

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 withholding 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 | 23/04/2018 19:27 |
| Date Of Accident | 18/04/2018 07:30 |
| Exact Location Of Accident | BEDOK SOUTH ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------------------|
| Vehicle Registration Number | SKQ7179C |
| Insured/Policyholder | |
| Name Of Registered Owner | CLEARPACK SINGAPORE PTE LTD |
| Co Reg No | 199102690C |
| Email Address | AJAY@SG.CLEARPACK.COM |
| Mobile Phone No | (LOCAL) +65-92775011 |
| Alternative Phone No | OFFICE-92775011 |

Vehicle Particulars

| | |
|--|-----------------------|
| Manufacturer | TOYOTA |
| Model | COROLLA ALTIS-1.6 (A) |
| Exact Purpose for which vehicle was being used at time of accident | |
| 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 | QBE INSURANCE (SINGAPORE) PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | PARAKH AJAY VICKRAM |
| NRIC No | S7163373Z |
| Date Of Birth | 17/08/1971 |
| Occupation | INDOOR |
| Date Of Driving Pass | 10/12/2008 |
| Driving Experience | 9 YEARS AND 4 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-92775011 |
| Fax Number | |
| Contact Number | |
| EEmail Address | AJAY@SG.CLEARPACK.COM |

Address .
 Postcode
 Was driver an employee of the Insured's Company YES
 If No, Relationship of the Driver with the Insured
 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
 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

refer to sketch plan

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 SHA4100T
 Vehicle Make/Model/Colour
 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)

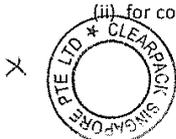
SKETCH PLAN

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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.

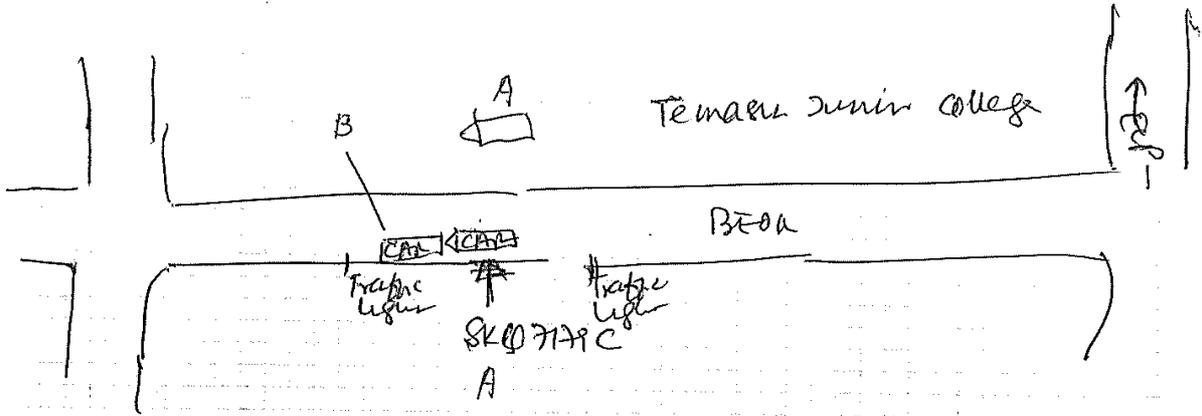


Policyholder's Signature
Date & Time:


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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving the car on Bedok South Road, just after the traffic was driving at maybe 20km/h. Made a slight touch to the Taxi from behind. I released the brake after the traffic light. ~~so~~ ^{Taxi} Vehicle number was SNA 4100T.

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:

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

QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583

Tel: 65-6224 6633 Fax: 65-6533 3270

GST Registration No.: M200644018

www.qbe.com.sg



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Date of issue 03/11/2017

**PRIVATE CAR
POLICY SCHEDULE**

Renewal

CLEARPACK SINGAPORE PTE LTD
67 UBI ROAD 1
#10-06 OXLEY BIZHUB
SINGAPORE 408730

Policy Number
8-V0012060-MVA-R002

Period of Insurance
22/12/2017 to 21/12/2018
(Both Dates Inclusive)

Account Number
05L01841
ONG AH HOCK DAVID

This policy is issued/renewed from information you have disclosed. If there are any material changes during the period of this cover, please inform us.

The Insured : CLEARPACK SINGAPORE PTE LTD

Risk Details

Private Motor

Risk No 0001

| | | | | |
|----------------------------|---------------------------|---------------------|-----------------------------|-------------------|
| Sum Insured | | Market Value | Cover | Comprehensive |
| Make & Model | TOYOTA COROLLA ALTIS 1.6L | | Registration No. | SKQ7179C |
| Type of Body | Saloon | | Cubic Capacity | 1598 |
| Year of Manufacture | 2014 | | Chassis No. | MR053REH104522005 |
| | | | Engine No. | 1ZRX472163 |
| | | | No Claims Discount | 50.00 |
| | | | Safe Driver Discount | 0.00 |

Excess SGD 3,500 Inexperience Driver-All Claims

Other Information

M2 EXCESS OWN DAMAGE
S\$ 600.00 ON AUTHORISED EMPLOYEE
S\$1,000.00 ON AUTHORISED DRIVER

M2 EXCESS OWN DAMAGE (NOT APPLICABLE TO YOUNG AND INEXPERIENCED DRIVER EXCESS)
EZ93A YOUNG AND INEXPERIENCED DRIVER EXCESS - ALL CLAIMS

Clauses Applicable

EJ45 M4D - POLICIES ISSUED OTHER THAN TO INDIVIDUAL

It is hereby understood and agreed that the words "the insured" appearing in section iv of this policy shall be deemed to be deleted and an authorised employee substituted. It is further understood and agreed that sub-section 1(c) of Section ii of the policy is deemed to be cancelled.

EJ96 NON-CANCELLATION CLAUSE

THE INSURANCE COMPANY UNDERTAKES TO ADVISE THE INTERESTED PARTY MENTIONED IN THE SCHEDULE PRIOR TO THE CANCELLATION OF THE POLICY IF INSTRUCTIONS HAVE BEEN RECEIVED FOR THE CANCELLATION

SGPXADO

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

