MASP20078605 / Aspectus Consultancy Pte Ltd - Aspectus ENTRY DATE & TIME: 11/09/2020 11:15 SUBMITTED BY: Candice Shayne

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	11/09/2020 11:15
Date Of Accident	11/09/2020 08:00
Exact Location Of Accident	CTE TOWARDS CITY NEAR BRADDELL EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLU5134L
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88529077
Alternative Phone No	OFFICE-66550005
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PRIUS 1.8 HYBRID
Exact Purpose for which vehicle was being used at time of accident	PRIVATE HIRE
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	29141713
Cover Note Number	
Driver	
Name of Driver	TAN SENG SAN

Name of Driver
TAN SENG SAN
NRIC No
S6815301H
Date Of Birth
30/03/1968
Occupation
OUTDOOR
Date Of Driving Pass
01/04/1991

Driving Experience 29 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-88529077

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 987B BUANGKOK GREEN #08-25

Postcode 532987

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 CHAIN COLLISION

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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

NO

2

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: : CHINESE IN 40+

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

ON 11/9/20 @ 0800HRS, I WAS TRAVELLING ALONG CTE TOWARDS CITY NEAR BRADDELL EXIT. AT THAT TIME, I WAS TRAVELLING IN LANE 1. THE TRAFFIC IS MODERATE AND THE CAR (VEH B) SUDDENLY JAMMED BRAKE. I DID NOT (VEH A) STOP IN TIME AND THEREFORE COLLIDED AT THE REAR OF VEHICLE. SECONDS LATER, A (VEH C) COLLIDED INTO ME AND THEREFORE I MOVED FORWARD, COLLIDED INTO THE (VEH) AGAIN. NO ONE WAS INJURED.

Attachment(s)

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

Remarks/ Reasons: VIDEO WITH GRAB

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFN1811A

Vehicle Make/Model/Colour HONDA / GOLD

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver KEE TANNY
NRIC/Passport Number S8310609C

Contact Number

Address Postcode No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

2

1

Vehicle Registration Number SMN3468L

Vehicle Make/Model/Colour HONDA / BLUE

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver YAP KOK LEONG

NRIC/Passport Number S7135107F Contact Number 83337182

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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
- 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.
- 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:

s Signal (If driver is not the policyholder)

Date & Time:

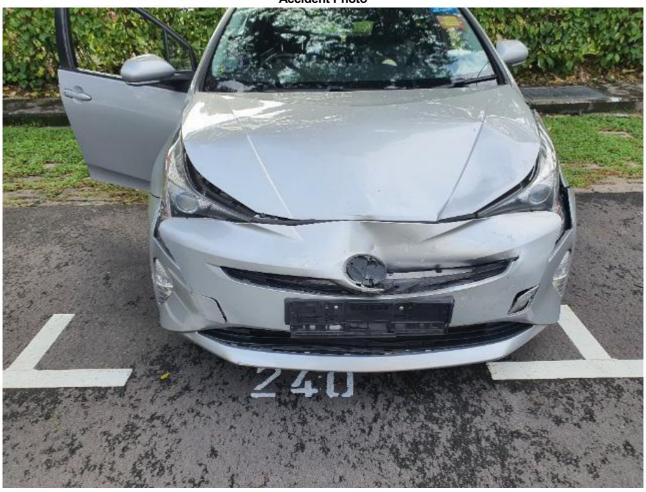
Reporting Centre Personnel's Signature

Name:

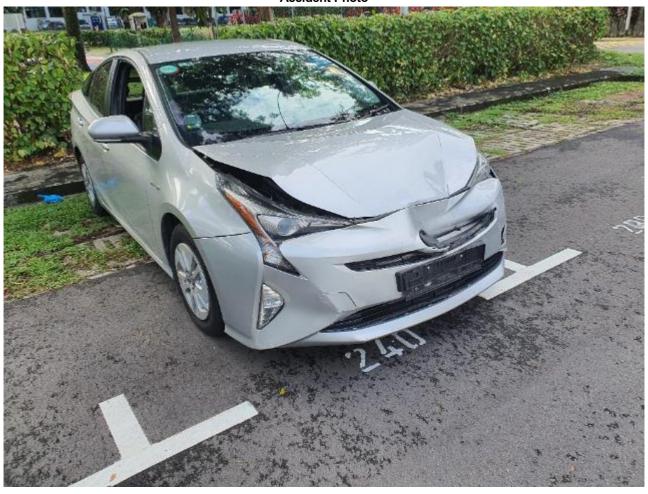
NRIC/FIN No .:

SINGAPORE AU ((The to Counds City) SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT cel 0800hg near (104 H DECLARATION I/We declare the foregoing particulars are true inevery respect. Oriver's Signature
(If driver's not the policyholder)
Date & Time: [1 9 20 Policyholder's Signature Reporting Centre Personnel's Signature Date & Time: Name: NRIC/FIN No.- (@0930 hs









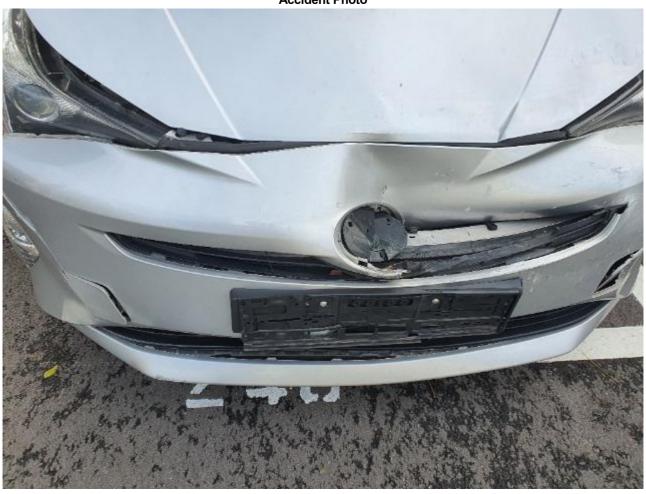


















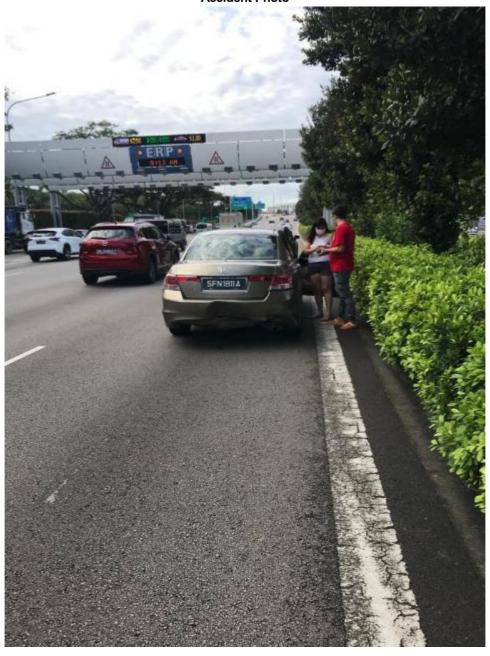


















Identification Card



Identification Card









