## 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

aforesaid.				
	ACCIDENT STATEMENT	30 中国 1000		
Date Of Report	29/01/2020 12:28			
Date Of Accident	25/01/2020 11:50			
Exact Location Of Accident	QUEENSWAY			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SHC4474D			
Insured/Policyholder				
Name Of Registered Owner	SMRT TAXIS PTE LTD			
Co Reg No	1XXXXX369K			
Email Address	NOEMAIL			
Mobile Phone No				
Alternative Phone No	OFFICE-80000000			
Vehicle Particulars	P. SE	. 1984 A.		4
Manufacturer	TOYOTA	Contract New York	9.0	
Model	PRIUS TAXI-1.8 (A)			
Exact Purpose for which vehicle was being used a time of accident	at 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 INSU	JRANCE LTD		
Type Of Coverage	THIRD PARTY FIRE AND	OR THEFT		
Fleet Policy	YES			
Policy Number	D-19093197MFSH			

Cover Note Number

Driver

EUGENE CHAN CHEAH HUAT Name of Driver

SXXXX853D NRIC No 05/03/1976 Date Of Birth OUTDOOR Occupation 22/04/2002 Date Of Driving Pass

17 YEARS AND 9 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-80000000 Mobile Number

Fax Number

Contact Number

NOEMAIL **EMail Address** 

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

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11

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

Other Information

CLEAR

Road Surface

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

NO

ambulance?

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)

NO

**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

ON 25/01/20 AT APPROXIMATELY 1150HRS, I DROVE OUT OF RIDOUT GARDENS ONTO QUEENSWAY. AS I EXITED, I HEARD A CAR HORNING AT ME. I STOPPED AS I THOUGHT I HAD OBSTRUCTED A VEHICLE. HOWEVER AROUND 5 SECONDS LATER, CAR B (SKV1669T) HIT MY REAR. I HAD CHECKED FOR VEHICLE CLEARANCE WHEN I EXITED ONTO THE MAIN ROAD. VEHICLE B WAS MORE THAN 5 SECS AWAY FROM MY VEHICLE.

#### 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

SKV1669T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

JEFFREY MOK CHI HOE

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 10

No. Of Passenger (Including Driver)

KETCH PLAN		
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ESCRIBE CIRCUMSTANCES	S OF THE ACCIDENT	
On 25/1/2020 at	approximately 1100hrs, I down	e out of Ridont Gording
- D - 44 - 14 -	to lead the lead	a car havning art me.
the Queensway.	As I exited, the I heard hought I had obstructed a le	alida Human
1 stopped as 1 t	hought I had obstructed a Ve	LI O I I
Seconds ater	, car B (SKV 16697) hit u	my very. I had checked
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DECLARATION	wite class and true in quary respect	h
	rticulars are true in every respect.	A .
TAXIS OF	1 July .	N
(8)	1	Reporting Centre Personnel's Signature
Policyholder's Signature	Driver's Signature (If driver is not the policyholder)	Name: 281/20
Date & Fime.	Date & Time	NRIC/FIN No
	2011/2020 0918hri.	

# Sketch Plan Pg. 2

## SKETCH PLAN

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- 1. Please report correctly the details of the accident to speed up the claims process.
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- The report will be forwarded by the insurers of the GIA Records Management Centro 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)

Lunderstand, 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:
  - 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! fawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and all
- (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/taw (irms), which may be sited outside of Singapore, for one or more of the above Purposes
- (d) ony 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.
- (c) the internation synaffected poder (a) show may be shared / disclosed.
  - (d) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, taw 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:

28/1/20 09/5 fairs

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:		
Owner ID:	Company	
Vehicle Details	369K	
Vehicle No.:	SHC4474D	
Vehicle to be Exported:	No	
Intended Deregistration Date:	29 Jan 2020	
Vehicle Make:	TOYOTA	
Vehicle Model:	PRIUS TAXI (SMRT)	
Primary Colour:	Maroon	
Manufacturing Year:	2014	
Engine No.:	2ZR6082382	
Chassis No.:	JTDKN36U405746928	
Maximum Power Output:	100.0 kW (134 bhp)	
Open Market Value:	\$32,920.00	
Original Registration Date:	09 Jul 2014	
irst Registration Date:	09 Jul 2014	
ransfer Count:	0	
ctual ARF Paid:	\$8,088.00	
ntended PARF Rebate Details	\$0,000.00	
ARF Eligibility:	Yes	
ARF Eligibility Expiry Date:	08 Jul 2022	
ARF Rebate Amount:	\$5,661.00	
itended COE Rebate Details		
OE Expiry Date:	08 Jul 2022	
OE Category:	A - Car up to 1600cc & 97kW (130bhp)	
OE Period(Years):	8	
QP Paid:	\$53,269.00	
DE Rebate Amount:	\$16,253.00	
tal Rebate Amount: essage	\$21,914.00  nnot be further renewed. The vehicle must be de-registered upo	

The information contained herein is correct as at 29 Jan 2020

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