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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	15/02/2020 14:00
Date Of Accident	15/02/2020 12:45
Exact Location Of Accident	ALONG AG MO KIO AVE 6 JUNCTION OF AVE 5
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC7547H
Insured/Policyholder	
Name Of Registered Owner	CITYCAB PTE LTD
Co Reg No	199502839G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I40-1.7 D CRDI (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088937MFSH
Cover Note Number	

Driver

Name of Driver

KOI SENG SOON

NRIC No

S1216364I

Date Of Birth

28/10/1955

Occupation

OUTDOOR

Date Of Driving Pass

Driving Experience

KOI SENG SOON

S1216364I

28/10/1955

OUTDOOR

40 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97593961

Fax Number
Contact Number

EMail Address NOEMAIL

Address APT BLK 478 JURONG WEST ST 41 #08-284

SINGAPORE

Postcode 640478

Was driver an employee of the Insured's Company NO

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

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

-

2

NO

NO

1

NO

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: FILE NOT SUITABLE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMN7758Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver JEFFREY PNG WEI SIANG

NRIC/Passport Number S8909875J

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident 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 complexed 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 llability.
- 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 (CIA) 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 his 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 :laims (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 Informat on will also be collected and used to compile claims history for the purpose of fraud detection, investigation and mar agement in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and for 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: VAON NRIC/FIN No.:

