SKETCH PLAN







tile I was reversi	ing ming	to gut	out /	exit,
he taxi came of my cor, and lamage of my cor.	moderaty	fum	belie	nd
my car, and	caused	my ca	r to h	ave
midl damage	as my	rear	right	partie
f my car.	0		4	1
			0.00	
	DE 600032 - 0 100			
			alia d	

Policyholder's Signature Date & Time:

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Google Maps Fullerton Square



Street View - Oct 2016

Google, Inc.

ic and license

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$1363599D



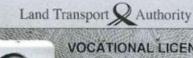


YOW TUCK KEONG

姚 徳 强

Race CHINESE 15-12-1959 SINGAPORE





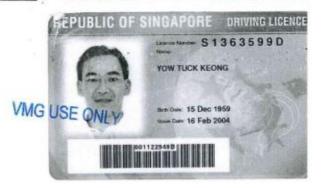
VOCATIONAL LICENCE

Licence No : \$1363599D

Name YOW TUCK KEONG

Issue Date 15/3/2013

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





S1363599D

VMG USE ONLY

2564948

Type Description

TAXI VL 15/03/2013

This card is not transferable and is the property of the Land Transport

Authority (LTA). It must be surrendered to the LTA on request. If found,

please return to LTA, 10 Sin Ming Drive, Singapore 575701. Issue Date



NRIC No: \$13635990

Date: 07/07/2014



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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilogram

VMG USE ONLY

NP 428A





