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 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.
- 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	09/10/2018 18:45
Date Of Accident	09/10/2018 10:50
Exact Location Of Accident	WOODLANDS CTR RD TURN RIGHT TO WOODLANDS CTR RD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR8235A
Insured/Policyholder	
Name Of Registered Owner	WHATTI
Co Reg No	53368241W
Email Address	BENJAMIN_CHONG@YMAIL.COM
Mobile Phone No	(LOCAL) +65-96984292
Alternative Phone No	OFFICE-96984292
Vehicle Particulars	
Manufacturer	HONDA
Model	FREED
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5093829401-01
Cover Note Number	
Driver	
Name of Driver	REN IAMIN CHONG CHOON SHIN

Name of Driver BENJAMIN CHONG CHOON SHIN

NRIC No S7141857Z

Date Of Birth 25/11/1971

Occupation OUTDOOR

Date Of Driving Pass 11/03/1992

Driving Experience 26 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96984292

Fax Number

Contact Number OTHERS-96984292

EMail Address BENJAMIN CHONG@YMAIL.COM

Address

19 JALAN BINA 3, BINA PARK SERI ALAM, 8153, MASAI JOHOR

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

NO

NO

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 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.

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?

If Yes, against whom?

Circumstances of Accident

PLEASE 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 SKP4532R

Vehicle Make/Model/Colour TOYOTA ALPHARD

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver GWEE CHYE JOO

NRIC/Passport Number S1419510F Contact Number 98169479

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

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)
 - (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
- 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.
- 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 10 18

NRIC/FIN No.:

Accident Sketch Plan

KETCH PLAN					
Noor	puol cm	loop	Towners	morsiling	mer.
		A			
		(B			
A) SUR 830	YA .			2010-108	
B) SKP 459	32R)-4	CTR ROAD	
				lowners 13	
SCRIBE CIRCUMSTANCES	OF THE ACCIDE	NT			
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Centra Auto p	7 1/00	DVXCTOX		TOGOD MIS D	
CLADATION					
ECLARATION We declare the foregoing partic	culars are true in e	very respect.			
	Look	min		av es	10/2018
licyholder's Signature te & Time:		not the policyh	older)	Reporting Centre Personnel Name:	's Sighature AN
	Date & Tim	09/10/1	8	NRIC/FIN No.:	18/1/2

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INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (B	Susiness) of WHA	TTI (533	68241W)				Date: 09/08/2017	
The Following Are The	Brief Particulars of :							
Name of Business		: WHA	ATTI					
Former Name(s) if any		1						
Date of Change of Name	1	1						
Registration No.		5336	8241W					
Registration Date		- 09/0	8/2017					
Commencement Date		- 09/0	8/2017					
Status of Business		Live						
Status Date			8/2017					
Renewal Date		4						
Expiry Date		: 09/06	3/2020					
Renewal via GIRO		: NO						
Constitution of Business Principal Place of Business		Sole-Proprietor						
		320 C #03-2 CLEM	320 CLEMENTI AVENUE 4 #03-25 CLEMENTI JADE SINGAPORE (120320)					
Date of Change of Addres	99	1						
Principal Activities								
Activities (I)		PASS	SENGER LAN	ND TRANSPOR	T N.E.C. (EG PRIVAT	E CARS FOR HIR	E WITH OPERATOR	
Description		1	TRISHAWS)	(49219)				
Activities (II)		RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (77101)						
Description			THE PARTY LE		THIE GARS WITHOU	JI OPERATOR (7)	101)	
Particulars of Authorise	d Representative(s)							
Name	ID	Nation	nality	Address		Address Source	Date of Appointment	
CHONG KOK FUH	S7301556A	SING	SAPORE ZEN	#03-25 CLEME	MENTI AVENUE 4 NTI JADE ORE (120320)	ACRA	09/08/2017	

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Business Profile (Business) of WHATTI (53368241W)

Date: 09/08/2017

Name ID	ID	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry
					Position
BENJAMIN CHONG CHOON SHIN	S7141857Z	SINGAPORE CITIZEN	19, JALAN BINA 3, BINA PARK BANDAR SERI ALAM, 81750, MASAI, JOHOR, MALAYSIA	ACRA	09/08/2017
CONTRACTOR OF THE PARTY OF THE					Owner

Withdrawn Partn	ner(s)					
	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry Date of		
				Position	Withdrawal	

Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

PLEASE NOTE THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS/TRANSACTIONS FILED WITH THE AUTHORITY

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

: ACRA170809012896 (Free Business Profile by ACRA)

DATE

: 09/08/2017

This is computer generated. Hence no signature required.

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