



AGI - Ltk  
- Adrian

SC0S21360001 / Convergence Automotive Pte Ltd  
ENTRY DATE & TIME: 06/03/2021 11:01 (SGT)  
SUBMITTED BY: Chia Pei Fen  
VERSION: 1 (06/03/2021 11:01 (SGT))

## 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	06/03/2021 11:01 (SGT)
Date of Accident	05/03/2021 14:40 (SGT)
Exact Location of Accident	Lavender St, Singapore
Additional Location Information	LAVENDER ST TOWARDS BALESTIER ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME518T
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	POH GAIK HUAT
NRIC No	SXXXX303Z
Email Address	HONGSIANGPOH@GMAIL.COM
Mobile Phone No	(Phone) +65-93927059
Alternative Phone No	(Home) +65-93927059

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car

#### INSURANCE COMPANY

Name of Insurance Company	Direct Asia
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00665271/01
Cover Note Number	-

#### DRIVER

Name of Driver	POH HONG SIANG
NRIC No	SXXXX229A
Date Of Birth	03/09/1993
Occupation	Indoor

Date Of Driving Pass	25/07/2018
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93927059
Alt. Phone Number	-
Email Address	HONGSIANGPOH@GMAIL.COM
Address	BLK 168 HOUGANG AVENUE 1 #07-1407
Address complement	-
Postcode	530168
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
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 SKETCH PLAN

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT3738A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

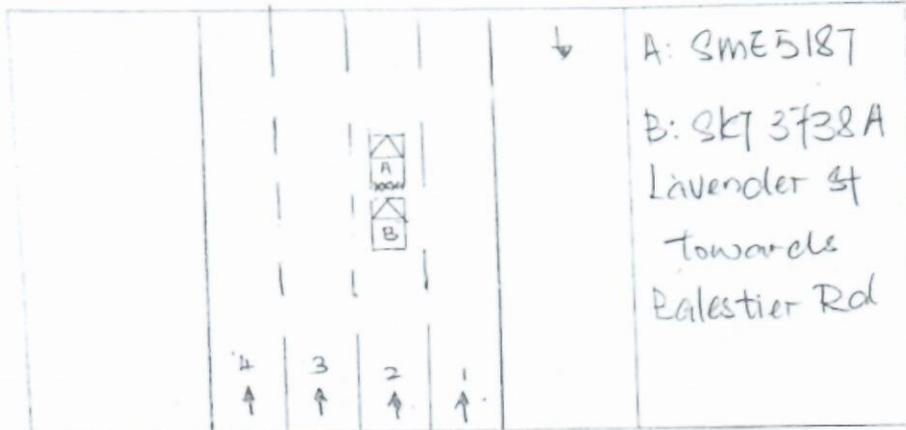
Nature Of Damage -  
Details of property damaged in accident -  
No. Of Passenger (Including Driver) -

**INJURED PERSONS DETAILS**

INJURED 1

Name of injured person POH HONG SIANG  
Address -  
Address Complement -  
Post Code -  
Approximate Age Years Old -  
Injuries Sustained -  
Injured person in which vehicle? SME518T  
Were seat belts worn? Yes  
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight along Lavender St towards Palestier Road at 2nd lane of 4 lanes.

The traffic at that point of time was very heavy, vehicles in front of me stopped, I followed suit.

Suddenly, I felt an impact. Veh "B" collided onto the rear portion of my vehicle and caused damages.

Veh "B" admitted his fault and apologized and got me to claim against his insurance policy.

DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

*[Signature]*

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

*[Signature]*

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

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
- (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:

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

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

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 303Z

### Vehicle Details

Vehicle No.: SME518T  
Vehicle to be Exported: No  
Intended Deregistration Date: 05 Mar 2021  
Vehicle Make: HONDA  
Vehicle Model: SHUTTLE HYBRID 1.5 AUTO  
Primary Colour: Silver  
Manufacturing Year: 2018  
Engine No.: LEB6555326  
Chassis No.: GP71212629  
Maximum Power Output: 101.0 kW (135 bhp)  
Open Market Value: \$20,513.00  
Original Registration Date: 01 Aug 2018  
First Registration Date: 01 Aug 2018  
Transfer Count: 0  
Actual ARF Paid: \$10,719.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 31 Jul 2028  
PARF Rebate Amount: \$8,039.00

### Intended COE Rebate Details

COE Expiry Date: 31 Jul 2028  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QPPaid: \$32,551.00  
COE Rebate Amount: \$24,098.00  
**Total Rebate Amount: \$32,137.00**

The information contained herein is correct as at 05 Mar 2021

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