

## 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 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.

### ACCIDENT STATEMENT

Date Of Report	25/02/2019 08:52
Date Of Accident	22/02/2019 19:30
Exact Location Of Accident	COLLEGE ROAD @ SGH BLK 7
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB8034U
<b>Insured/Policyholder</b>	
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	5107202885
Cover Note Number	

### Driver

Name of Driver	LEE POH NGUAN
NRIC No	S1204496H
Date Of Birth	22/10/1955
Occupation	OUTDOOR
Date Of Driving Pass	31/03/1976
Driving Experience	42 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90268245
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 239 #10-31 SERANGOON AVE 2
Postcode	1955
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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)	5
Passenger 1	NAME: : PAX IN THE FRONT SEAT - MALAY GENDER: : FEMALE
Passenger 2	NAME: : PAX IN THE REAR SEAT - MALAY GENDER: : FEMALE
Passenger 3	NAME: : PAX IN THE REAR SEAT - MALAY GENDER: : FEMALE
Passenger 4	NAME: : PAX IN THE REAR SEAT - MALAY/CHILD GENDER: : FEMALE

#### 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

VEH. A - 4 PAX (3 ADULT + 1 CHILD) VEH. B - NO 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 Witness 1

Name	MS OGY (ROSZITA) - PAX IN VEH. A
Phone Number	
Email Address	

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SJB5755T
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	ONG CHOON PENG
NRIC/Passport Number	
Contact Number	96704581
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	DAMAGED ON THE FRONT LEFT PORTION
No. Of Passenger (Including Driver)	1

**DETAILS OF INJURED PERSON 1**

Name	LEE POH NGUAN - DRIVER OF VEH. A
Approximate Age	
Injuries Sustain	WILL SEEK FOR MEDICAL TREATMENT
Injured person in which vehicle?	SHB8034B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

**SKETCH PLAN**

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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.

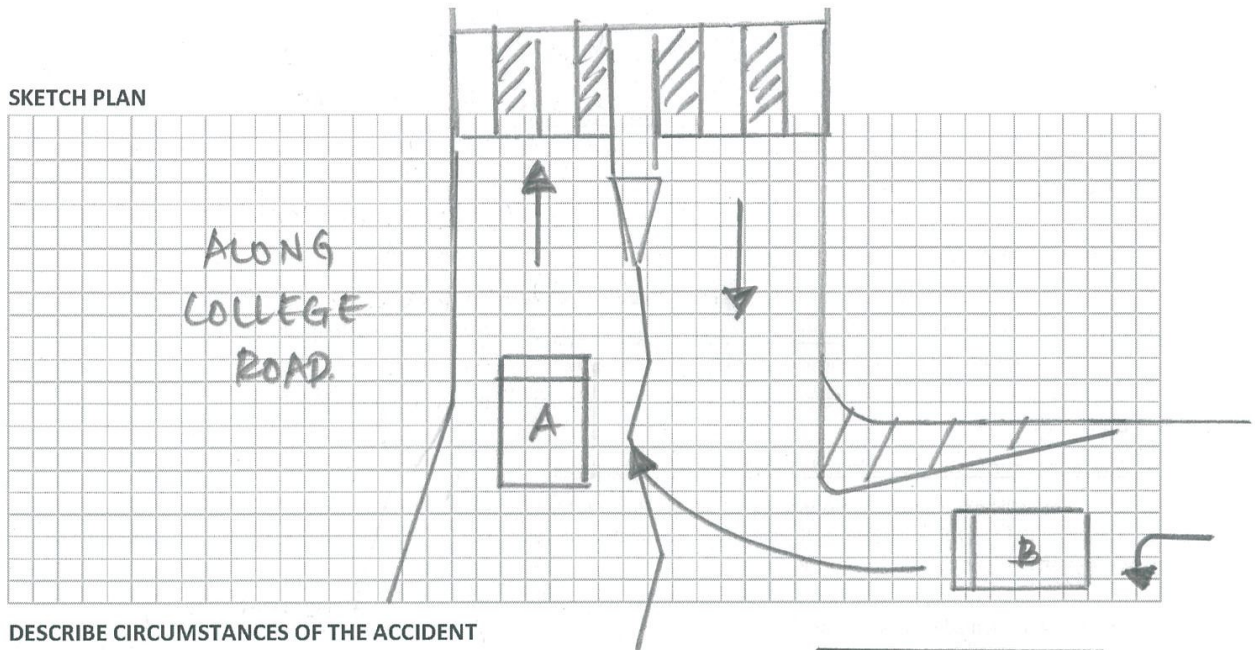
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan Pg. 2

### SKETCH PLAN

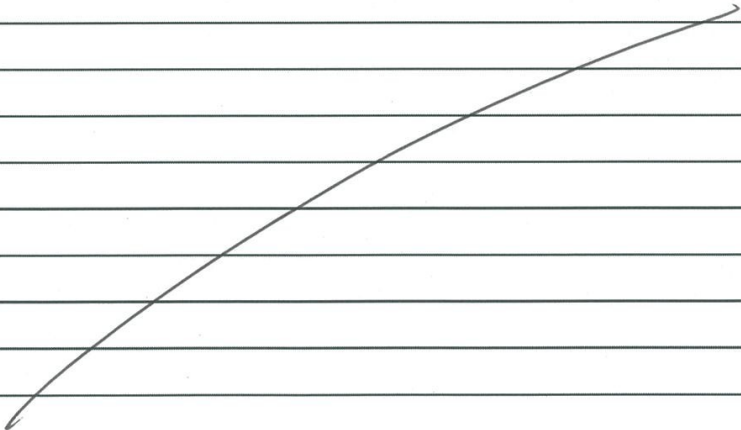


**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

A: SHIP 8034U\_

B: SHIP 57557.

