VERSION: 1 (10/04/2021 10:19 (SGT))



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 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 10/04/2021 10:19 (SGT) Date of Accident 09/04/2021 10:15 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information Towards MCE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB2197Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CITYCAB PTE LTD Company Reg No 199502839G Email Address fleetsafety@cdgtaxi.com.sg Mobile Phone No (Phone) +65-92356428 Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer Toyota Model Prius 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 Taxi Transmission Auto 1798

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage ThirdPartyFireTheft Fleet Policy Policy Number VFX/P2419140 Cover Note Number

DRIVER

Name of Driver LIM SOON KWOOI NRIC No. S0164739C

Date Of Birth	04/05/1951
Occupation	Outdoor
Date Of Driving Pass	17/05/1972
Driving experience	48 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92356428
Alt. Phone Number	
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 4 TECK WHYE AVENUE #08-228
Address complement Postcode	-
Postcode Is the driver the policyholder?	680004
If No, Relationship of the Driver with the Insured	No Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	INO
	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Oberin Oullisian
Weather Conditions	Chain Collision Clear
Road Surface	
Trodu Guriaco	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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) Has the driver been approached by unknown person(s)	3
soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	NICHOLAS
Gender	Male
PASSENGER 2	
Name	NIOLIOL ACIO MIET
Name Gender	NICHOLAS'S WIFE
Geriaer	Female
DETAILS OF POLICE ACTION	
DETAILS OF FOLIOL ACTION	
Was the accident reported to the police?	Yes
Police Station Name	
Police Station Phone No	Jurong West Neighbourhood Police Centre (Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE IS NOT SUITABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJB9760B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHEONG KANG SWEE
NRIC No	S0499327F
Contact Number	(Phone) +65-96696843
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer	UNKNOWN -
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SEAN GERALD RUDGE
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	PASSENGER
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHB2197Y
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

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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 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)

Lunderstand, 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' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of
- (ii) 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.

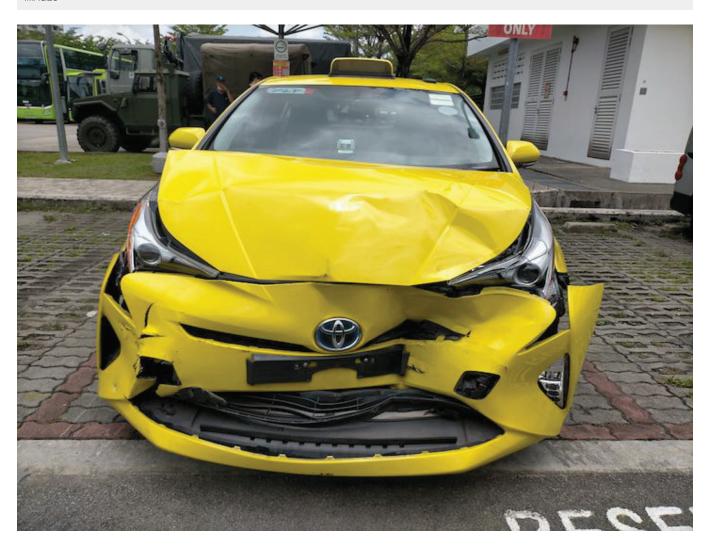
(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

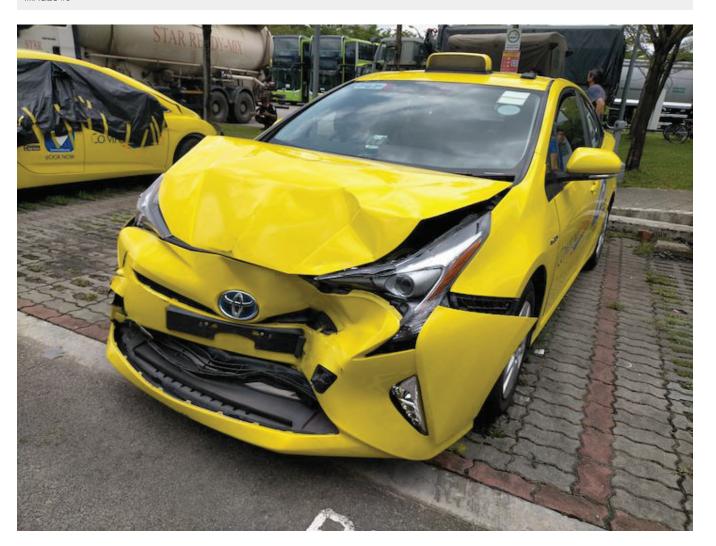
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes,

