SP0R216A0002 / PREMIUM AUTOMOBILES PTE LTD [408699]
ENTRY DATE & TIME: 10/06/2021 16:25 (SGT)
SUBMITTED BY: NADIA HANI
VERSION: 1 (10/06/2021 16:25 (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 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	10/06/2021 16:25 (SGT)
Date of Accident	09/06/2021 14:10 (SGT)
Exact Location of Accident	Woodlands, Singapore
Additional Location Information	WOODLANDS AVENUE 10, CLOSE TO JUCTION OF ADMIRALTY ROAD WEST
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM5766S

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LIEBHERR-SINGAPORE PTE LTD
Company Reg No	0XXXXXXXX9-W.
Email Address	ANGIE.TAN@LIEBHERR.COM
Mobile Phone No	(Phone) +65-62652305
Alternative Phone No	(Office) +65-62652305

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1795

INSURANCE COMPANY

Name of Insurance Company	Allied World Assurance Company, Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	BVFPSB0006822109
Cover Note Number	-

DRIVER

Name of Driver	KIRSTEN ZARCONE

Passport No/FIN	GXXXX575M
Date Of Birth	23/06/1966
Occupation	Indoor
Date Of Driving Pass	20/11/2018
Driving experience	2 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91708346
Alt. Phone Number	-
Email Address	KIRSTEN.ZARCONE@GESS.SG
Address	140 QUEENS AVE
Address complement	-
Postcode	758595
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Paid Driver
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	Side Swipe
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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

THE ACCIDENT HAPPENED ON 9/6/2021 AT ABOUT 2:10PM AT THE JUNCTION OF WOODLANDS AVE 10 AND ADMIRALTY ROAD WEST. I WAS DRIVING SLOWLY (HAZARD LIGHT ON) ON THE MOST RIGHT LANE DUE TO ENGINE FAULT. OUT OF SUDDEN, A LORRY ON LEFT CUT INTO MY LANE AND COLLIDED INTO MY VEHICLE. I QUICKLY MAKE AN ACCIDENT SCENE VIDEO AND SHOWING THAT LORRY CUT INTO MY LANE.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP3293X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	-

Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Lonpac Insurance Bhd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.