BLK 7.  
SGH.

A single, smooth, hand-drawn curve on lined paper. The curve starts at a low point on the left, rises steadily, and then levels off slightly as it moves towards the right. It is drawn with a dark, possibly black, ink or marker.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_



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

25 FEB 2019

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



Describe Circumstance of the Accident.

ON 22/02/2019 @ 1930HRS, I WAS DRIVING MY TAXI ( SHB 8034<sup>u</sup> ), TRAVELLING ALONG COLLEGE ROAD @ SGH BLK 7, WITH 4 PASSENGERS ONBOARD – ON A SINGLE LANE OF DUAL CARRIAGE WAY.

WHILE I WAS MOVING STRAIGHT AHEAD, SUDDENLY I FELT AN IMPACT FROM MY RIGHT.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B ( SJB 5755 T – TOYOTA ) WHICH WAS EXITING FROM ANOTHER CARPARK (ON MY RIGHT) – FAILED TO KEEP FOR PROPER LOOK OUT & HAD ENCROACHED ONTO MY PATH ON MY RIGHT ABRUPTLY.

AS SUCH, THE LEFT FRONT OF VEHICLE B COLLIDED ONTO THE RIGHT PORTION OF MY TAXI – WHILE HE WAS MAKING HIS ILLEGAL RIGHT TURN INTO COLLEGE ROAD.

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

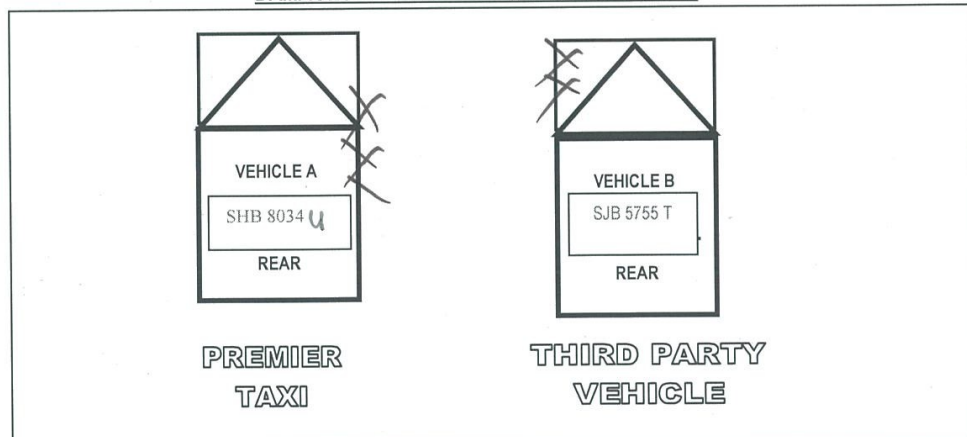
AS A RESULT, I FELT SOME DISCOMFORT & WILL SEEK FOR MEDICAL TREATMENT SOON. NO AMBULANCE AT SCENE.


ONE OF MY PASSENGERS – MS OGY (ROSZITA) <sup>WHO</sup> ~~WHICH~~ WAS SEATED NEXT TO ME, WILLING TO BE MY EYE WITNESS.

NO PASSENGERS ONBOARD VEHICLE B.

\*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B



 1204496/H

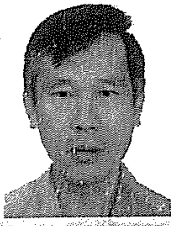

Driver's Signature & NRIC Number


@ 9:02:09 AM

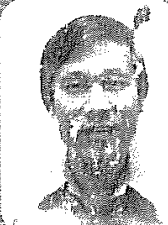
( attended by  )

# Sketch Plan Pg. 4

PREMIER HIRE	HIRE / RELIEF / SUPER RELIEF
VEHICLE NO.	SHB8034U
CONTACT NO.	9026 8245
NEW MAILING ADDRESS (if any)	/



	Licence Number: <b>S1204496H</b>
	Name: <b>LEE POH NGUAN</b>
	Birth Date: 22 Oct 1955
	Issue Date: 14 May 2003
	

REPUBLIC OF SINGAPORE	
IDENTITY CARD NO. S1204496H	
Name: <b>LEE POH NGUAN</b>	
	Race: <b>李保源</b>
	<b>CHINESE</b>
	Date of Birth: <b>22-10-1955</b> Sex: <b>M</b>
	Country of Birth: <b>SINGAPORE</b>

Land Transport Authority	
	<b>VOCATIONAL LICENCE</b>
	Licence No: <b>S1204496H</b>
	Name: <b>LEE POH NGUAN</b>
	Issue Date: <b>28/4/2011</b>
Please visit <a href="http://www.lta.gov.sg">www.lta.gov.sg</a> to check the status of this vocational licence	

## YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(E)

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	31 Mar 1976
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	13 Oct 1983

	
NAIC No <b>S1204496H</b>	
	Blood Group: <b>O+</b> Date of issue: <b>31-03-1992</b>
	Address: <b>APT BLK 239 SERANGOON AVENUE 2 #10-31 SINGAPORE 1955</b>

NP 428A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	21/11/1986



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo

