

PREMIER TAXIS PTE LTD

23 CHANGI SOUTH AVE 2 #03-02
SINGAPORE 486443
TEL: 65446676, 65446689 FAX: 62141511

Our Ref: SHB 8425 A

WITHOUT PREJUDICE

Date: 13 September 2018

Attn: The Motor Claims Department

(BY EMAIL ONLY)

AXA Insurance Pte Ltd
No.8 Shenton Way
#27-01
Singapore 068811

ACCIDENT INVOLVING SHB8425A & SKE8074C ALONG ECP – TOWARDS CITY (BEFORE MARINE PARADE EXIT) ON 13.09.18

We are the registered owner of vehicle number of SHB8425A which was involved on the above mentioned accident between SKE8074C.

Investigation reveals that the motor vehicle number SKE8074C was insured with you at the material time of the said accident.

As a result of the accident was caused solely and completely by the negligence of your insured vehicle number SKE8074C. Therefore, we are holding you liable for the repair costs and other consequential loss which was sustained by us.

Kindly arrange your representative to survey our vehicle at **23 Changi South Avenue 2, #01-02, Singapore 486443** within two (2) days from the date hereof as to avoid further LOR/I incur. We enclosed hereby the GIA report of SHB8425A for your kind attention.

Failing which, we have no alternative but to proceed with the necessary repairs and the bill will be forward to you for reimbursement.

Yours Faithfully,



PREMIER TAXIS PTE LTD

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	13/09/2018 10:08
Date Of Accident	13/09/2018 08:35
Exact Location Of Accident	ECP - CITY (BEFORE MARINE PARADE EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB8425A
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	5095103893
Cover Note Number	

Driver

Name of Driver	GOH ENG KIM
NRIC No	S1358432Z
Date Of Birth	05/02/1959
Occupation	OUTDOOR
Date Of Driving Pass	10/01/1977
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93248988
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 307C #11-453 ANG MO KIO AVE 1
Postcode	563307
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	2
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)	2
Passenger 1	NAME: : PAX IN THE REAR SEAT - INDIAN GENDER: : MALE

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 - 1 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	SKE8074C
Vehicle Make/Model/Colour	PEUGEOT
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	MALE FOREIGNER
NRIC/Passport Number	
Contact Number	93370996
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

SKETCH PLAN

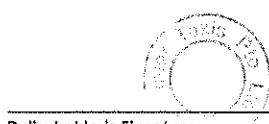
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

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:
 - (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:

9/5/2018 4:37/2
SHB842TA

13 SEP 2018

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

SKETCH PLAN

ECP-City

↑

3

X

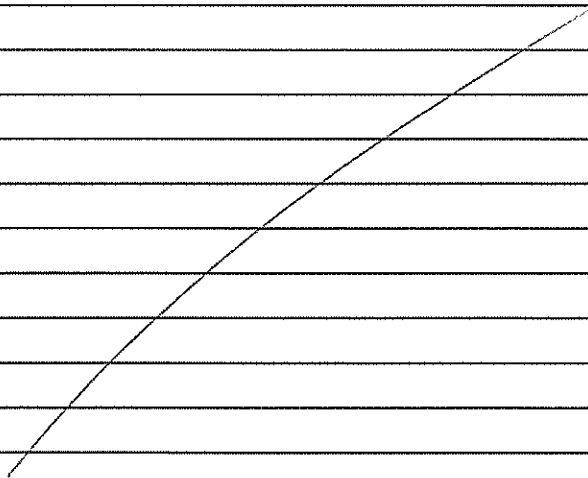
A

B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHIP 8425 A

B: SKE 8074 C.



DECLARATION

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

13 SEP 2018

Policyholder's Signature _____

Date & Time:

<http://www.scribd.com/doc/10678922>

Driver's Signature

(If driver is not the policyholder)

Date & Time:

21358432/2

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Describe Circumstance of the Accident.

ON 13/09/2018 @ 0835HRS, I WAS DRIVING MY TAXI (SHB 8425 A),
TRAVELLING ALONG ECP – CITY (BEFORE MARINE PARADE) WITH A
PASSENGER ONBOARD, IN LANE 1.

