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	23/03/2019 09:10	
Date Of Accident	22/03/2019 16:20	
Exact Location Of Accident	SLE TOWARDS TPE	
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	A STATE OF BUILDING
Vehicle Registration Number	SHC4558X	
Insured/Policyholder		
Name Of Registered Owner	SMRT TAXIS PTE LTD	
Co Reg No	198905369K	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-80000000	
Vehicle Particulars		
Manufacturer	TOYOTA	
Model	PRIUS TAXI-1.8 (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	MS FIRST CAPITAL INSURANCE LTD	
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT	
Fleet Policy	YES	
Policy Number	D-18090213MFSH	
Cover Note Number		
Driver		
Name of Driver	LOW KHEE HONG	
NRIC No	S1244119C	
Date Of Birth	15/07/1957	
Occupation	OUTDOOR	
Date Of Driving Pass	26/02/1977	
Driving Experience	42 YEARS AND 0 MONTHS	
Gender	MALE	
Mobile Number	(LOCAL) +65-80000000	
Fax Number		
Contact Number		
EMail Address	NOEMAIL	

Address

Postcode

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

-

11

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

2

involved in the accident

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)

5

Passenger 1

NAME: :

: UKNOWN

GENDER: :

: MALE

Passenger 2

NAME:

: UKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UKNOWN

GENDER:

: FEMALE

Passenger 4

NAME:

: UKNOWN

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes,Please state which Police Station Police Station Name

WHAMPOA NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 29 JALAN BAHAGIA , POSTCODE: 320029 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-2507999 - FAX NO: 63554314

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20190323/2075

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

FILE TOO BIG

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBG9650D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

COMMERCIAL VEHICLE

UNKNOWN

Sketch Plan Pg. 1

SKETCH PLAN	SLE -	towards TPE
		B - GBG 9650D A - SHC 4558X B - GBG 9650D
DESCRIBE CIRCUMSTANCES OF TH	E ACCIDENT	
DECLARATION We declare the foregoing particulars	are true in every respect.	33/3/2019
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:

Date & Time:

NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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.

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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.:

25-MAR-2019 11:00 From:

7.3



To:63687421

Page:1/3



1 of 3

Report No. T/20190323/2075

Police Station Of Origin: Whampoa NPP 29 Jalan Bahagia #01-368	SINGAPORE
320029 Tel No: 1800-2507999	

REPORT OF	A TRAFFIC	ACCIDENT .	Tigle Penart No.	Station Diary No.:	
Date/Time Report Made:		ade:	Vide Report No.:	10	
23/03/201	9 12:57	18=			
Name of	Informant:	lars		/E #05-368 SINGAPORE 320075	
ID Type / ID No.: NRIC NO / S1244119C Nationality: SINGAPORE CITIZEN		9C	Contact No.: Home/Office:	Mobile: 96356961	
			Email:		
Sex:	Age:	Date of Birth: 15/07/1957	Type of Informant: Driver	Institution / School Name:	
Male 61 15/07/1357 Race: Chinese Occupation: Taxl driver			Language: English	Institution / School Harris.	
			Driving Licence Information: Class: 2B,3	Date of Expiry:	

General Infent Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 22/03/2019 16:20	Type of Location: Straight Road
Along SLE to	I KPRESSWAY owards TPE, after Ler	ntor Road Surface:		Road Speed Limit:
Weather: Clear Traffic Flow: Dual Carriag Type of Coll	ge Way	Traffic Control: Not Controlled		Traffic Volume: Light Anyone conveyed by ambulance:
Lorry goods	flewand hit my taxi		1	No

etalistof V ehicle:No	Type Type	Make	Model	SOUPERIN	.1.01	0 .
BG9650D	Lorry		PRIUS TAXI	Maroon	Seriously	4
HC4558X	.Car "	TOYOTA.	(SMRT)		Damaged	
	Person Involve			TSAFFTSKE		

Helisch and Control of the Control o	The state of the s
strian Involved; No	Use of Pedestrian Crossing: NA
destrians Injured: NIL	





Police Station Of Origin: Whampoa NPP 29 Jalan Bahagia #01-368 SINGAPORE 320029

2 of 3 Report No. T/20190323/2078

Tel No: 1800-2507999

CONTINUATION OF REPORT

Name	Liu Song		ID No.	G2420834L
Related Vehicle	GBG9650D (Lorry)		Contact No.	NIE. A state
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc		
No. of Days gran	ted Medical Leave NIL	Degree of	Injury NIL	
Principal Control	Bushes and Fig.	47/50 - 16.55	and are an arrange of the latest of the late	name of the state
Name	LOW KHEE HONG		ID No.	S1244119C
Related Vehicle	SHC4558X (Car)	•	Contact No.	96356961
Hospital/Clinic	NIL ·	,	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Disch		*
vo. of Days grant	ed Medical Leave NIL	Degree of	Injury NIL	

Brief Details.

On 22/3/2019 at about 1620hrs, I was driving my taxi SHC4558X along SLE towards TPE with 4 passengers on lane 2. However, I noticed that there was a lorry carring a lot of plywood at the rear of its windscreen.

Afterwhich, the lorry continued and did not stop. That is when I chase the lorry and applied honk that is when he stopped and I told him regarding the incident. Thereafter we exchanged for particulars and I told him that I will report the matter over to my company for instruction.

My taxi company SMRT then advised me to lodge a report regarding to this matter.

My taxi sustained cracks on front windscreen, number plate had dropped, side mirror also sustained some scratches, and the front bonnet dented in.



T/20190323/2075

Police Station Of Origin: Whampoa NPP 29 Jalan Bahagia #01-368 SINGAPORE 320029 Tel No: 1800-2507999

3 of 3 Report No. T/20190323/2075

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 <u>report number</u> as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 1 JANSON CHEW	
Signature Of Interpreter: Not applicable	Date/Time: 23/03/2019 12:57
Officer In Charge Of Case; TP / GIA /	Classification Of Case:
Staff Sgt WONG SIEU LUI Contact No.: 65476151 SINGAPORE POLICE FORCE	167
Authentication Stamp NP168	MATURE
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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

/ehicle Owner Particulars			
Owner ID Type:	Company		
Owner ID: Vehicle Details	5369K		
Vehicle No.:	SHC4558X		
Vehicle to be Exported:	No		
Intended Deregistration Date:	26 Mar 2019		
Vehicle Make:	TOYOTA		
Vehicle Model:	PRIUS TAXI (SMRT)		
Primary Colour:	Maroon		
Manufacturing Year:	2013		
Engine No.:	3ZR1326465 JTDKN36U405722631		
Chassis No.:			
Maximum Power Output:	100.0 kW (134 bhp)		
Open Market Value:	\$33,120.00		
Original Registration Date:	05 Mar 2014		
First Registration Date:	05 Mar 2014		
Transfer Count:	0		
Actual ARF Paid: Intended PARF Rebate Details	\$8,368.00		
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	04 Mar 2022		
PARF Rebate Amount: Intended COE Rebate Details	\$5,857.00		
COE Expiry Date:	04 Mar 2022		
COE Category:	A - Car up to 1600cc & 97kW (130bhp)		
COE Period(Years):	8		
PQP Paid:	\$58,745.00		
COE Rebate Amount:	\$21,540.00		
Total Rebate Amount: Message	\$27,397.00 le cannot be further renewed. The vehicle must be de-registered upon		

The information contained herein is correct as at 26 Mar 2019

OK