

## 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	14/03/2019 14:40
Date Of Accident	13/03/2019 17:30
Exact Location Of Accident	BALESTIER ROAD TOWARDS THOMSON ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP3962B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASSET LIMO
Co Reg No	53309913K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94792488
Alternative Phone No	OFFICE-94792488

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	999994238
Cover Note Number	

### Driver

Name of Driver	YING HONG KIEW JANICE
NRIC No	S0073657J
Date Of Birth	07/12/1952
Occupation	INDOOR
Date Of Driving Pass	20/06/1974
Driving Experience	44 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94792488
Fax Number	
Contact Number	OTHERS-94792488
Email Address	NOEMAIL

Address	BLK 460 CLEMENTI AVENUE 3 #19-602
Postcode	120460
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 - HEAD TO REAR
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?	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.	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

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	GBC3751G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

### 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.



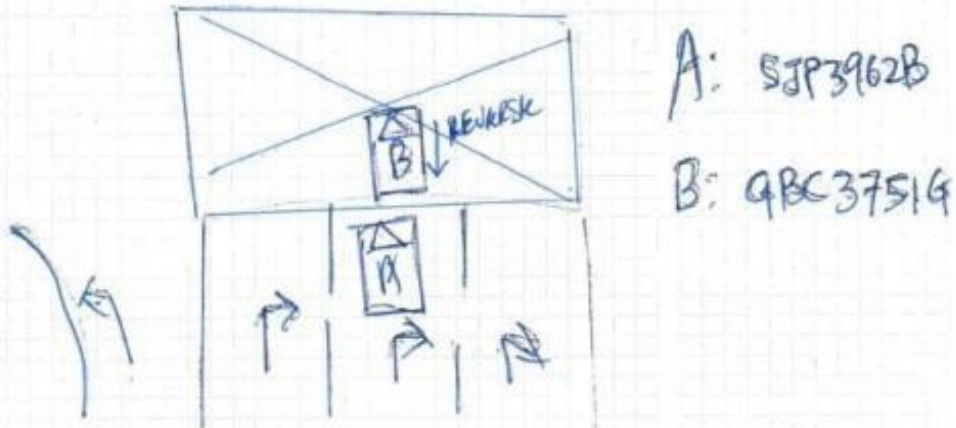
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As the above stated date & time, I was stationary at the junction traffic light. B was already in the yellow box and was unable to make the turn in time. Hence vehicle B reverse in and bump into my front.

## 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.:

14/02/2019  
Rohit Kumar

# AGREEMENT

## ASSET LIMO Car Rental Agreement

Date: 13/3/19

Vehicle Check Out: 13/3/19 @ 4: PM

Vehicle Back:      /      /      @     :      AM / PM

Car Renter: Janice Ying Hong Kiew

Home Address: Block 429, Clementi Ave 3, #12-420, S(120429)

Driver's IC Number: S0073657J Tel: 94792488 DOB: 07<sup>th</sup> Dec 1952

Email Address: janiceying@gmail.com Bank Account:     

Next Of Kin: Felicia Hoo / Gerald Hoo Tel: 92327650 (Gerald)

Deposit: \$ 500

Car Rental Rate: \$ 50 / daily. Car Make: Toyota Model: Vios

Car Reg Number: SSP 3962B

Only the person that is listed on this Car Rental Agreement may drive this vehicle. The Car Renter is responsible for all loss and damage to the vehicle and the LTA Decal regardless if someone else is at fault. The Car Renter is fully responsible for the cost of any repair for this car AND the Third Party car in an accident and also for all fines, towing, any court costs, penalties, and summons that he may incur. Asset Limo has the right to repossess the car if there are any arrears and it will not be responsible for any loss. The Car Renter also agrees to rent the car for at least 1 month and to give at least 1 week notice after that one month to return the car, failing which the deposit will be forfeited. **The renter will have to pay \$2,500.00 immediately for the third-party insurance excess costs and the costs of repairing the above car and the rental loss incurred when there is an accident.** Any arrears not paid up within a week are subject to a 2% monthly late payment charge.

Initial: [Signature] Car Renter

[Signature] Asset Limo

OBC Current A/c: 621801232001  
Every Wednesday.



ID

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0073657J

Name  
YING HONG KIEW JANICE

袁凤娇

CHINESE

Date of Birth: 07-12-1952

Sex: F

Country of Birth: SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

S0073657J

YING HONG KIEW JANICE

Date of Birth: 07 Dec 1952

Valid Until: 21 Nov 2017



002745792A

2708248

NRIC No. S0073657J

22-09-1955

APT BLK 480 CLEMENTI AVENUE 3 #19-602  
SINGAPORE 120490

NRIC No. S0073657J Date: 19-06-2003 (M) No: 4678609

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

EFFECTIVE DATE  
20 Jun 1974

Class 2 Motor cars with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq 2500\text{kg}$

NP 428A

Licence No S0073657J

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo

