

## 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	16/04/2021 10:49 (SGT)
Date of Accident	15/04/2021 17:55 (SGT)
Exact Location of Accident	MCE, Singapore
Additional Location Information	MCE TUNNEL - ECP (AFTER FORT ROAD EXIT)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC6985H
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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	5107202885-02
Cover Note Number	-

#### DRIVER

Name of Driver	SENG TECK HEW
NRIC No	SXXXX381A

Date Of Birth	10/01/1955
Occupation	Outdoor
Date Of Driving Pass	19/05/1977
Driving experience	43 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94750828
Alt. Phone Number	-
Email Address	CLAIMS@PREMIERTAXI.COM
Address	BLK 408C #05-10
Address complement	FERNVALE ROAD
Postcode	793408
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 - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

#### 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 (GRAB PAX)
Gender	Male

#### 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 THE ATTACH

BOTH VEHICLES - 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	GBJ2914Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	CHANDRA DAS RINTU
Work Permit No	GXXXX893M
Contact Number	(Phone) +65-98904503
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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**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 *Ne 51130381A*

16 APR 2021

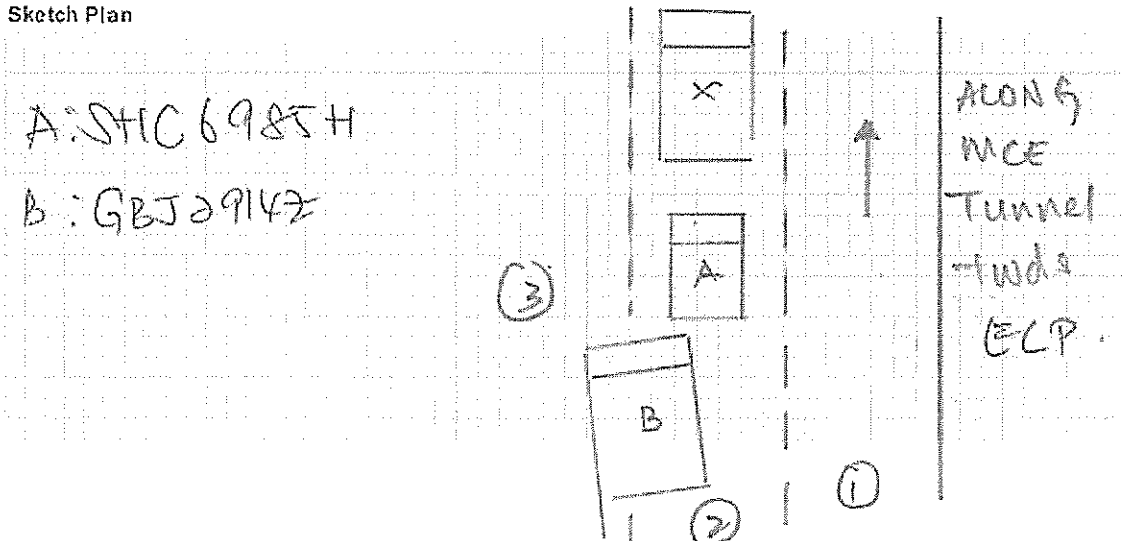
*[Signature]*

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 sketch.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

x [Signature]

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

16 APR 2021

[Signature]

Witnessed by Reporting Centre Personnel

Describe Circumstance of the Accident.

ON 15/04/2021 @ 17:55HRS, I WAS DRIVING MY TAXI ( SHC 6985 H)  
TRAVELLING ALONG MCE TUNNEL TOWARDS ECP (AFTER FORT ROAD EXIT) WITH A  
PASSENGER ONBOARD, ON LANE 2.

I SLOWED 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 ( GBJ 2914 Z - TOYOTA ) WHICH  
WAS BEHIND ME, HAD COLLIDED ONTO THE REAR OF MY TAXI.

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

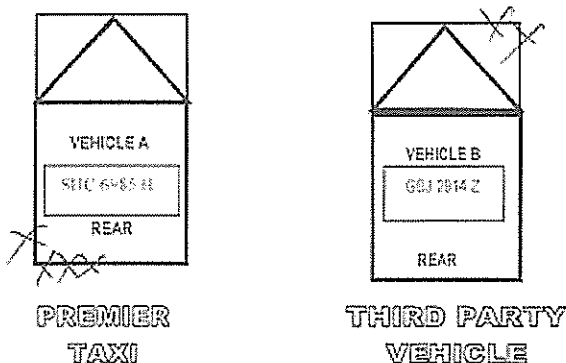
NO INJURY INVOLVED.

