



## 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 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. 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

Date of Submission	08/12/2020 11:27 (SGT)
Date of Accident	07/12/2020 12:20 (SGT)
Exact Location of Accident	Collyer Quay, Singapore
Additional Location Information	COLLYER QUAY TOWARDS FINLAYSON GREEN
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6985H
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Company Reg No	2XXXXX975H
Email Address	CLAIMS@PREMIERTAXI.COM
Mobile Phone No	(Phone) +65-91550072
Alternative Phone No	(Office) +65-62148880

### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Optima
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi

### INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	5107202885-01
Cover Note Number	-

### DRIVER

Name of Driver	SENG TECK HEW
NRIC No	SXXXX381A
Date Of Birth	10/10/1955
Occupation	Outdoor



Date Of Driving Pass .....	19/05/1977
Driving experience .....	43 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94750828
Alt. Phone Number .....	-
Email Address .....	CLAIMS@PREMIERTAXI.COM
Address .....	BLK 408C #05-10
Address complement .....	FERNVALE ROAD
Postcode .....	793408
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	Hit by fallen tree / Other objects
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	3
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACH

##### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	EP98A
Vehicle Manufacturer .....	Kia
Vehicle Model .....	Cerato
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	MALE CHINESE
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-

Nature Of Damage	-
Details of property damaged in accident	FRONT BUMPER DAMAGED
No. Of Passenger (Including Driver)	2

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YN4363G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MALE CHINESE
Contact Number	(Phone) +65-85533344
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	TOWING TRUCK
No. Of Passenger (Including Driver)	-

# SKETCH PLAN

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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.
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.



*[Signature]* S1130381A

08 DEC 2020

*[Signature]*

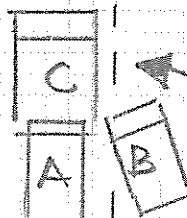
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## **Sketch Plan**

A: SHC 6985H  
B: EP 98A  
C: YN 4363G.



Towards Finlayson Green

Collyer Quay

Describe Circumstances of the Accident

per to attach statement

Declaration

We declare the foregoing particulars are true in every respect.



x *[Signature]* S1130 3&1 A

08 DEC 2020

*[Signature]*

Describe Circumstance of the Accident.

**\* CHAIN COLLISION \***

ON 07/12/2020 @ 1135HRS, MY TAXI (SHC 6985 H) WAS BREAKDOWN AND MADE THE NECESSARY ARRANGEMENT FOR TOWING.

ON 07/12/2020 @ 1220HRS, WHILE SEATED IN VEHICLE C ( YN 4363 G - THE TOWING TRUCK) WITH MY TAXI (SHC 6985 H ) BEING TOWED – TRAVELLING ALONG COLLYER QUAY TOWARDS FINLAYSON GREEN, SUDDENLY VEHICLE B ( EP 98 A – KIA CERATO ) WHICH WAS ON THE RIGHT – COLLIDED ONTO THE RIGHT REAR OF VEHICLE B – WHILE FILTERING.

THE IMPACT CAUSED THE FRONT BUMPER OF VEHICLE B TO DISLODGE & HIT ON THE RIGHT PORTION OF MY TAXI.

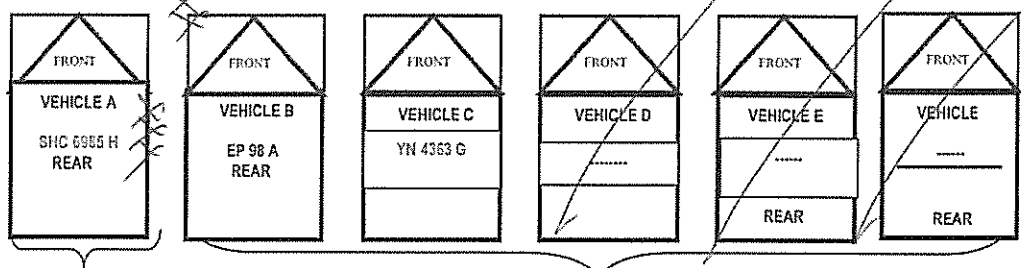
WHEN INSPECTED, THE RIGHT PORTION OF MY TAXI DAMAGED.  
VEHICLE B HAD DAMAGES ON THE FRONT BUMPER.  
NO DAMAGES TO THE VEHICLE C.

NO INJURY INVOLVED.  
NO AMBULANCE AT SCENE.

\*VIDEO FOOTAGE CAPTURED.

CHAIN COLLISION / MULTIPLE VEHICLES

DAMAGES FOUND ON VEHICLE A, B, C, D, E & F



PREMIER TAXI

THIRD PARTY VEHICLES



5130381A

Driver's Signature & NRIC Number

Tuesday, December 08, 2020 @ 11:11:15 AM

## INSURER ENQUIRY

## Find insurer

Vehicle reg. no.

EP98A

Date of Accident

07/12/2020



Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **AIG**Period of Insurance ..... **11/10/2020 - 10/10/2021**Requested By ..... **LIEW HAI LEONG (PREMIER AU...**Requested Date ..... **08/12/2020 16:47**

## Payment details

Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2**

## General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

Text size + -

**Enquire Transaction History****Transaction History Details**

Log Date/Time:	08 Jan 2016 / 08:30:43	Receipt No.:	AACCK001-AX239-160108-000005
Asset Type:	Vehicle	Transaction Amount:	\$68,666.00
Asset ID:	SHC6985H	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20160108083043359956		

Vehicle No.:	SHC6985H
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:	08 Jan 2016
Original Registration Date:	08 Jan 2016
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414MF5658267
Engine No.:	D4FDFH314415
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:	2015
Open Market Value:	\$22,299.00
Minimum PARF Benefit:	\$13,931.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	08 Jan 2016 08:30:43
COE No.:	2016010801003460R
COE Expiry Date:	07 Jan 2024
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$45,307.00
Lifespan Expiry Date:	07 Jan 2024

# PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02  
SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511  
CO. REG:200707743D GST REG:200707743D

9-Dec-20

## ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6985 H

### S/NETT

1 pc	n/s door sticker	\$	100.00
	Sundry	\$	50.00
	To dismantle and refit the inner component of front n/s door into new shell door	\$	150.00
	To labour charge for dismantle and renew the accident damaged parts. Including knock-out, straighten, repair, reshape and adjust of the rear n/s door etc	\$	200.00
	To putty and spray painting on front o/s door, o/s rocker panel garnish, o/s mirror cover	\$	600.00
	To apply rustproofing on the repaired and replaced panels.	\$	200.00
		<u>\$</u>	<u>1,300.00</u>

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

**THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.**