VIEMERR-SINGAPORE PTE LTD

Policyholder's Signature / Date & Time

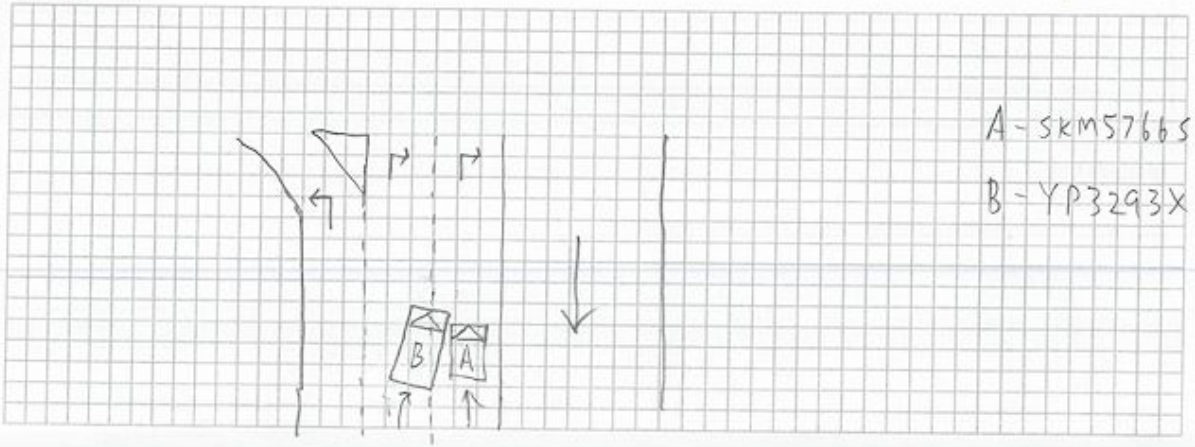
10.6.21 2.30pm

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

PREMIUM AUTOMOBILES PTE LTD

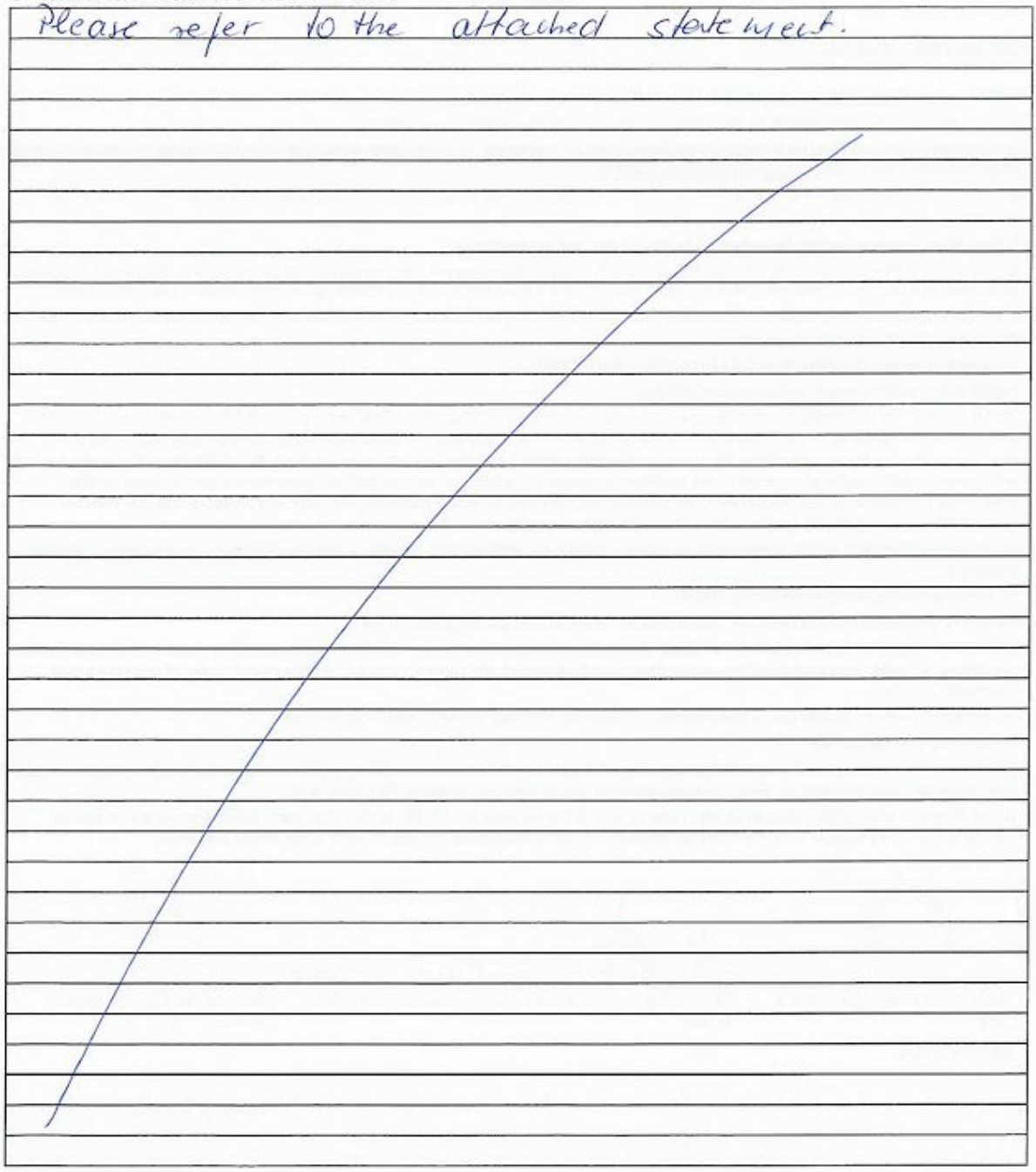
Witnessed by Reporting Centre Personnel Tony Foong

Sketch Plan



Describe Circumstances of the Accident

Please refer to the attached statement.



Declaration

I/We declare the foregoing particulars are true in every respect.

LIEBHERR-SINGAPORE PTE LTD

Policyholder's Signature / Date & Time

10.6.21 2.25pm

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

PREMIUM AUTOMOBILES PTE LTD

Witnessed by Reporting Centre Personnel Tony Foong

The accident happened on 9/6/2021 about 2:10pm at the junction of Woodlands Ave 10 and Admirality Road West. I was driving slowly (hazard light On) on the most right lane due to engine fault.

Out of sudden, a lorry on left lane cut into my lane and collided into my vehicle.

I quickly make a accident scene video and showing that lorry cut into my lane.

