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.

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 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 30/12/2020 10:25 (SGT) Date of Accident 24/12/2020 12:15 (SGT) Exact Location of Accident Balestier Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJT2310T

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner FRESH CARS PTE LTD

Company Reg No 2XXXXX540Z

Email Address desmondfreshcars105@gmail.com

Mobile Phone No (Phone) +65-89999999

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Axio

Variant

Exact purpose for which vehicle was being used at time of Private hire accident

Are you claiming under your own insurance policy for repair to

your vehicle? No - Reporting only

Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company NTUC Type of Coverage ThirdParty

Fleet Policy

Policy Number 5118938574

Cover Note Number

DRIVER

Name of Driver TAN CHOON MEI (CHEN CHUNMEI)

Outdoor

NRIC No SXXXX549B Date Of Birth 11/05/1980

Occupation

Accident report SN0920CU0006

Date Of Driving Pass 20/05/2005 Driving experience 15 YEARS AND 7 MONTHS Gender Female Mobile Number (Phone) +65-93670200 Alt. Phone Number Email Address desmondfreshcars105@gmail.com Address BLK 368 BUKIT BATOK STREET 31 Address complement #12-479 Postcode 650368 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Collided into Property Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? No Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Cairnhill Neighbourhood Police Post Police Station Phone No (Phone) +65-18002968999 Police Station Address Blk 9 Gloucester Road #01-03 Singapore 210009 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT - T/20201224/2056. ATTACHMENT(S)

Yes

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

SKETCH PLAN

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- 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:

- 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)
 - (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Perso el's Signature

NRIC/FIN No.:

	Bulestier Port Twds CTE.					B SIT2210 B Governent property	
DESCRIBE CIRCUI	NSTANCES O			Police	Report	No:	T/20201724/
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DECLARATION							
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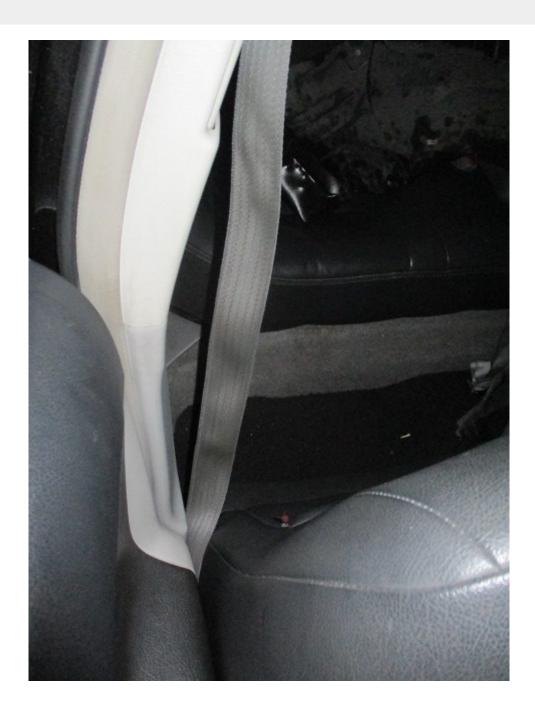