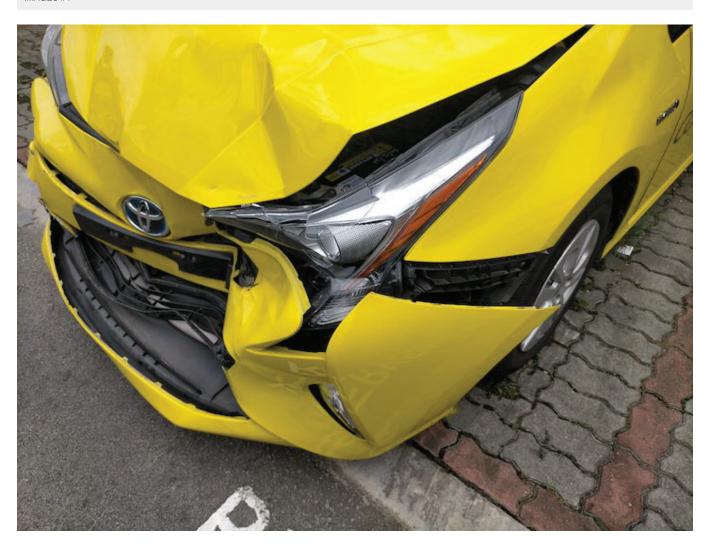
Policyholder's Signature / Date & Driver's Signature (# driver is not the policyholder) / Date Witnessed Reporting Centre Time Personnel 1350 HRE BARLAZ . Sketch Plan 848 21974 STB 9760B

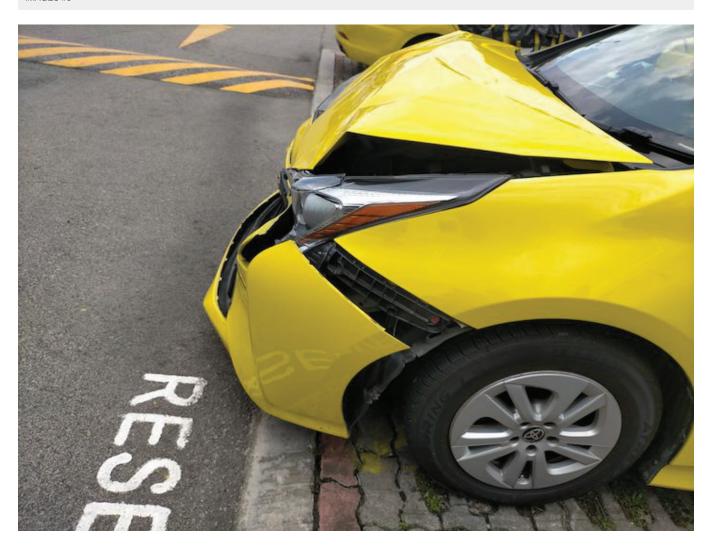
Describe Circumstances of		
REICH IN	POUCE REPORT.	
Declaration		
We declare the foregoing particula	rs are true in every respect.	
NAME decisive the uppealing by your		
	ackini	N.
	Collini	d.
	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre
Policyholdens Signature / Date &	& Time	Personnel
Time	14/21/ 1580 HRS	Spins
	TIPY ISOMES	