10.6.21 2.25pm

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9

IMAGES #10

IMAGES #11

IMAGES #12

IMAGES #13

IMAGES #14

IMAGES #15

IMAGES #16

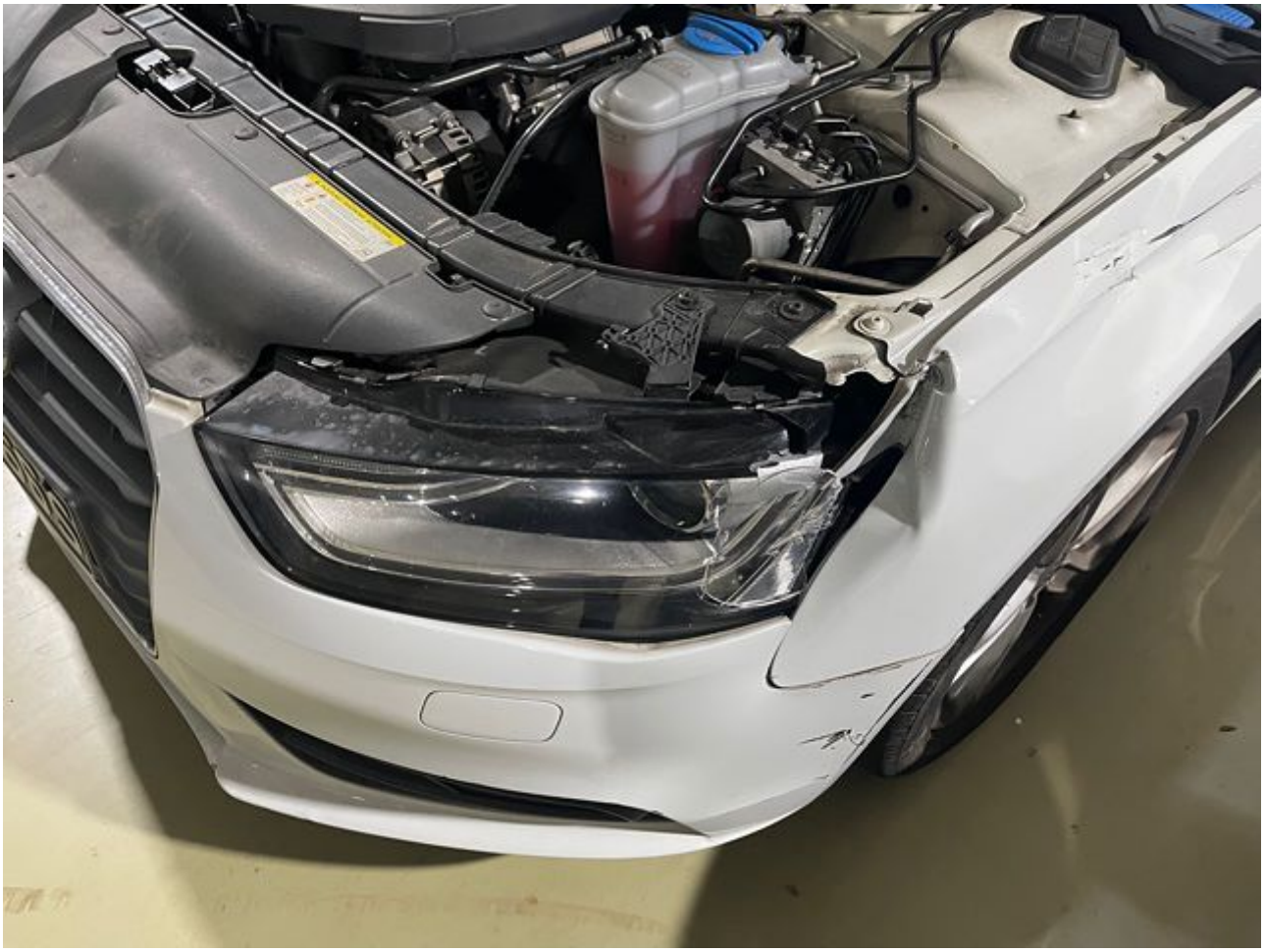
IMAGES #17

IMAGES #18

IMAGES #19

IMAGES #20

IMAGES #21



IMAGES #22

IMAGES #23

IMAGES #24

IMAGES #25

IMAGES #26

IMAGES #27

IMAGES #28

IMAGES #29

IMAGES #30

IMAGES #31

IMAGES #32

IMAGES #33

IMAGES #34


Typ B8
2 - 1065kg
1 - 1065kg
3590kg
2020kg
WAUZZZ8K3EA103354
AUDI AG
CJEB6692
012014
WAUZZZ8K3EA103354

IMAGES #36

IMAGES #37

IMAGES #38