

ASS. REQ. BY:

Steve

CS/CT. 21006710/EUC

ASSIGNMENT

From: Date:

Estimated Cost:

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: SMQ 9431L

at Workshop m/s PREMIUM AUTOMOBILES

Insured:

Policy No. DMPCSNAA00026022100

Claims No. SNM21D203178/C01

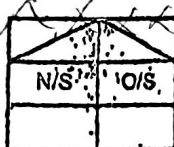
Sum Insured: Excess: 0

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Est. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 18 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SMQ 9431L

Yr Regn: 11/12/19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Audi A1

c.c. 999

Colour:

Yellow

A/C: Insured / Std / NI / N

Sp. Reading

37148

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

WM 226187 LR 006217

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Locked / Burnt or

Brakes: In order / Jammed / Locked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

215/45 R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal:

S

mm

R/Bal:

S

mm

U/Bal:

S

mm

U/Bal:

S

mm

D.O.A.

2/6/21

D.O.A.

16/6/21

Survey held at

Premium Automobiles

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	AMV - ISS K
16/6/2021 @ 12.51pm	Revert to Jenny Lew via Merimen.
17/6/2021 @ 1.16pm	Chew So Chow informed C/A via Merimen.
17/6/2021 @ 3.07pm	Informed Kee Siang C/A & ex:\$0/- by email.
	Confirmed P/P \$43001.20, 18 repair days.
	(RED \$10141.80; 19%)

File/Time, File, Pass to: ☐ : Prel. Report

22/9 TYPIST ☐ : Final Report

File/Time, File Return to:

Days Of Repair: 18

Resurvey No. of Trip: 2

Survey Fee:

Transportation

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

\$ + RS \$

Photos

Others

TOTAL

Work Form: MER-OD

Rep. Sum / L.P. / \$43001.20

PREMIUM AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/TP/0480/2021/KS
DATE : 14-Jun-21
WIP : 30191

VEHICLE IN WORKSHOP. PLEASE ARRANGE SURVEY ON 15/6/2021

CHINA TAIPING INSURANCE (SG) PTE LTD

105 CECIL STREET

#19-00 THE OCTAGON

SINGAPORE 069534

Attn: Motor Claims Dept

Tel: 6389 6541 - Fax: 6224 7175

OWNER'S NAME : KOH BOON HOU, ALVIN
ADDRESS : BLK 101 HOUGANG AVENUE 1
#07-1161
SINGAPORE 530101
TELEPHONE : HP +65 91090354
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : DMPCSNA00026022100
VEHICLE NO : SMQ 9431 L
MODEL CODE : A1 SB ADVANCED 1.0 TFSI
MODEL YEAR : 11/12/2019
ENGINE NO : DKJ 043809
CHASSIS NO : WAUZZZGB1LR006217
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 2-Jun-21
PLACE OF ACCIDENT : CTE TOWARD CITY

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAJ@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE. SMQ 9431 L

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND REINSTALL FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR. HEADLIGHT WASHER ASSY.	S/N \$ 360.00	/
2	TO REMOVE AND TRANSFER BOTH HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 700.00	/
3	TO REMOVE AND RENEW AIRCON CONDENSER, ADDITIONAL RADIATOR, RADIATOR. CHECK ELECTRICAL FANS AND CONTROL UNIT. PRESSURISE COOLING SYSTEM. TO CARRY OUT VACUUM AND REGAS.	S/N \$ 1,200.00	/
4	TO RENEW AIR INTAKE MANIFOLD AND OTHER ENGINE COMPONENTS.	S/N \$ 980.00	?
5	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET BOTH FRONT FENDER AND BOTH HEADLIGHT. RENEW FRONT LOCK CARRIER AND ALIGN TO POSITION. TO REPAIR BOTH FRONT FENDER TOP SUPPORTS. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL REMOVED PARTS	7 x 700 \$ 6,300.00	4900
6	TO RESPRAY FRONT BUMPER, BOTH FRONT FENDER, HINGES, BOTH FRONT FENDER TOP SUPPORTS, BOTH AND BOTH FRONT DOOR. <i>SPRAY - 1 (RM)</i>	5 x 700 + 100 + 50 \$ 6,800.00	3650
7	TO REMOVE AND REINSTALL FRONT BUMPER LOWER SPOILER.	S/N \$ 280.00	/
8	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	/
TOTAL LABOUR CHARGES		: \$ 16,812.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMQ 9431 L

