

PREMIER TAXIS PTE LTD

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

Our Ref: **SHB8778G**

WITHOUT PREJUDICE

Date: 20 Feb 2019

Attn: **The Motor Claims Department**

(BY EMAIL ONLY)

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

ACCIDENT INVOLVING SHB8778G & SJT6847K ALONG AIRPORT ROAD ON 19.02.19

We are the registered owner of vehicle number of **SHB8778G** which was involved on the above mentioned accident between **SJT6847K**.


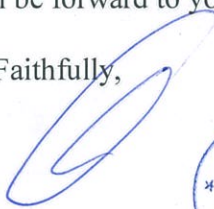
Investigation reveals that the motor vehicle number **SJT6847K** was insured with you at the material time of the said accident.

As a result of the accident was caused solely and completely by the negligence of your insured vehicle number **SJT6847K**. 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 **SHB8778G** 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

SKETCH PLAN

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 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. 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.
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:

CHAN TUCK HENG
X S 02224269

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

20 FEB 2019

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

SHB 8778 G

SKETCH PLAN

INTO
BARTLEY
ROAD EAST.



AIRPORT ROAD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SHB 87786

b: SJT 6847K.

* Refer to attach police report

* Video footage captured

DECLARATION

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

20 FEB 2019



Policyholder's Signature
Date & Time:

Driver's Signature *[Signature]*
(If driver is not the policyholder)
Date & Time: SHB 87786

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



Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

Report No. T/20190220/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/02/2019 12:53	Vide Report No.:	Station Diary No.: 85
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Informant's Particulars

Name of Informant: CHAN TUCK HONG			Address: APT BLK 116 BUKIT MERAH CENTRAL #06-3761 SINGAPORE 150116		
ID Type / ID No.: NRIC NO / S0222426G			Contact No.: Home/Office: Mobile: 97435148		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 68	Date of Birth: 16/12/1950	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: TAXI DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/02/2019 17:30	Type of Location: Straight Road
Location:				
AIRPORT ROAD				
AIRPORT ROAD TOWRADS KPE/TPE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB8778G	TAXI	HYUNDAI		Silver	Slightly Damaged	3
SJT6847K	Car	OTHERS		Black	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20190220/2073

CONTINUATION OF REPORT

Driver			
Name	CHAN TUCK HONG		ID No. S0222426G
Related Vehicle	SHB8778G (TAXI)		Contact No. 97435148
Hospital/Clinic	FINEST HEALTH MEDICAL CENTRE		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	20/02/2019	Date Discharge	20/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	JOEL ONG CHUN KWANG		ID No. S7632043H
Related Vehicle	SJT6847K (Car)		Contact No. 97964758
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 19/02/19@5.30pm I was driving my vehicle SHB8778G along Airport Road towards KPE/TPE tunnel. I has three passengers with me at that time. The traffic was heavy at that time. I had come to a complete stop while waiting to enter the tunnel. Suddenly my vehicle was hit on the rear by another car bearing registration number SJT6847K. After the collision, I alighted from my vehicle and so did the driver of the other car. We then exchanged our contact details and took photos of the damages to our vehicles.

My vehicle sustained damages to the rear and the other car sustained damages to the front. Both our vehicles were able to be driven off. The three passengers in my vehicle did not sustain any injuries. The driver of the other car did not seem to be injured. I went to seek medical treatment on 20/02/19 and I was given three days of medical leave.

I am lodging this report to forward to my company for the claiming of insurance.



Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20190220/2073

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E /

Sr Staff Sgt FAIROZ S/O ABDUL KAREEM

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

20/02/2019 12:53

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65472076

Classification Of Case:

Authentication Stamp

NP168



SINGAPORE
POLICE FORCE

SN 168

SIGNATURE



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-19-027421

Date of Request: 20/02/2019

Your Ref No:

Online Purchase

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

Dear Sir/Madam,

Enquiry Date 20/02/2019
Enquiry By GOH WEE DEK
TP Vehicle No. SJT6847K
Accident Date 19/02/2019**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJT6847K	AXA Insurance Pte Ltd	27/10/2018-26/10/2019	6338 7288

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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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**TAX INVOICE**

Our Ref No: GR-19-027421

Date of Request: 20/02/2019

Your Ref No: Online Purchase

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

Dear Sir/Madam,

Enquiry Date 20/02/2019
Enquiry By GOH WEE DEK
TP Vehicle No. SJT6847K
Accident Date 19/02/2019

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