SN09213U0009 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 30/03/2021 15:21 (SGT) SUBMITTED BY: Liew Shan Hui VERSION: 1 (30/03/2021 15:21 (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 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.

 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 the control of this report will fee fee be made qualified to the proposition by interested parties. 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	30/03/2021 15:21 (SGT)
Date of Accident	` '
Date of Accident	26/03/2021 20:00 (SGT)
Exact Location of Accident	Duxton Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Subaru

Vehicle Registration Number	SMV9168X	

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ZHOU PEIFA
NRIC No	SXXXX485H
Email Address	Zhou_peifa@yahoo.com
Mobile Phone No	(Phone) +65-97777014
Alternative Phone No	+65-97777014

VEHICLE PARTICULARS

Manufacturer

Forester
-
Private use
No - Claiming third party
Private car
Auto
2000

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5119310454
Cover Note Number	_

DRIVER

Name of Driver	ZHOU PEIFA
NRIC No	SXXXX485H

Date Of Birth 24/03/1985 Occupation Indoor Date Of Driving Pass 24/09/2008 Driving experience 12 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-97777014 Alt. Phone Number +65-97777014 Email Address Zhou_peifa@yahoo.com Address BLK 455A ANG MO KIO ST 44 #05-01 Address complement Postcode 561455 Is the driver the policyholder? Yes If No. Relationship of the Driver with the Insured 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 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) 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO STATEMENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** 3

Vehicle Registration Number	SLH110G
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)	_

WITNESS DETAILS

WITNESS 1

 Name
 WEN HAO

 Phone
 (Phone) +65-88824085

Email

SKETCH PLAN

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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- 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) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary nvestigations 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 Personnel's Signature

NRIC/FIN No.:

A: SMV9168X SLH110G SKETCH PLAN Duxton Rol DESCRIBE CIRCUMSTANCES OF THE ACCIDENT MY VEHICLE A REARING NO. OLATE MADENT DECLARATION I/We declare the foregoing particulars are true in govery respect.

Policyholder's Signature Date & Time:

SIAPUL Dept total decision 1-46

Driver's Signature

Date & Time:

(if driver is not the policyholder)

Reporting Centre Personnel's Signature

NRIC/FIN No.:



















10 Sin Ming Drive Singapore 575701 www.lta.gov.sg

07 Oct 2020

Our ref 0710200203N061017434

What You Need To Do:

You must show the new number SMV9168X on your vehicle by 10 Oct 2020.

ZHOU PEIFA APT BLK 455A ANG MO KIO STREET 44 #05-01 SINGAPORE 561455

Dear Sir/Madam

You Have Successfully Replaced Vehicle Registration No. SLQ2244T With SMV9168X

You have successfully replaced your vehicle registration number. The vehicle, whose previous number was SLQ2244T, now has the number SMV9168X.

The vehicle details after the transaction are:

Transaction No.

: 20201007155107838866

Vehicle Registration

: SMV9168X (Previously SLQ2244T)

No.

Vehicle Make

: SUBARU

Vehicle Model

: FORESTER 2.0XT CVT AWD SR

Chassis No.

: JF1SJGK85HG092340

Engine No./ Motor

: FA20C834564 / -

No.

Please change the number plates on this vehicle to show SMV9168X by 10 Oct 2020. Otherwise, it is an offence and the penalty is a fine of up to \$2,000 or imprisonment of up to 6 months, or both.

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Visit www.onemotoring.com.sg for more information and to access a wide range of vehicle-related services. If you need a SingPass or CorpPass account, visit www.singpass.gov.sg or www.corppass.gov.sg.

Yours sincerely

Assistant Registrar of Vehicles
Vehicle Quota & Registration Division
Land Transport Authority
[This is a computer-generated letter, no signature is required.]

Road Safety Reminder: Please drive safely and look out for fellow road users, including cyclists. Let's keep everyone safe on our roads!

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