

SKETCH PLAN

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. The 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.

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.



x *[Signature]* 57307955A

25 MAR 2021

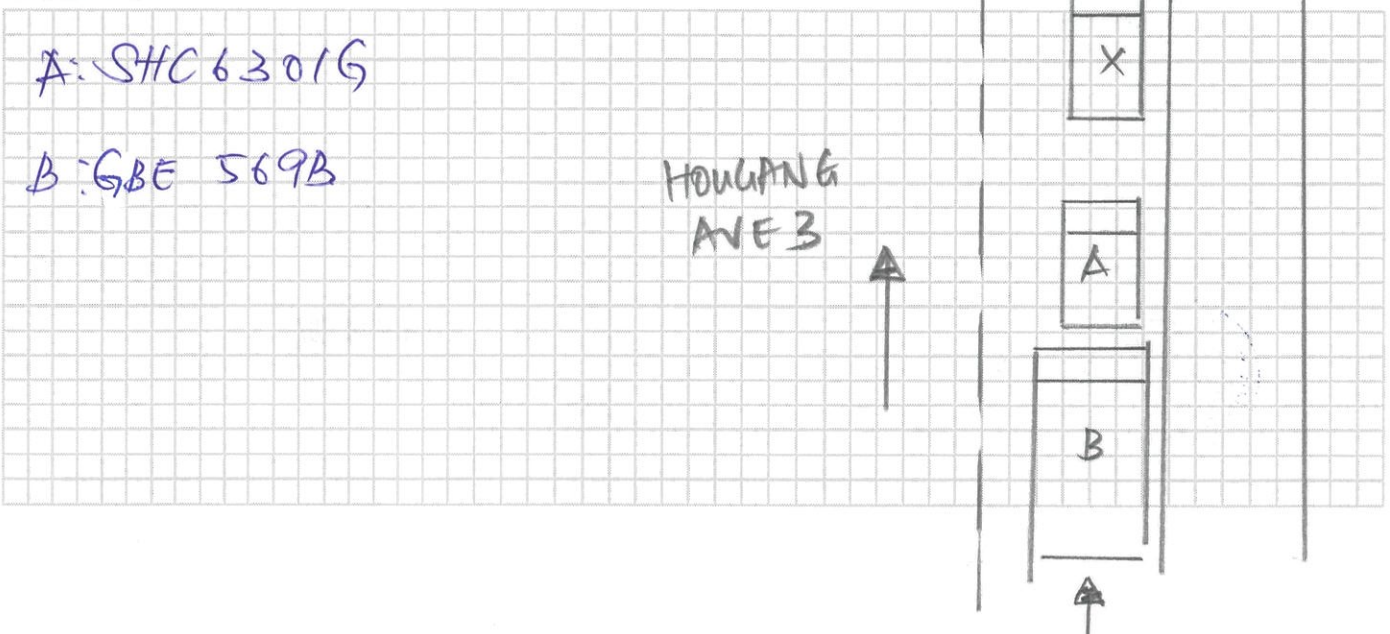


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to attach.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

x

[Signature]

57307955A

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

25 MAR 2021

[Signature]

Witnessed by Reporting Centre Personnel

Describe Circumstance of the Accident.

ON 25/03/2021 @10:05HRS, I WAS DRIVING MY TAXI (SHC 6301 G) WITH 1 PASSENGER ON BOARD, TRAVELLING ALONG HOUGANG AVE 3, ON THE RIGHT LANE.

I WAS SLOWING DOWN MY TAXI TO A COMPLETE STOP – AS VEHICLES AHEAD OF ME STOPPED.

WHILE STATIONARY, SUDDENLY I FELT AN IMPACT FROM THE REAR.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B (GBE 569 B – TOYOTA LORRY) WHICH WAS BEHIND ME, HAD COLLIDED ONTO THE REAR OF MY TAXI.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE REAR PORTION & VEHICLE B DAMAGE ON THE FRONT PORTION.

AS A RESULT, BOTH MYSELF & MY PASSENGER - FELT SOME DISCOMFORT & WILL SEEK FOR MEDICAL TREATMENT SOON. NO AMBULANCE AT SCENE.

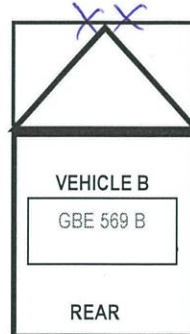
VEHICLE B HAD A PASSENGER ONBOARD.

*VIDEO FOOTAGE CAPTURED.

DAMAGES FOUND ON VEHICLE A & VEHICLE B



PREMIER
TAXI



THIRD PARTY
VEHICLE



[Signature] S7307955A

Driver's Signature & NRIC Number
Thursday, March 25, 2021 @ 11:04:47 AM

(attended by)

[Signature]

Text size +

Enquire Transaction History**Transaction History Details**

| | | | |
|-------------------------------------|---------------------------------|---------------------|---|
| Log Date/Time: | 02 Dec 2014 / 09:07:23 | Receipt No.: | AACCK001-AX239-141202-000005 |
| Asset Type: | Vehicle | Transaction Amount: | \$64,525.00 |
| Asset ID: | SHC6301G | Channel: | AA Counterless - CYCLE & CARRIAGE KIA PTE LTD |
| Transaction Type: | 01.02 Register New Vehicle (AA) | | |
| Business Transaction Reference No.: | 20141202090723394518 | | |

| | |
|--------------------------------|---|
| Vehicle No.: | SHC6301G |
| 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: | 02 Dec 2014 |
| Original Registration Date: | 02 Dec 2014 |
| Vehicle Make: | KIA |
| Vehicle Model: | OPTIMA 1.7(A) DIESEL |
| Chassis No.: | KNAGM414MF5554427 |
| Engine No.: | D4FDEH311799 |
| 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: | 2014 |
| Open Market Value: | \$20,155.00 |
| Minimum PARF Benefit: | \$7,630.00 |
| PARF Eligibility: | Y |
| No. of Transfer: | 0 |
| Effective Ownership Date/Time: | 02 Dec 2014 09:07:23 |
| COE No.: | 2014120201001399E |
| COE Expiry Date: | 01 Dec 2022 |
| COE Bid Category: | - |
| Actual QP/PQP Paid Amount: | \$51,668.00 |
| Lifespan Expiry Date: | 01 Dec 2022 |
| Owner ID Type: | Company |


INSURER ENQUIRY

**Find
insurer**

Vehicle reg. no.

GBE569B

Date of Accident

25/03/2021 

Reset

% **RESULT & RECEIPT**

TP Insurer Enquiry

Insurance **China Taiping Insurance (Sing...**Period of Insurance **26/08/2020 - 25/08/2021**Requested By **VINCENT CHUA WEE AN (PREM...**Requested Date **25/03/2021 12:18****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**