		DAMAGED PARTS & PRICES			
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
1	FRONT BUMPER / BR	1	\$	1,634.00	
2	FRONT BUMPER FIXING PARTS	1	\$	137.00	
3	FRONT BUMPER SPOILER LH / RH	2	\$	200.00	
4	FRONT BUMPER AIR GUIDE GRILLE LH / RH BR	1	\$	422.00	
5	FRONT BUMPER GRILLER - CENTER	1	\$	196.00	
6	FRONT BUMPER CLOSING ELEMENT	1	\$	167.00	
7	RADIATOR GRILLE / BR	1	\$	926.00	
8	FRONT BUMPER TOP MOUNT BRACKET	1	\$	161.00	
9	FRONT BUMPER REINFORCEMENT BEAM	1	\$	723.00	
10	FRONT FOAM FILLER PIECE / BR	1	\$	118.00	
11	FRONT BUMPER TOP COVER / BR	1	\$	123.00	
12	FRONT BUMPER GUIDE SECTION LH / RH	2	\$	214.00	
13	FRONT BUMPER GUIDE PROFILE LH / RH	2	\$	72.00	
14	"CAUTION" SIGN STICKER /	1	\$	14.00	
15	"AC" STICKER /	1	\$	19.00	
16	HORN LH	1	\$	137.00	
17	HORN RH	1	\$	130.00	
18	HORN BRACKET LH	1	\$	41.00	
19	HORN BRACKET RH	2	\$	31.00	
20	FRONT FENDER LH / RH / DD	2	\$	1,956.00	
SUB TOTAL SPARE PARTS			\$	7,421.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
 SPARE PARTS ARE SPECIAL NETT.

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				DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
21	FRONT FENDER BRACKET LH / RH ✓ BT	2	\$	72.00	
22	FRONT FENDER BRACKET LH / RH ✓	2	\$	28.00	
23	FRONT FENDER BRACKET LH / RH ✓	2	\$	116.00	
24	FRONT FENDER BRACE LH / RH ✓	2	\$	108.00	
25	BONNET ✓ DJ	1	\$	2,282.00	
26	BONNET HINGE LH / RH ✓ BT	2	\$	124.00	
27	BONNET STRIKER LH / RH ✓ BT	2	\$	198.00	
28	BONNET ATTACHMENT PART X	1		TBC	
29	BONNET IMPACT PROTECTION LH / RH ✓ NCC	2	\$	62.00	
30	BONNET IMPACT PROTECTION CENTER ✓ NCC NCC	1	\$	31.00	
31	BONNET SOUND ABSORBER ✓ CR4	1	\$	219.00	
32	BONNET GASKET ✓ NCC	1	\$	93.00	
33	BONNET BOWDEN CABLE CENTER ✓	1	\$	84.00	
34	BONNET BOWDEN CABLE LH / RH ✓	2	\$	58.00	
35	BONNET LOCK WITH MICRO-SWITCH LH / RH ✓	2	\$	427.00	
36	BONNET LOCK WITH MICRO-SWITCH CONNECTOR LH / RH ✓	2	\$	26.00	
37	BONNET RELEASE LEVER ✓	1	\$	14.00	
38	BONNET RELEASE CABLE COVER ✓	1	\$	10.00	
39	BONNET RELEASE CABLE ✓	1	\$	47.00	
40	PLENUM CHAMBER COVER X	1		TBC	
SUBTOTAL SPARE PARTS			:	\$	3,999.00

