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 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 referenced.

aforesaid.				
A CONTRACTOR OF STREET	ACCIDENT STATEMENT			
Date Of Report	12/11/2018 13:22			
Date Of Accident	12/11/2018 10:50			
Exact Location Of Accident	KAKI BUKIT AVENUE 2			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SHC5110Y			
Insured/Policyholder				
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD			
Co Reg No	200303878K			
Email Address	CLAIMS@TRANSCAB.COM.SG			
Mobile Phone No				
Alternative Phone No	OFFICE-62866666			
Vehicle Particulars				
Manufacturer	RENAULT			
Model	LATITUDE-2.0 L (A)			
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD			
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	AXA INSURANCE PTE LTD			
Type Of Coverage	THIRD PARTY			
Fleet Policy	YES			
Policy Number	VPX/P1680520			
Cover Note Number				
Driver				
Name of Driver	TEO SENG HOCK			
NRIC No	S1169634A			
Date Of Birth	13/09/1956			
Occupation	OUTDOOR			
Date Of Driving Pass	10/11/1975			
Driving Experience	43 YEARS AND 0 MONTHS			
Gender	MALE			
Mobile Number	(LOCAL) +65-98779427			
Fax Number				
Contact Number				
EMail Address	NOEMAIL			

Address BLK 68 GEYLANG BAHRU

#07-3245

Postcode 330068

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

-

NO

YES

NO

NO

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?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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

On 12.11.2018 at about 1050hours, I was Stationary straight on the extreme left lane along Kaki Bukit Avenue 2 when the traffic light was red. While stationary, suddenly I felt an impact. Vehicle B (YK3494J) hit onto my taxi rear portion.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YK3494J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category GOODS VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 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.
- 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)

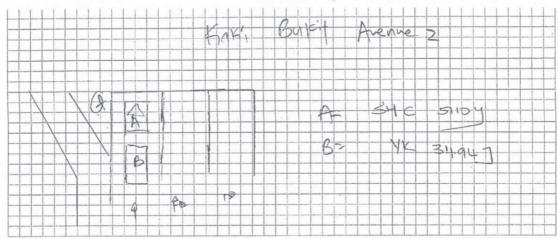
I understand, acknowledge, agree and consent that:

- (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:
 - (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 #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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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:

GIARMC SketchPlanForm_V3

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company		
Owner ID:	3878K		
Vehicle Details	30/0K		
Vehicle No.:	SHC5110Y		
Vehicle to be Exported:	Yes		
Intended Deregistration Date:	12 Nov 2018		
Vehicle Make:	RENAULT		
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR		
Primary Colour:	Red		
Manufacturing Year:	2013		
Engine No.:	M9R8839C000862		
Chassis No.:	VF1ABL15AUC276201		
Maximum Power Output:	127.0 kW (170 bhp)		
Open Market Value:	\$19,998.00		
Original Registration Date:	27 Dec 2013		
First Registration Date:	27 Dec 2013		
Transfer Count:	0		
Actual ARF Paid:	\$12,498.00		
Intended PARF Rebate Details			
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	26 Dec 2021		
PARF Rebate Amount:	\$9,373.00		
Intended COE Rebate Details			
COE Expiry Date:	26 Dec 2021		
COE Category:	A - Car (1600cc & below)		
COE Period(Years):	8		
PQP Paid:	\$62,740.00		
COE Rebate Amount:	\$24,476.00		
Total Rebate Amount: Message	\$33,849.00		

vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 12 Nov 2018