

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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

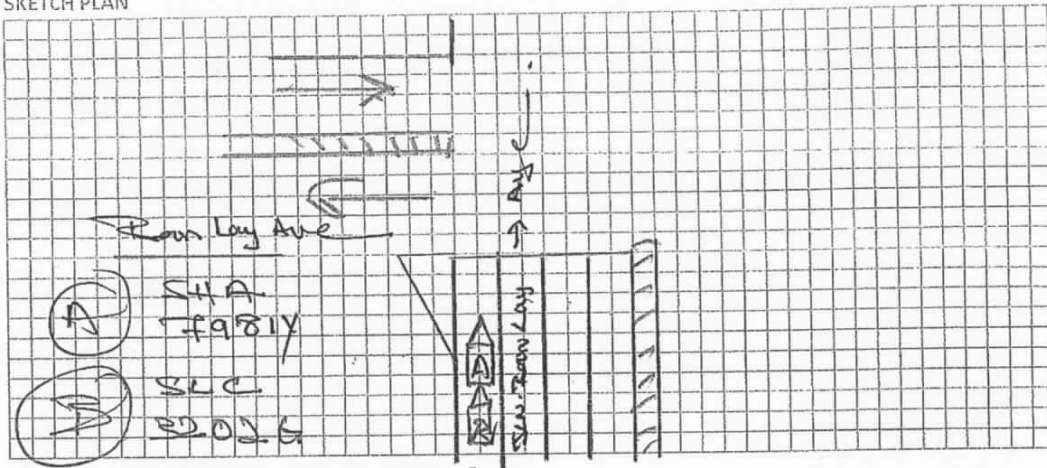
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

GIARMC SketchPlanForm_V3



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police

Report: T/20190328/2048

DECLARATION

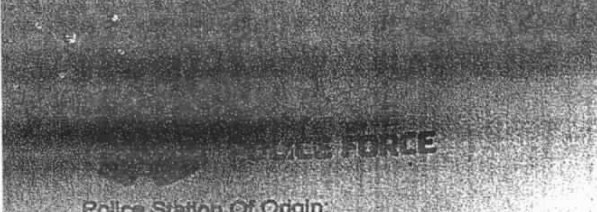
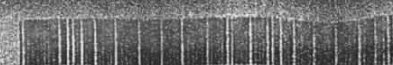
I/We declare the foregoing particulars are true in every respect.

COMFORT TRANSPORTATION PTE LTD
EG REG NO. 192003321R

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.:

		 T/20190328/2048
Police Station Of Origin: Bishan N.P.C. 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999		Report No. T/20190328/2048

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/03/2019 10:56	Video Report No.:	Station Diary No.: 43
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Informant's Particulars

Name of Informant: TAN YAU BOON			Address: APT BLK 126 PENDING ROAD #09-298 SINGAPORE 670126		
ID Type / ID No.: NRIC NO / S01106271			Contact No.: Home/Office: Mobile: 96464516		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 67	Date of Birth: 22/06/1951	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

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/03/2019 20:25	Type of Location: X-Junction
Location: Along Road 1 JALAN BOON LAY				
Jalan Boon Lay towards Boon Lay Way, At the X-Junction of Jalan Boon Lay and Boon Lay Ave				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
SHA7981Y	Car				Slightly Damaged	1
SLC3202G	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190328/2048

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Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

Report No. T/20190328/2048

CONTINUATION OF REPORT

Driver			
Name	TAN YAU BOON	ID No.	S01106271
Related Vehicle	SHA7981Y (Car)	Contact No.	96464516
Hospital/Clinic	DOCTORS KOO & CHOO MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	28/03/2019	Date Discharge	28/03/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	VIJAY	ID No.	NIL
Related Vehicle	SHA7981Y (Car)	Contact No.	91834758
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 27/03/2019 at about 2024hrs, I was traveling along Jalan Boon Lay towards Boon Lay Way. At the X-Junction of Jalan Boon Lay and Boon Lay Avenue, I stopped at the X-Junction as the traffic light was red. While the traffic light turned green and I was about to move, suddenly I felt an impact from behind. After I stepped out of vehicle and realized one vehicle (SLC3202G) hit onto my vehicle from behind. However, the driver asked me to make a police report and did not exchange particulars with me and rushed off. I did not have enough time to take photos, but only note down the vehicle plate number. On 28/03/2019, I felt my rear neck and back area were in pain, as such I went to sought medical treatment and was given 3 days MC.



**SINGAPORE
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T/20190328/2048

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Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20190328/2048

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 /
Sgt 2 ZHU JIANBIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
28/03/2019 10:56

Officer In Charge Of Case:
TP / AEIT /
Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED
MOHD SAID
Contact No.: 65476172



SINGAPORE
POLICE FORCE

Authentication Stamp
NP168

Classification Of Case:

SN 061

SIG