### 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.
- 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.

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	ACCIDENT STATEMENT
Date Of Report	14/08/2018 11:59
Date Of Accident	14/08/2018 11:15
Exact Location Of Accident	GEORGE STREET
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD1038U
Insured/Policyholder	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	203004975H
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	5095103893

Policy Number 5095103893

Cover Note Number

### Driver

Name of Driver CHENG CHEOW LOCK

 NRIC No
 S1109795B

 Date Of Birth
 17/05/1955

 Occupation
 OUTDOOR

 Date Of Driving Pass
 28/07/1977

Driving Experience 41 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91828737

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 647 #03-380 YISHUN ST 61

Postcode

760647

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - OPENING DOOR OF VEHICLE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

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

BOTH VEHICLES - NO PAX

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

NO

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SH6607T

Vehicle Make/Model/Colour

COMFORT TAXI

**Details Of Properties** 

VEH. B

Vehicle Category

TAXI

Name of Driver

CHUA KONG HWEE

NRIC/Passport Number

S7304853B

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DAMAGED ON THE FRONT RIGHT DOOR

No. Of Passenger (Including Driver)

1

## Sketch Plan Pg. 1

### SKETCH PLAN

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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 sp 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.

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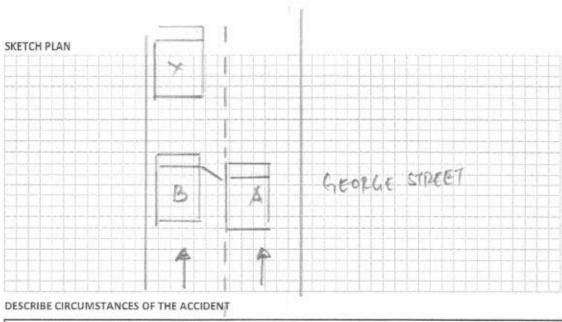
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder)

X CHENY CHEON LOCK

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

SANAS Sessionarrow V

# Sketch Plan Pg. 2



-	1:0HB 1038V	
	B: SH 66077.	
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# DECLARATION

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

14 AUG 2019



Policyholder's Signature Date & Time: \* -eh

Oriver's Signature (if driver is not the policyholder) Date & Time: 110 9795 8

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

GUODEC Skettliklantorm [V]

Describe Circumstance of the Accident.

\* OPENING DOORS OF VEHICLE \*

ON 14/07/2018 @ 1115HRS, I WAS DRIVING MY TAXI (SHD 1038 U) - TRAVELLING ALONG GEORGE STREET, IN THE RIGHT LANE.

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

WHEN INSPECTED, I DISCOVERED THAT DRIVER OF VEHICLE B
(SH 6607 T – COMFORT TAXI) WHICH WAS INTIALLY
STATIONARY/PARKED ALONG THE LEFT LANE, FAILED TO KEEP FOR
PROPER LOOK OUT, HAD OPENED THE FRONT RIGHT DOOR ABRUPTLY.

AS SUCH, THE FRONT RIGHT DOOR OF VEHICLE B HIT AGAINST THE LEFT PORTION OF MY TAXI.

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

NO INJURY INVOLVED NO PASSENGERS ONBOARD BOTH VEHICLES.

\* VIDEO FOOTAGE CAPTURED