Accident Sketch Plan Pg. 2

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 > 2000 (212:45 Hruns 1 Was DRIVING MY TAY) (SHC 75(7H) MAY ANG MY KIO ANG G. AT TIME NO PASSINGER ON BOARD. APTEN WHILE I WAS	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 > 2000 (2):45 thurs I WAS DELVING BY TAXI (SHC 7547H) MAG MIG MI KIO AKE G. AT TIME NO DASSENGER ON BOARD. APTER WHILE I WAS STOP AT JUCTION WOIT PER TRAFFIC. WHILE LANTING MY WELL (E MOING PURWARD BY TWICH FRONT VEHICLE (SMN 77882) TOTALLY NO DAMAGE ON BYTH YELLOWSTANDERS TO TALLY NO DAMAGE ON	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 > 2000 (2):45 Hzuns Was DRIVING M TAXI (STOC 7547 H) ANDER AND M KIO ALE G. AT TIME NO PASSINGER ON ROBERD. APTEN WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC. WHILE WAITING MY VEHICLE MOVING FURWARD AND TRUCH FRONT VEHICLE (SMN 77582). TOTOLLY NO DATAGE ON BUTH VEHICLES AS MY TAXI ONLY TRUCH PRIMATE TO BUMPER. I ALSO FOUR SOME SCENE PICTURA FOR INSURANCE PERENDUC AS IT CAN SHOW	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 > 2020 (2) 2:45 Hzuns 1 Was DRIVING MY TAST (SHE 7547H) MAG MIG M KIO ALE G. AT TIME NO PASSINGER ON ROBIND. APTEN WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC. WHILE WAITING MY VEHICLE MOVING FURWARD AND TRUCH FRONT VEHICLE (SMN 77582) TOTOLLY NO DATAGE ON BUTTA VEHICLES AS MY TAXI ONLY TUCH PRIMPER TO BUMPER. I MSO FOUR SOME SCONE PICTURE FOR INSIRANCE PERMANCE BY IT CAN SHOW		Y Y
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 > 5200 (2) 12:45 Hz uns 1 Was DRIVING MY TAY 1 (SHC 7547H) MANG M KIO ANG 6. AT TIME NO PASSINGIP ON BOARD. APTEN WHILE 1 WAS	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 12020 (212: 47 Hzuns 1 Was DRIVING MY TAX) (SHZ 7547H) MANG MY KIO ANE G. AT TIME NO PASSINGE ON ROADD. APTER WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC WHILE UNITING MY VEHICLE MOVING FURWARD AND TRUCH FRONT VEHICLE (SMN 7758Z) TOTALLY NO DAMAGE ON BATTA VEHICLES AS MY TAXI CALLY TUCH PRIMPER TO BUMPER. I MSO FOUR SCHE SCENE PICTURA FOR INSURANCE REPERLACE OF IT CAN SHOW	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 12020 (212: 47 Hzuns 1 Was DRIVING MY TAX) (SHZ 7547H) MANG MY KIO ANE G. AT TIME NO PASSINGE ON ROADD. APTER WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC WHILE UNITING MY VEHICLE MOVING FURWARD AND TRUCH FRONT VEHICLE (SMN 7758Z) TOTALLY NO DAMAGE ON BATTA VEHICLES AS MY TAXI CALLY TUCH PRIMPER TO BUMPER. I MSO FOUR SCHE SCENE PICTURA FOR INSURANCE REPERLACE OF IT CAN SHOW	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15) 2020 (2) 2: US TRUMS I WAS DRIVING MY TAX! (STIC 7 CUTH) MAGE MIG MY KIO ARE G. AT TIME NO PASSIGNATE ON ROBIND. APTER WHILE I WAS STOP AT JUSTIC WONT FOR THAFTIC. WHILE LANTING MY HEINCLE MOVING PURWAND AND TRUCH FRONT VEHICLE (SMN 77582) TOTOLLY NO DATINGE ON BUTH JESTICIES AS MY TAXI ONLY TUCH PRIMPER TO BUMPER. I MED FOOK SOME SCENE PICTURA FOR INSURANCE REPERACE BY IT CAN THEN NO DAMPAGE APPER DECLIDENT.	SKETCH PLAN	₹
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15/2020 (2/2:45 Hzuns 1 WAS DRIVING MY TAS) (SHZ 7547H) ALONG ANG MO KIO ANG G. AT TIME NO PASSENGER ON BOARD. AFTER WHILE I WAS	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 3 2020 (2) 2: 45 Hours 1 Was DRIVING MY TAXI (SHC 7547H) MUCH ANG M KIO ANG G. AT TIME NO PASSINGFR ON BOARD. AFTER WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC. WHILE LAITING MY VEHICLE MOVING PURWARD AND TRUCH FRONT VIEHCLE MINTASSZ). TOTALLY NO DAMAGE ON BUTH YEHCLES AS MY TAXI CALLY TUCH PRIMPER TO BUMPER. I ALSO TOUC SCHEL SCENE PICTURA FOR NSURANCE REPERACE AS IT CAN SHOW	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 3 2020 (2) 2: 45 Hours 1 Was DRIVING MY TAXI (SHC 7547H) MUCH ANG M KIO ANG G. AT TIME NO PASSINGFR ON BOARD. AFTER WHILE I WAS STOP AT JUCTION WOIT FOR TRAFFIC. WHILE LAITING MY VEHICLE MOVING PURWARD AND TRUCH FRONT VIEHCLE MINTASSZ). TOTALLY NO DAMAGE ON BUTH YEHCLES AS MY TAXI CALLY TUCH PRIMPER TO BUMPER. I ALSO TOUC SCHEL SCENE PICTURA FOR NSURANCE REPERACE AS IT CAN SHOW	DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 15 1 2020 (2) 12:45 Hzuns 1 Wes DRIVING MY TASI (SHC 7547H) MAG MG M KIO ANE G. AT TIME NO PASSENGER ON BOARD. APTER WHILE I WEST STOP AT JUCTION WOIT FOR PLAFFIC. WHILE LANTING MY VEHICLE MOVING FORWARD BY TUCH FRONT VEHICLE (SMN 77582), TOTOLLY NO DAMAGE ON BATTA VEHICLES AS MY TAXI CALLY TUCH PRIMPER TO BUMPER. I ALSO FOUR SOME SCENE DICTURA FOR INSURANCE PERFORACE BY IT CAN SHOW NO DAMAGE APPER ACCIDENT.	A-3HZ-7547	H
	MY VEHICLE MOVING FURWARD AND TRUCH FRONT VITHOLE (SMN 7758Z). TOTALLY NO DAMAGE ON BUTH VAHICLES AS MY TAXI ONLY TUCH PRIMPER TO BUMPER. I MISO FOOK SCHED SCENE PICTURE FOR NEURONCE REPERACE OF IT CAN SHOW	MY VEHICLE MOVING FURWARD AND TWICH FRONT VITHOLE (SMN 7758Z). TOTALLY NO DAMAGE ON BUTH VAHICLES AS MY TAXI ONLY TUCH PRIMPER TO BUMPER. I MISO FOOK SOME SCENE PICTURA FOR NEURONCE REPERACE AF IT CAN SHOW	My VEHICLE MOVING FURWARD AND TOUCH FRONT VEHICLE (SMN 77582). TOTALLY NO DAMAGE ON BUTH VEHICLES AS MY TAXI CNLY TUCH PRIMPER TO BUMPER. I 1980 FOOIC SCARED SCENE PICTURA FOR NSURANCE REPERBLE AF IT CAN SHOW NO DAMAGE APPER ACCIDENT.	ON 15/2/2020 ((SHZ 7547H) A NO PASSENGER	THE ACCIDENT (12:47 Hours 1 Was DRIVING MY TAS) ALONG MYG M KIO ALE 6. AT TIME ON BOARD. AFTER WHILE I WAS