I STOPPED MY TAXI AS VEHICLES AHEAD OF ME STOPPED.

WHILE STATIONARY, SUDDENLY I FELT AN IMPACT FROM THE REAR.

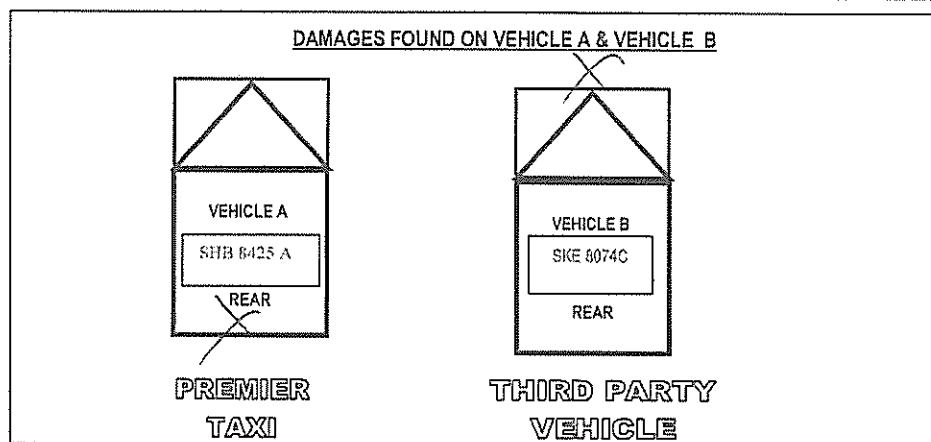
WHEN INSPECTED, I DISCOVERED THAT VEHICLE B (SKE 8074 C –
PEUGEOT) WHICH WAS BEHIND ME, HAD COLLIDED ONTO THE REAR
OF MY TAXI.


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


NO INJURY INVOLVED.

VEHICLE B HAD A PASSENGER ONBOARD.

*VIDEO FOOTAGE CAPTURED.



 S/358452/2
Driver's Signature & NRIC Number
Thursday, September 13, 2018 @ 10:19:10 AM

(attended by )

Enquire Transaction History

Transaction History Details

Log Date/Time: 27 Sep 2013 / 10:28:41 Receipt No.: AACCK001-AX239-130927-000021

Asset Type: Vehicle Transaction Amount: \$70,976.00

Asset ID: SHB8425A Channel: AA Counterless - CYCLE & CARRIAGE KIA PTE LTD

Transaction Type: 01.02 Register New Vehicle (AA)

Business Transaction Reference No.: 20130927102841629611

Vehicle No.: SHB8425A

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: 27 Sep 2013

Original Registration Date: 27 Sep 2013

Vehicle Make: KIA

Vehicle Model: OPTIMA 1.7(A) DIESEL

Chassis No.: KNAGM414ME5446807

Engine No.: D4FDDH308061

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: -

Manufacturing Year: 2013

Open Market Value: \$20,137.00

Minimum PARF Benefit: \$7,615.00

PARF Eligibility: Y

No. of Transfer: 0

Effective Ownership Date/Time: 27 Sep 2013 10:28:41

COE No.: 2013092701000799D

COE Expiry Date: 26 Sep 2021

COE Bid Category: -

Actual QP/PQP Paid Amount: \$58,144.00

Lifespan Expiry Date: 26 Sep 2021

Owner ID Type: Company



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No: GR-18-141589

Date of Request: 13/09/2018

Your Ref No: Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date 13/09/2018
Enquiry By VINCENT CHUA WEE AN
TP Vehicle No. SKE8074C
Accident Date 13/09/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SKE8074C	AXA Insurance Pte Ltd	18/09/2017-03/10/2018	6338 7288

Thank You.

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Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-18-141589

Date of Request: 13/09/2018

Your Ref No:

Online Purchase

Premier Automotive Services Pte Ltd
23 Changi South Ave 2
#01-02
Singapore 486443

Dear Sir/Madam,

Enquiry Date 13/09/2018
Enquiry By VINCENT CHUA WEE AN
TP Vehicle No. SKE8074C
Accident Date 13/09/2018

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque