

# 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	18/04/2021 21:42 (SGT)
Date of Accident	17/04/2021 15:50 (SGT)
Exact Location of Accident	Changi Village Rd, Singapore
Additional Location Information	
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD7066Z
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-84810075
Alternative Phone No	(Office) +65-65508768

### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ioniq
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 - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1598

### INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419138
Cover Note Number	

### DRIVER

Name of Driver	NUR LATIFAH BINTE YAHYA
NRIC No	SXXXX2961

Date Of Birth	18/11/1979
Occupation	Outdoor
Date Of Driving Pass	12/03/2009
Driving experience	12 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-84810075
Alt. Phone Number	
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 195A PUNGGOL ROAD #06-500
Address complement	
Postcode	821195
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 - Change/cross lane
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)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	UNKNOWN
Gender	Male

#### PASSENGER 2

Name	UNKNOWN
Gender	Male

#### PASSENGER 3

Name	UNKNOWN
Gender	Female

#### PASSENGER 4

Name	UNKNOWN
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

I WAS TRAVELLING ALONG CHANGI VILLAGE WITH 4 TEENAGE PASSENGERS. MY TAXI IN THE 1ST LANE OUT OF 2 LANES. I NOTICED THAT VEHICLE B HALF PORTION ALREADY AT THE 2ND LANE. I STOP MY TAXI TO GIVE WAY BUT SUDDENLY VEHICLE B REVERSING AND COLLIDED WITH MY TAXI. BOTH VEHICLES HAVE DAMAGES. NO INJURY INVOLVED, HOWEVER MY PASSENGER THAT SAT AT FRONT SEAT GOT SHOCKED AS THE VEHICLE B HEADLAMP GLASS BROKE ON HIS VIEW. WE PARKED ASIDE TO TAKE PHOTOS AND EXCHANGE PARTICULARS.

## 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	SD CARD WITH WORKSHOP
Was there any audio recorded?	No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN3961L
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Commercial vehicle
Name of Driver	MAH CHOO SOON
NRIC No	SXXXX622J
Contact Number	
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

## 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	SD CARD WITH WORKSHOP
Was there any audio recorded?	No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN3961L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MAH CHOO SOON
NRIC No	SXXXX622J
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



**SKETCH PLAN****IMPORTANT NOTICE**

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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' law firms/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' law firms/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 firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

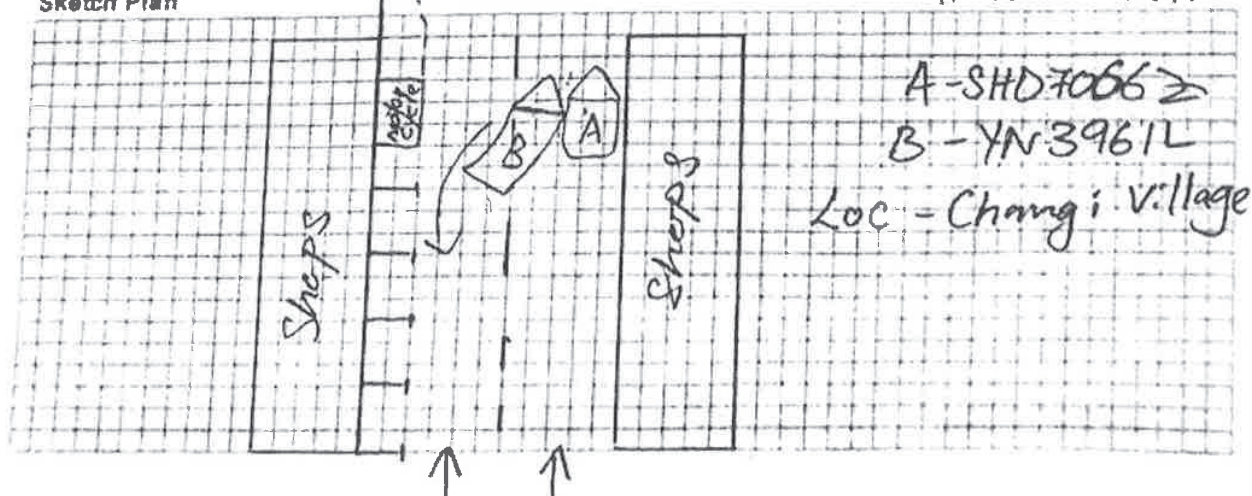
COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel *Ad Hashim*  
11:32am 18/4/21

Sketch Plan



## Describe Circumstances of the Accident

I was travelling along Changi Village with 4 teenage passengers. My taxi in the 1st lane out of 2 lanes. I noticed the vehicle B half portion already at the 2nd lane. I stop my taxi to give way but suddenly vehicle B reversing and collided with my taxi. Both vehicles has damages. No Injury involved, however a my passenger that sit at front seat got a shocked as the vehicle B headlamp glass break on his view. We parked aside to took photos and exchange particular.

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## Declaration

We declare the foregoing particulars are true in every respect.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

11:32am 18/4/21



