

## 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	31/03/2021 09:55 (SGT)
Date of Accident	30/03/2021 17:58 (SGT)
Exact Location of Accident	Stevens Rd, Singapore
Additional Location Information	STEVENS ROAD // SCOTTS ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6387J
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Company Reg No	2XXXXX975H
Email Address	CLAIMS@PREMIERTAXI.COM
Mobile Phone No	(Phone) +65-91550072
Alternative Phone No	(Office) +65-62148880

#### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Optima
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1700

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty
Fleet Policy	Yes
Policy Number	5107202885-01
Cover Note Number	-

#### DRIVER

Name of Driver	CHAN KOK LEONG
NRIC No	SXXXX279G

Date Of Birth	29/01/1959
Occupation	Outdoor
Date Of Driving Pass	18/06/1977
Driving experience	43 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81218755
Alt. Phone Number	-
Email Address	CLAIMS@PREMIERTAXI.COM
Address	BLK 455 #10-455
Address complement	HOUANG AVE 10
Postcode	530455
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	PAX IN THE REAR SEAT - CHINESE
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

#### REFER TO ATTACH

VEH. A - 1 PAX  
VEH. B - 1 PAX

#### 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	SKK3716K
Vehicle Manufacturer	Porsche
Vehicle Model	Cayenne



Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NININ KRISTIANA DJOHAN
NRIC No	SXXXXX728E
Contact Number	(Phone) +65-93801095
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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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:


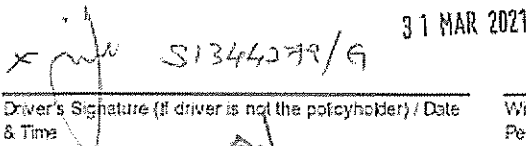

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

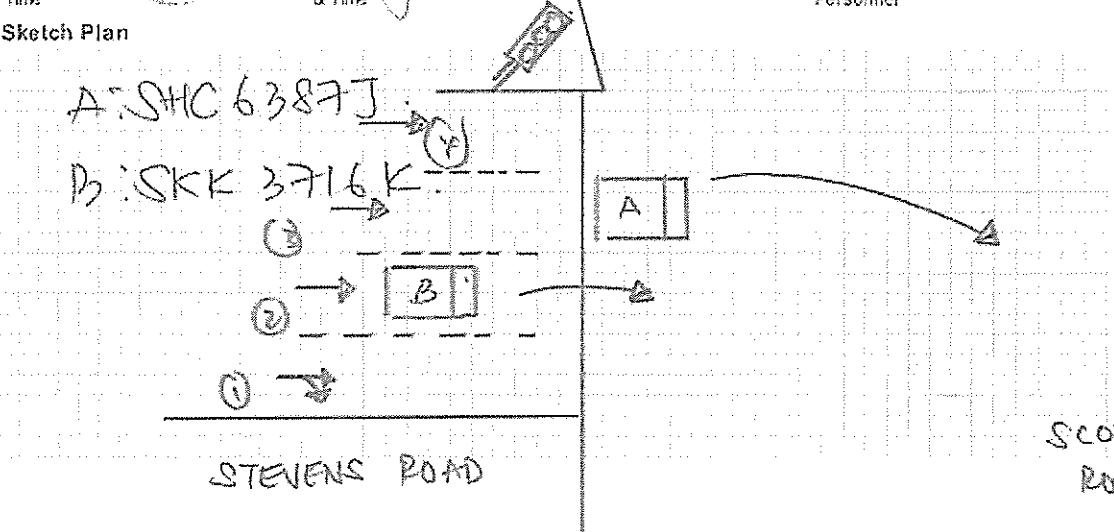
(collectively the "Purposes")

(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.

 Policyholder's Signature / Date & Time	 Driver's Signature (if driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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**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

31 MAR 2021  
51344279/G

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

Witnessed by Reporting Centre Personnel

Describe Circumstance of the Accident.

ON 30/03/2021 @ 17:58HRS, I WAS DRIVING MY TAXI ( SHC 6387 J )  
TRAVELLING ALONG THE TRAFFIC LIGHT JUNCTION OF STEVENS ROAD INTO  
SCOTTS ROAD - WITH A PASSENGER ONBOARD, ON LANE 3.

TRAFFIC LIGHT TURNED GREEN ON MY ROUTE FAVOUR & I PROCEED AHEAD - TO  
TURN RIGHT INTO SCOTTS ROAD.

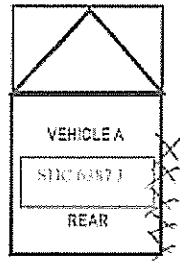
IN THE MIDST OF TURNING RIGHT, SUDDENLY I FELT AN IMPACT FROM MY RIGHT.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B ( SKK 3716 K - PORSCHE )  
WHICH WAS INITIALLY ON LANE 2, FAILED TO KEEP IN LANE & FAILED TO KEEP FOR  
PROPER LOOK OUT, HAD ENCROACHED & COLLIDED ONTO THE RIGHT PORTION OF  
MY TAXI.

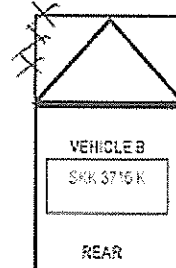
DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE RIGHT PORTION & VEHICLE B  
HAD DAMAGES ON THE FRONT LEFT PORTION.

NO INJURY INVOLVED. NO AMBULANCE AT SCENE.  
VEHICLE B HAD A PASSENGER ONBOARD.

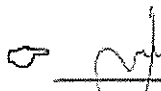
DAMAGES FOUND ON VEHICLE A & VEHICLE B



PREMIER  
TAXI



THIRD PARTY  
VEHICLE

 51344279/G  
Driver's Signature & NRIC Number  
Wednesday, March 31, 2021 @ 9:13:14 AM

(attended by )

Text size + -

**Enquire Transaction History****Transaction History Details**

Log Date/Time:	13 Feb 2015 / 09:33:48	Receipt No.:	AACCK001-AX239-150213-000011
Asset Type:	Vehicle	Transaction Amount:	\$66,712.00
Asset ID:	SHC6387J	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20150213093348641179		
Vehicle No.:	SHC6387J		
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:	13 Feb 2015		
Original Registration Date:	13 Feb 2015		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414MF5578137		
Engine No.:	D4FDEH313316		
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:	\$20,834.00		
Minimum PARF Benefit:	\$8,200.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	13 Feb 2015 09:33:48		
COE No.:	2015021301001589W		
COE Expiry Date:	12 Feb 2023		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$52,904.00		
Lifespan Expiry Date:	12 Feb 2023		


## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

SKK3716K

Date of Accident

30/03/2021 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... **AIG Asia Pacific Insurance Pte....**Period of Insurance ..... **03/07/2020 - 02/07/2021**Requested By ..... **LIEW HAI LEONG (PREMIER AU...**Requested Date ..... **31/03/2021 10:52****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**