

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.**
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.



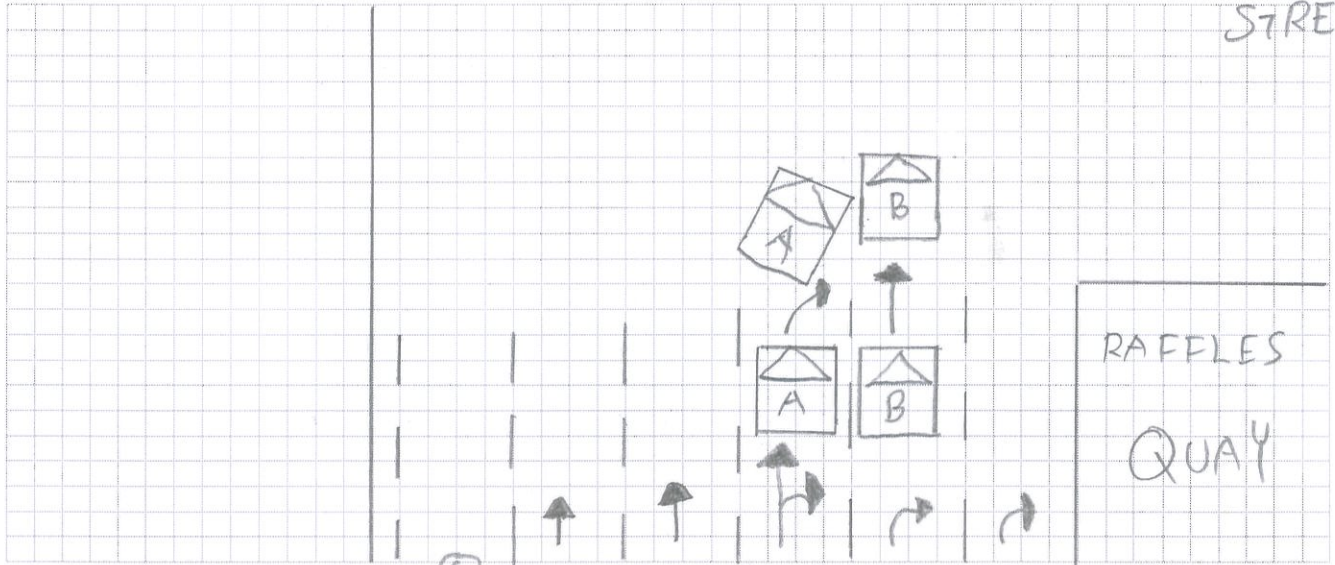
Policyholder's Signature
Date & Time:

7213457E
SHB 88065

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

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

→
CROSS STREET



⑤ ④ ③ ② ①

[illegible]

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



Policyholder's Signature
Date & Time:

721345712 Q4

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

[Signature]

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

Describe Circumstance of the Accident.

ON 11/02/2020 @ 1940 HRS, I WAS DRIVING MY TAXI (SHB 8806 J – KIA OPTIMA/SILVERCAB) – TRAVELLING ALONG RAFFLES QUAY – TRAFFIC LIGHT JUNCTION OF CROSS STREET, IN LANE 3 (ARROW SIGNAGE SHOWS GO STRAIGHT/TURN RIGHT) WITH 1 INDONESIAN MALE AND FEMALE PASSENGER ONBOARD. IT WAS RAINING AT THE SAID TIME.

TRAFFIC LIGHT WAS GREEN AND I PROCEEDED TO TURN RIGHT WITH THE RIGHT INDICATOR ON, TOWARDS CROSS STREET. WHILE TURNING RIGHT, I SUDDENLY FELT AN IMPACT, FROM THE RIGHT. I THEN REALIZED THAT VEHICLE B (SHC 8947 E – HYUNDAI I40 – COMFORT TAXI) WHICH WAS TRAVELLING IN LANE 2 (ARROW SIGNAGE SHOWS TURN RIGHT ONLY), HAD TRAVELLED STRAIGHT, INSTEAD OF TURNING RIGHT.

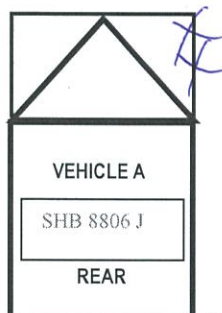
DUE TO THE IMPACT, MY TAXI SUSTAINED DAMAGES ON THE FRONT RIGHT PORTION. AS IT WAS DARK AND RAINING AT THE TIME, I WAS UNAWARE OF ANY DAMAGES TO VEHICLE B.

AFTER THE ACCIDENT, I FELT NECK AND BACK PAIN AND WILL BE SEEKING MEDICAL TREATMENT.

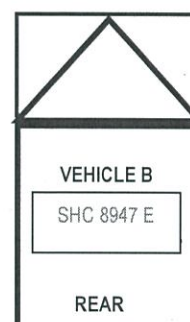
I WAS UNAWARE OF ANY PASSENGERS IN VEHICLE B.
NO AMBULANCE AT SCENE.

VIDEO FOOTAGE CAPTURED

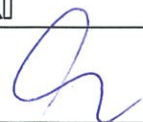
DAMAGES FOUND ON VEHICLE A & VEHICLE B



PREMIER
TAXI



THIRD PARTY
VEHICLE

 7213457E X

Driver's Signature & NRIC Number

Wednesday, February 12, 2020 @ 12:24:03 PM

(attended by

)

Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	28 Jan 2014 / 09:24:47	Receipt No.:	AACCK001-AX239-140128-000009
Asset Type:	Vehicle	Transaction Amount:	\$73,160.00
Asset ID:	SHB8806J	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20140128092447221759		

Vehicle No.:	SHB8806J
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	28 Jan 2014
Original Registration Date:	28 Jan 2014
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414ME5453466
Engine No.:	D4FDDH308846
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2013
Open Market Value:	\$19,632.00
Minimum PARF Benefit:	\$7,279.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	28 Jan 2014 09:24:47
COE No.:	2014012801000947C
COE Expiry Date:	27 Jan 2022
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$60,888.00
Lifespan Expiry Date:	27 Jan 2022
Owner ID Type:	Company