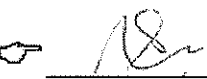
NO AMBULANCE AT SCENE.

VEHICLE B HAD A PASSENGER ONBOARD.

\*SCENE PHOTOS & VIDEO FOOTAGE CAPTURED

DAMAGES FOUND ON VEHICLE A & VEHICLE B



 S1130381A  
Driver's Signature & NRIC Number  
Friday, April 16, 2021 @ 10:39:54 AM

(attended by )

Text size + -

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

Log Date/Time:	08 Jan 2016 / 08:30:43	Receipt No.:	AACCK001-AX239-160108-000005
Asset Type:	Vehicle	Transaction Amount:	\$68,666.00
Asset ID:	SHC6985H	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20160108083043359956		
Vehicle No.:	SHC6985H		
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:	08 Jan 2016		
Original Registration Date:	08 Jan 2016		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414MF5658267		
Engine No.:	D4FDFH314415		
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:	2015		
Open Market Value:	\$22,299.00		
Minimum PARF Benefit:	\$13,931.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	08 Jan 2016 08:30:43		
COE No.:	2016010801003460R		
COE Expiry Date:	07 Jan 2024		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$45,307.00		
Lifespan Expiry Date:	07 Jan 2024		


## INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

GBJ2914Z

Date of Accident

15/04/2021 

Reset

## % RESULT &amp; RECEIPT

## TP Insurer Enquiry

Insurance ..... AIG Asia Pacific Insurance Pte....

Period of Insurance ..... 11/03/2021 - 10/03/2022

Requested By ..... LIEW HAI LEONG (PREMIER AU...

Requested Date ..... 16/04/2021 13:23

## 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**



# PREMIER AUTOMOTIVE SERVICES PTE LTD

23 CHANGI SOUTH AVENUE 2 #01-02

SINGAPORE 486443

TEL: 65446676 / 65446689 FAX: 62141511

CO. REG:200707743D GST REG:200707743D

16-Apr-21

## ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6985 H

1 pc	Bootlid emblem	\$	27.00
1 pc	Bootlid CRDi	\$	29.00
1 pc	Boot lid lower garnish	\$	290.00
1 pc	Rear bumper	\$	696.00
1 pc	Rear bumper lower cover	\$	206.00
2 pcs	Rear bumper side bracket o/s & n/s @ \$29.00	\$	58.00
1 pc	Rear bumper inner sponge	\$	114.00
1 pc	Rear bumper reinforcement	\$	607.00
2 pcs	Rear bumper stay o/s & n/s @ \$53.00	\$	108.00
2 pcs	Rear bumper reinforcement lower bracket @ \$18.00	\$	36.00
2 pcs	Rear bumper reinforcement upper bracket @ \$18.00	\$	36.00
2 pcs	Rear bumper reflector n/s & o/s @ \$46.00	\$	92.00
1 pc	n/s tail lamp @\$421.00	\$	421.00
1 pc	n/s reflector @\$350.00	\$	350.00
		\$	3,070.00
	Less 10%	\$	307.00
		\$	2,763.00

### S/NETT

1 set	Rear bumper clips	\$	48.00
1 set	Bootlid lower garnish clips	\$	60.00
1 set	Bootlid stickers	\$	100.00
1 set	Rear n/s fender inner shield clips	\$	28.00
1 set	Reverse sensor	\$	280.00
1 pc	Rear bumper top protector	\$	80.00
1 pc	Rear no. plate with casing	\$	50.00

16-Apr-21

**ESTIMATE REPAIR BILL FOR KIA OPTIMA REGN NO: SHC 6985 H**

1 pc	Sealant	\$	50.00
	Sundry	\$	50.00
	To dismantle / replace reverse sensor to new bumper and reset to the same	\$	120.00
	To dismantle / refit the inner garnishes, inner linings, inner trims, cushion seat, carpet, etc to facilitate repairs.	\$	180.00
	To labour charge for dismantle and renew the accident damaged parts. To heat/weld, cut-off the the end panel, floorboard panel, rear n/s & o/s fenders. Including knock-out, straighten, repair, reshape and adjust of the rear panel		\$800.00
	To putty and spray painting on bootlid, bootlid lower garnish, rear bumper, end panel,	\$	800.00
	To apply rustproofing on the repaired and replaced panels.	\$	150.00
		<u>\$</u>	<u>5,559.00</u>

( ALL THE REPAIR COSTS ARE SUBJECTED TO GST )

***THE ABOVE ESTIMATED COST OF REPAIR DO NOT INCLUDE ANY UNFORESEEN DAMAGES.***