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

	ACCIDENT STATEMENT
Date Of Report	15/11/2018 10:49
Date Of Accident	14/11/2018 18:30
Exact Location Of Accident	EUNOS ROAD 8 // EUNOS AVE 3
Country/State of Loss	SINGAPORE
The state of the s	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB8358K
nsured/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	HYUNDAI
Model	I30 (FD)-1.6 DOHC (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE & 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
nsurance 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	YONG MIN FAH
NRIC No	S0074688F

Date Of Birth 18/12/1951 Occupation **OUTDOOR** Date Of Driving Pass 28/11/1975

42 YEARS AND 11 MONTHS **Driving Experience**

Gender MALE

(LOCAL) +65-84547177 Mobile Number

Fax Number

Contact Number

EMail Address NOEMAIL Address

BLK 37 CIRCUIT ROAD #16-429 SINGAPORE 370037

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - RELIEF

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - MAJOR/MINOR RD

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Vas any body injured in the Accident?

NO

NO

Was any injured conveyed to hospital by ambulance?

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 ATTACH

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

SJT5748U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SOH JING TING

NRIC/Passport Number

S9729218C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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 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 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

SKETCH PLAN

SKETCH PLAN

SKETCH PLAN

A. SHIEL B.35BK

EUROS AND B. S.S.T.S.+HBU

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Woth Attalk	

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: NRIC/FIN No.:

N

GIARDAC SketchPlanForm_V

Describe Circumstance of the Accident.

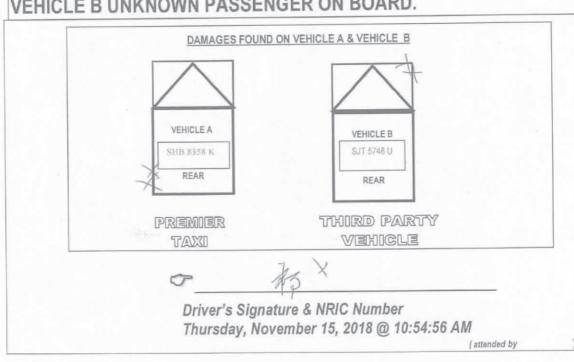
ON 14.11.18 @1827HRS, I WAS DRIVING MY TAXI SHB8358K, TRAVELING ALONG EUNOS ROAD 8.

TRAFFIC WAS CONGESTED, AS I WAS TRAVELING ACROSS THE YELLOW BOX, VEHICLE B(SJT5748U) SUDDENLY DASHED OUT FROM EUNOS AVE 3 WITHOUT GIVE WAY TO ME THUS COLLIDED ONTO THE REAR LH PORTION OF MY TAXI.

DUE TO THE IMPACT, MY TAXI WAS DAMAGED ON THE REAR LH PORTION.

VEHICLE B DAMAGED ON THE FRONT RH PORTION

NO INJURY INVOLVED.
VEHICLE B UNKNOWN PASSENGER ON BOARD.



Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert 200304975H

Owner ID Type:

Company

Owner Name:

PREMIER TAXIS PTE. LTD.

Registered Address:

23 CHANGI SOUTH AVENUE 2 #04-03 SINGAPORE 486443

Mailing Address:

Birth Date:

Vehicle Particulars

Vehicle No.:

SHB8358K

Previous Vehicle No.:

Effective Date of Ownership: 28 Sep 2016

Original Regn Date:

28 Sep 2016

28 Sep 2016

Registration Date: Year of Manufacture:

2016

Vehicle Type:

Public Transport Taxi (Motor Car)

Vehicle Scheme:

Taxi (Company)

Vehicle Attachment 1:

Air-Con (Taxi)

Vehicle Attachment 2:

Vehicle Attachment 3:

Vehicle Make:

HYUNDAI

Vehicle Model:

130 GDH 1,6 TCI 5DR DCT

Primary Colour:

Silver

Secondary Colour:

Passenger Capacity:

TMAD281UVHJ121480

Chassis No.: Engine No.:

D4FBGZ105467

Engine Capacity/Power

Rating:

1582 cc / -

Maximum Power Output:

100.0 kW (134 bhp)

Propellant:

Diesel

Max Unladen Weight:

1496 kg

Maximum Laden Weight:

1940 kg \$20,131,00

Open Market Value: PARF Eligibility:

PARF Eligibility Expiry Date:

27 Sep 2024

Minimum PARF Benefit:

\$7,610.00

No. of Transfers:

IU Label No .:

1050681030

COE No .:

2016092801004223Z

COE Expiry Date:

27 Sep 2024

COE Category:

A - Car (up to 1600cc & 97kW (130bhp))

COE Registration Category: Quota Premium (QP) /

A - Car (up to 1600cc & 97kW (130bhp))

Prevailing Quota Premium:

-/\$53,339.00

PQP Paid:

\$42,672.00

QP (Regn Cat):

OPC Cash Rebate Eligibility:

https://vrl.lta.gov.sg/lta/vrl/action/menuIndex

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