

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 15/03/2021 15:01 (SGT)
Date of Accident 15/03/2021 11:00 (SGT)
Exact Location of Accident Lor 8 Toa Payoh, Singapore
Additional Location Information OPP TPY SOUTH CC
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLN4755M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner GRAB RENTALS PTE LTD
Company Reg No 201617200G
Email Address gr.sg.accident@grab.com
Mobile Phone No (Phone) +65-96541988
Alternative Phone No (Office) +65-66550005

VEHICLE PARTICULARS

Manufacturer Honda
Model Vezel
Variant -
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 - Reporting only
Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company India International
Type of Coverage Comprehensive
Fleet Policy Yes
Policy Number D21MFL0000447
Cover Note Number -

DRIVER

Name of Driver TAN AH SENG
NRIC No S1188356G
Date Of Birth 08/06/1956
Occupation Outdoor

Date Of Driving Pass	22/01/1979
Driving experience	42 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96541988
Alt. Phone Number	-
Email Address	JAMES.TANAS@GMAIL.COM
Address	BLK 167A PUNGGOL EAST #16-415
Address complement	-
Postcode	821167
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	Collision - Change/cross lane
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?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	MAHEN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
Gender	Female

PASSENGER 4

Name	UNKNOWN
Gender	Female

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

ON 15/03/2021 @ 1100HRS, I WAS DRIVING ALONG TOA PAYOH LOR 8 ON BOARD MY VEHICLE SLN4755M ALONG WITH 4 PASSENGERS (1x MALE, 3x FEMALE). I WAS ON MY WAY TO DROP THEM AT TOA PAYOH POLYCLINIC AND I HAD TO MAKE A U-TURN IN ORDER TO DROP THEM OFF AT THE ENTRANCE. I WAS DRIVING ON THE EXTREME LEFT LANE, UPON ARRIVAL AT THE TRAFFIC LIGHT, I STOPPED MY VEHICLE ON THE LEFT LANE JUST BEFORE THE TRAFFIC LIGHT I CHECKED FOR ANY ONCOMING VEHICLES FROM MY BACK AND FROM THE FRONT. UPON ENSURING THAT THE ROAD IS CLEAR TO MAKE A U-TURN, I THAN PROCEED TO DO SO. WHILE MAKING THE TURN A VEHICLE SFE8000A SUDDENLY CAME FROM MY RIGHT LANE AND COLLIDED ONTO MY RIGHT DRIVER'S DOOR. THE WINDOW GLASS PANEL SHATTERED FROM THE COLLISION IMPACT. 1 OF MY FEMALE PASSENGER WAS CONVEYED TO HOSPITAL VIA AMBULANCE. THE TPV DRIVER DIDN'T WANT TO EXCHANGE ANY DETAILS AND QUITE AGGRESSIVE AT THE POINT OF TIME. ANOTHER MEMBER OF MY PASSENGER FAMILY APPEARED FROM NO WHERE AND TRIED TO HARASS ME.

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 SFE8000A
 Vehicle Manufacturer Toyota
 Vehicle Model Alphard
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private hire
 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 UNKNOWN
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? SLN4755M
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? Yes

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.

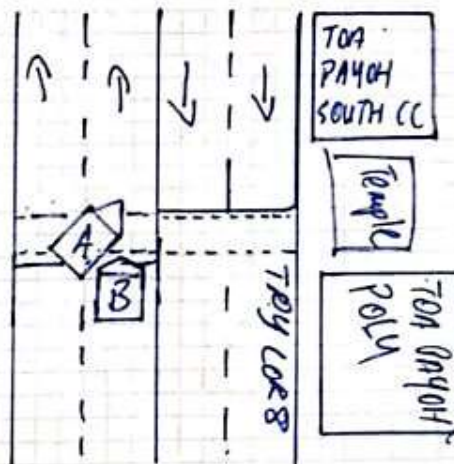
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

veh A - SLN 4755M
veh B - SFE 8000A



Describe Circumstances of the Accident

On 15/3/21 @ 1100hrs I was driving along
 Taa Payah Lor 8 onboard my vehicle SLN4755 M
 along with 4 passengers (1x Male, 3x female). I was on
 my way to drop them at Taa pa yoh Polyclinic, and
 I had to make a U-turn in order to drop them off
 at the entrance. I was driving on the extreme left
 lane, upon arrival at the traffic light, I stopped my
 vehicle on the left lane just before the traffic light
 I checked for any oncoming vehicles from my back
 and from the front. Upon ensuring that the road is
 clear to make a U-turn, I then proceed to do
 so, while making the turn a vehicle SFE 8000T suddenly
 came from my right lane and collided onto my right
 driver's door. The window glass panel shattered from
 the collision impact. 1 of my female passenger was
 conveyed to hospital via ambulance. The TPU driver didn't
 want to exchange any details and was quite aggressive
 at the point of time. Another member of my passenger family
 appeared from no where and tried to harass me.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
 Time

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

Witnessed by Reporting Centre
 Personnel

1232p