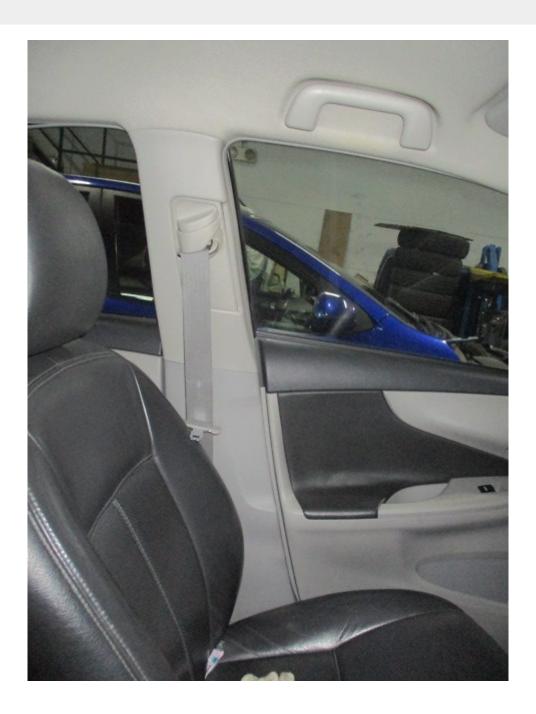


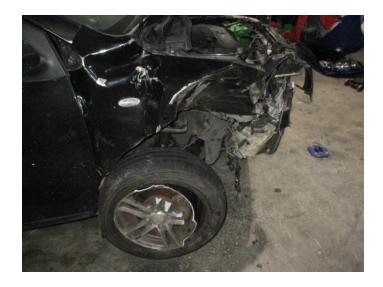


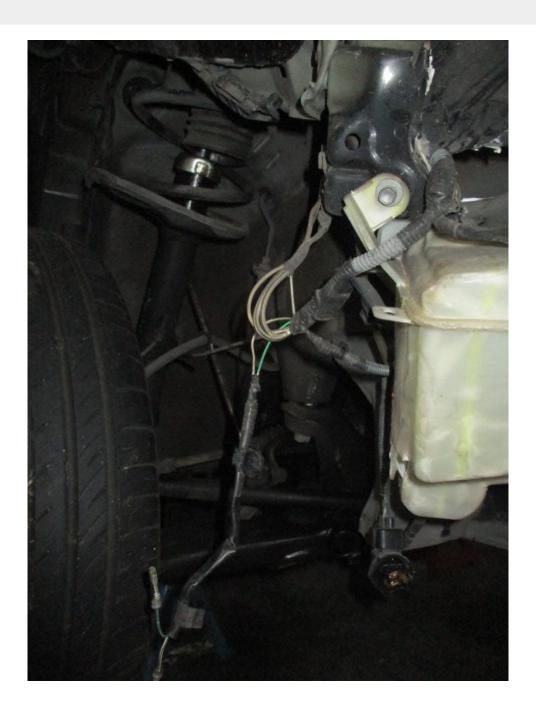


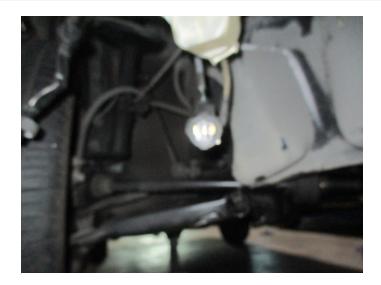




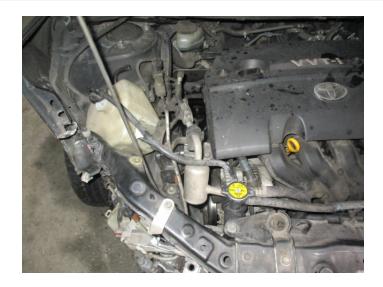


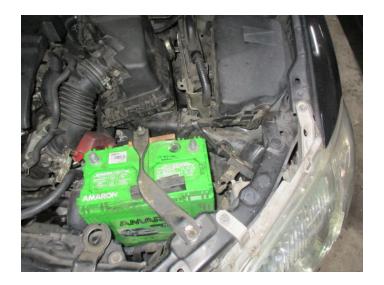








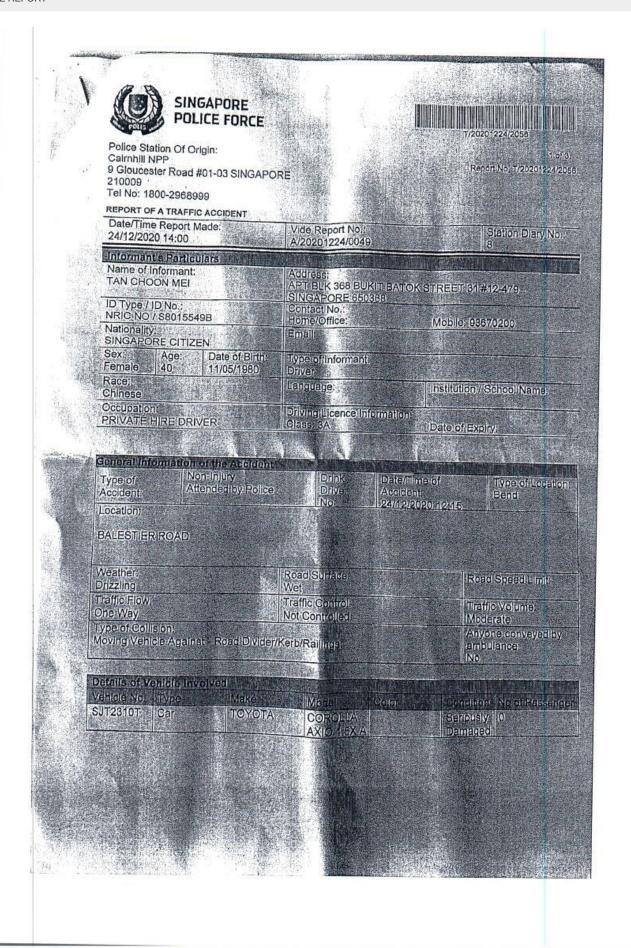














2 of 3

Report No. T/20201224/2056

Police Station Of Origin: Cairnhill NPP 9 Gloucester Road #01-03 SINGAPORE 210009

Tel No: 1800-2968999

CONTINUATION OF REPORT

Brief Details.

On 24/12/2020 at about 1215hrs, I was travelling on Balestier Road towards CTE direction. I was travelling on the right lane and was turning into the slip road into CTE express way. The weather was drizzling and the road was wet. Suddenly I lose control of the vehicle (SJT2310T) and knock into the right side of the railing. No one was hurt in the accident, and no other vehicle was damaged other than my vehicle was at scene and attended to me, they also took my in car camera's SD card for reference.



