MBHH19119792 / Ajax Mars Pte Ltd - Bukit Merah ENTRY DATE & TIME: 10/09/2019 01:32 SUBMITTED BY: Elizabeth Lee

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 <u>truthful and accurate</u> 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

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	ACCIDENT STATEMENT	
Date Of Report	10/09/2019 01:32	
Date Of Accident	07/09/2019 16:30	
Exact Location Of Accident	ROUND ABOUT AT STADIUM BOULEVARD	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLF8348X	
Insured/Policyholder		
Name Of Registered Owner	GRAB RENTALS PTE LTD	
Co Reg No	201617200G	
Email Address	NOEMAIL	
Mobile Phone No		
Alternative Phone No	OFFICE-66550005	
Vehicle Particulars		
Manufacturer	ТОУОТА	
Model	PRIUS HYBRID 1.8 CVT	
Exact Purpose for which vehicle was being used at time of accident	HIRE & 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	PRIVATE HIRE	
Insurance Company		
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	YES	
Policy Number	A29114756MKF	
Cover Note Number		
Driver		
Name of Driver	WILEDED WEE ENGLYE	

Name of Driver WILFRED WEE ENG LYE

 NRIC No
 \$7306686G

 Date Of Birth
 27/02/1973

 Occupation
 OUTDOOR

 Date Of Driving Pass
 21/10/2002

Driving Experience 16 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98470514

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

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - ROUNDABOUT

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

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) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON THE DATE AND TIME MENTIONED, I WAS DRIVING ALONG THE SAID MENTIONED ROAD AND WENT INTO THE ROUNDABOUT. I WAS DRIVING ON THE EXTREME LEFT LANE, I COULD SEE VEHICLE B WAS SEEN MOVING ON THE EXTREME RIGHT LANE. AS I APPROACHED NEAR THE EXIT OF STADIUM WALK, WITH THE INTENTION TO GO STRAIGHT, SUDDENLY VEHICLE B, COMING FROM THE EXTREME RIGHT LANE, FROM MY RIGHT REAR, MADE AN ABRUPT LANE CHANGE TO ITS LEFT, WHERE MY VEHICLE WAS AND HIT THE RIGHT REAR SIDE OF MY VEHICLE. NO ONE WAS INJURED. STATEMENT WAS READ TO ME AND I ACKNOWLEDGED IT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Remarks/ Reasons: PENDING
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SDS636T

Vehicle Make/Model/Colour MERCEDES BENZ / C180 AVANTGARDE (R17 LED) / BLACK

Details Of Properties NA

Vehicle Category PRIVATE CAR

Name of Driver TAN POH CHIN

NRIC/Passport Number S1192387I

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN SLF8348X

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- 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.

REPORTING OFFICER
HASHIM BIN KAMARI

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Name:

Policyholder's Signature
Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

VERIFY BY AJAX MARS (ARC)

SKETCH PLAN	STADUM BOULEVARD (ROUND ARD)
A: SLF 83481. B: SDS 6367.	Beyleveny Power of Power
DESCRIBE CIRCUMSTANCES	S OF THE ACCIDENT
REFER TO ATTACHED STAT	EMENT.
DECLARATION I/We declare the foregoing part	VERIFY BY AJAX MARS (ARC) REPORTING OFFICER HASHIM BIN KAMARI
	Driver's Signature Reporting Centre Personnel's Signature
Policyholder's Signature Date & Time:	(If driver is not the policyholder) Date & Time: NRIC/FIN No.:

Common Statement Pg. 1

ACCIDENT STATEMENT (2000 characters)

CCIDENT STATEMENT (2000 Characters)	
THE EXTREME LEFT LANE, I COULD THE EXTREME RIGHT LANE. AS I AF WALK, WITH THE INTENTION TO GO COMING FROM THE EXTREME RIGH ABRUPT LANE CHANGE TO ITS LEFT	THE ROUNDABOUT. I WAS DRIVING ON SEE VEHICLE B WAS SEEN MOVING ON PROACHED NEAR THE EXIT OF STADIUM STRAIGHT, SUDDENLY VEHICLE B, IT LANE, FROM MY RIGHT REAR, MADE AN IT, WHERE MY VEHICLE WAS AND HIT THE NO ONE WAS INJURED. STATEMENT WAS
Taxi Voucher No.:	
DECLARATION I/We declare that the above particulars & information provi	ided above are true in every aspect
VERIFIED BY AJAX MARS REPORTING OFFICER - HASHIM BIN KAMARI	Milsned
MARS Officer	Registered Owner or Driver's Signature
Job Complete Date/Time	Date/Time:
9 September 2019 at 12:18 PM	9 September 2019 at 12:19 PM





24-Hour Reporting Hotline

What to do in the event of a Motor Accident

- 1. Call the 24-Hour Accident Hotline.
 - Exchange particulars with the involved parties and take photos of the accident vehicles/scene of the accident.
 - Retrieve the SD card from the vehicle camera.
 - Bring the vehicle to your assigned workshop within 24 hours.