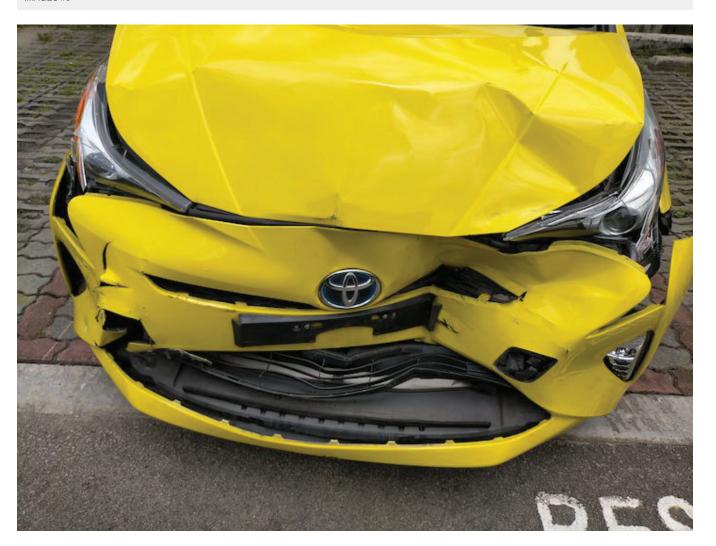


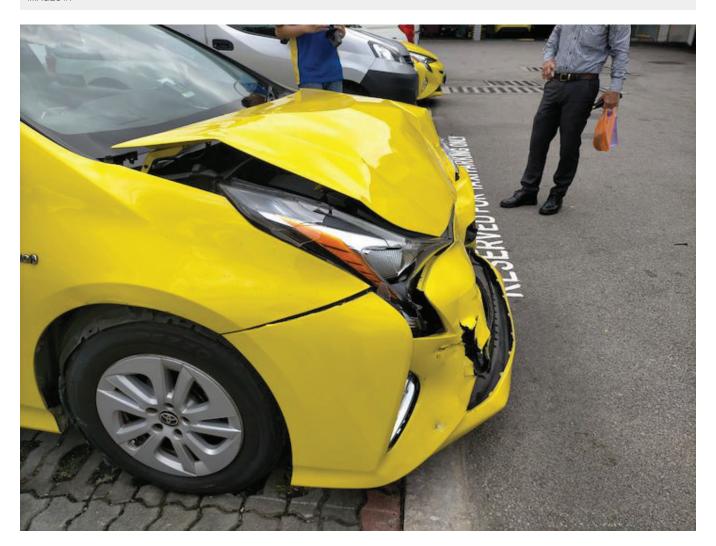






















1 of 3

Police Station Of Origin; Jurong West N.P.C 700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

Report No. T/20210409/2058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 09/04/2021 15:03		lade	Vide Report No.:	Station Diary No. 116	
Informa	nt's Particu	ulars			
	Informant ON KWOOI		Address: APT BLK 4 TECK WHYE AVENUE #08-228 SINGA 680004		
ID Type / ID No.: NRIC NO / S0164739C		39C	Contact No.: Home/Office:	Mobile: 92356428	
National SINGAP	ity: PORE CITIZ	EN	Email:		
Sex. Male	Age: 69	Date of Birth: 04/05/1951	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Taxi driver			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident.	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/04/2021 10:15	Type of Location Straight Road	
	H EXPRESSWAY				
Lamp Post Number: 274 Weather Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control: Not Controlled		Traffic Volume: Moderate	
				Anyone conveyed by	

Details of V	1		Model	Color	Condition	No of Passenger
Vehicle No.	Type	Make	Model		a risk way to be the first of the	
SHB2197Y	Taxi	TOYOTA	PRIUS HYBRID 1.8 CVT	Yellow	Seriously Damaged	
SJB9760B	Car	TOYOTA	VIOS E AUTO	White	Seriously Damaged	

CS Scanned with CamScanner





2 of 3

Police Station Of Origin: Jurong West N.P.C

Report No. T/20210409/2058

700 Corporation Road SINGAPORE 649818

Tel No. 1800-2689999

CONTINUATION OF REPORT

Brief Details.

On 09/04/2021 at about 1015hrs, I was driving my taxi V1) SHB2197Y along AYE on the most right lane towards MCE with 2 passengers onboard. Before the exit of Lower Delta Road, I realized that there is few other vehicle infront of me started to slow down. Out of a sudden, I collided onto one vehicle V2) SJB9760B infront of me as I was unable to stop my vehicle on time.

The driver of V2 alighted from his vehicle and both of us exchange our particulars and his name is Cheong Kang Swee, S0499327F, Hp: 96596843. There are 2 passengers in my taxi one is namely, Nicholas, Hp. 90682469 who informed that his wife sustained injuries on her legs as she hits the rear of the seats during the accident. Police and Ambulance are both at scene. There is CCTV installed in my vehicle.





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999

3 of 3 Report No. 7/20210409/2058

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT. Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference

Signature Of Officer Recording The Report:

Sgt 3 TEO KIAN HU

Signature Of Interpreter: Not applicable

Officer In Charge Of Case TP / GIT /

Sgt 2 DAVID YAP Contact No.: 96192349

Authentication Stamp

Signature Of Informant:

Date/Time: 09/04/2021 15:03

Classification Of Case:

MP168

tanare Police For

OTHER DOCUMENTS

