MTCS19103536 / Trans-Cab Services Pte Ltd - HQ ENTRY DATE & TIME: 07/08/2019 11:02 SUBMITTED BY: Kek ZheWei

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed</u> 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 aforesaid.

aforesaid.	
CONTRACTOR OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	07/08/2019 11:02
Date Of Accident	06/08/2019 20:45
Exact Location Of Accident	BRADDELL RD TOWARDS UPPER SERANGOON RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD9554T
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS-1.8 HYBRID CVT (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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P2203857
Cover Note Number	
Driver	
Name of Driver	TAN SIEW ANG
NRIC No	S7421700A
Date Of Birth	09/07/1974
Occupation	OUTDOOR
Date Of Driving Pass	05/04/1995
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96844422
Fax Number	
Contact Number	
EMail Address	NOEMAIL

BLK 447B JALAN KAYU Address

#03-350

792447 Postcode

Was driver an employee of the Insured's Company NO

OTHER - HIRER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

2

NO

NO

NO

3

: MDM LAI

GENDER:

: FEMALE

Passenger 2

NAME:

: UNKNOWN

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

Police Station Address

Police Station Contact

YES

PUNGGOL N.P.C

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

SINGAPORE

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20190806/2178

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons:

YES YES

FILE SIZE TOO LARGE

Was there any audio recorded?

NO

Details of Witness 1

MDM LAI Name 92347526 Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Page 2 of 15

Vehicle Registration Number
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)

SLL1333C

PRIVATE CAR

Sketch Plan Pg. 1

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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: Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature Name: NRIC/FIN No.: Sketch Plan #2 Pg. 1

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:	Driver's Signature	Policyholder's Signature Date & Time:
Jan	rs are true in every respect.	DECLARATION I/We declare the foregoing particulars are true in every respect.
	du to Police Report 1/20190806/2178.	Refu
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1 of 3

Report No. T/20190806/2178

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

REPORT OF A	TRAFFIC	ACCIDENT
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	e/Time Report Made: 8/2019 23:57		Vide Report No.:	Station Diary No.: 121
Informant	s Particu	lars		
Name of In			Address: APT BLK 447B JALAN KAYU	#03-350 SINGAPORE 792447
ID Type / I NRIC NO /		0A	Contact No.: Home/Office:	Mobile: 96844422
Nationality SINGAPO		ΞN	Email:	
Sex: Male	Age: 45	Date of Birth: 09/07/1974	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3,4	Date of Expiry:

General Infor	mation of the Accide	nt				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	ve: Accident:		Type of Location: Straight Road	
Location:						
BRADDELL F	ROAD					
Heading towa	ards Upper Serangoon	Road. Near comfort	Delgro building.			
Weather:		Road Surface:		Road	d Speed Limit:	
Clear		Dry				
Traffic Flow: Traff		Traffic Control:		Traff	fic Volume:	
Two Way Not Controlled			Mod	erate		
Type of Collis	sion:				one conveyed by ulance:	

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHD9554T	Car				Slightly Damaged	2
SLL1333C	Car					0

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





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Report No. T/20190806/2178

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

CONTINUATION OF REPORT

Driver						
Name	TAN SIEW ANG			ID No		S7421700A
Related Vehicle	SHD9554T (Car)	ŦĦ		Conta	ct No.	96844422
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: 2B,3,4 Date of Expiry: NIL	
Date Treatment	NIL Date Di		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Injury	NIL	

Brief Details.

On the 06/08/2019 at about 2046hrs, I was driving my vehicle (SHD9554T) along braddell road on the right lane heading towards Upper Serangoon. As I was driving there was a white Mercedes (SLL1333C) on the left lane of the said road.

As I continued driving, suddenly vehicle (SHD9554T) signalled right last minute and the said vehicle slowly filtered to my lane and knock onto the left side of my passenger door leaving a few scratches and my left side mirror was also damaged.

The said vehicle (SHD9554T) did not stop after hitting onto the side of my vehicle and it accelerated and drove off on the right lane. I braked my vehicle after which, as I had two passengers on board and one of them is also my witness as well. Her name is Mdm Lai, HP 92347526. The said vehicle committed a hit and run hence I am lodging this report to pursue the matter.





3 of 3

Report No. T/20190806/2178

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

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:	Signature Of Informant:
Sgt 1 DARREL CHOO YU WEI	Pal
Signature Of Interpreter: Not applicable	Date/Time: 06/08/2019 23:57
Officer In Charge Of Case: TP / HRT /	Classification Of Case:
Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	
Authentication Stamp	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	878K
Vehicle No.:	SHD9554T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	07 Aug 2019
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS 5DR HATCHBACK (AUTO)
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	2ZR2C38626
Chassis No.:	JTDKB3FU703082323
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$26,605.00
Original Registration Date:	18 Jul 2019
First Registration Date:	18 Jul 2019
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$14,247.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jul 2027
PARF Rebate Amount: Intended COE Rebate Details	\$10,685.00
COE Expiry Date:	17 Jul 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$24,410.00
COE Rebate Amount:	\$19,528.00
Total Rebate Amount: Message	\$30,213.00

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 07 Aug 2019

OK