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			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
41	LED HEADLIGHT LH / RH ✓ <i>OR</i>	2	\$ 4,288.00	<i>* 2 = 8576</i>
42	LED HEAT SINK LH / RH ?	2	\$ 1,432.00	
43	LED HEADLIGHT POWER MODULE LH / RH ?	2	\$ 1,516.00	
44	LED HEADLIGHT BREATHER HOSE LH / RH ?	2	\$ 60.00	
45	LED HEADLIGHT LIFT CYLINDER LH / RH ?	2	\$ 284.00	
46	LIFT CYLINDER HOSE ?	1	\$ 59.00	
47	WINDSCREEN WASHER PUMP ?	1	\$ 125.00	
48	WASH WATER RESERVOIR ✓ <i>CR4</i>	1	\$ 189.00	
49	WASH WATER RESERVOIR NECK ?	1	\$ 58.00	
50	LOCK CARRIER ✓ <i>DD</i>	<i>12</i>	\$ 152.00	<i>\$ 1,272</i>
51	LOCK CARRIER BRACE LH / RH UPPER ✓ <i>DD</i>	<i>22</i>	\$ 152.00	
52	A/C CONDENSOR ✓ <i>DD</i>	1	\$ 503.00	
53	A/C REFRIGERANT LINE ?	1	\$ 340.00	
54	A/C REFRIGERANT HOSE ?	1	\$ 261.00	
55	OUTSIDE TEMPERATURE SENSOR ?	1	\$ 59.00	
56	ADDITIONAL RADIATOR ✓ <i>DD</i>	1	\$ 931.00	
57	RADIATOR ✓ <i>DD</i>	1	\$ 931.00	
58	RADIATOR AIR GUIDE <i>BR</i> (LH / RH)	<i>12</i>	\$ 76.00	
59	RADIATOR SEALING STRIP LH / RH ?	2	\$ 62.00	
60	RADIATOR RUBBER BUSH LH / RH UPPER ?	2	\$ 82.00	
SUBTOTAL SPARE PARTS			\$ <u>11,560.00</u>	15,848

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMQ 9431 L

			DAMAGED PARTS & PRICES		REMARKS
S/N	PARTS DESCRIPTION	QTY	S/NETT		
61	RADIATOR RUBBER BUSH LH / RH LOWER	2	\$	19.00	
62	RADIATOR COOLANT	6	\$	269.00	
63	RADIATOR FAN	1	\$	1,199.00	
64	AIR INTAKE AIR GUIDE	1	\$	53.00	
65	AIR INTAKE AIR GUIDE	1	\$	42.00	
66	INTAKE MANIFOLD PIPE	1	\$	139.00	
67	AIR FILTER	1	\$	2,745.00	
68	WATER DRAINAGE HOSE	1	\$	33.00	
69	INTAKE MANIFOLD	1	\$	666.00	
70	INTAKE MANIFOLD SEAL	1	\$	14.00	
71	INTAKE THROTTLE VALVE	1	\$	754.00	
72	INTAKE THROTTLE VALVE SEAL	1	\$	14.00	
73	INTAKE THROTTLE VALVE O-RING	1	\$	18.00	
74	RETAINING BAR	1	\$	15.00	
75	FRONT WHEEL HOUSING LINER LH / RH	2		TBC	
76	FRONT WHEEL HOUSING LINER ATTACHMENT PARTS	2	\$	69.00	
77	FRONT NO PLATE WITH HOLDER	S/N	\$	100.00	
78	SUNDRIES	1	\$	300.00	
TOTAL SPARE PARTS			:	\$	25,429.00 \$33,717
TOTAL LABOUR CHARGES			:	\$	16,812.00
GRAND TOTAL			:	\$	40,241.00 \$50,529

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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME :
SURVEYED DATE :
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS :

Steve (LKK) 16/6/21, 9.30 am
00-121 AL
EXCESS-?
10 days
By BCL by

PLEASE NOTE :

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT

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 Authoured 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 02/06/2021 18:36 (SGT)
Date of Accident 02/06/2021 11:07 (SGT)
Exact Location of Accident Singapore
Additional Location Information CTE TOWARD CITY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMQ9431L
INSURED/POLICYHOLDER
Is company? No
Name Of Registered Owner KOH BOON HOU,ALVIN(XU WENHAO)
NRIC No SXXXX082Z
Email Address akcl2037@gmail.com
Mobile Phone No (Phone) +65-91090354
Alternative Phone No +65-91090354

VEHICLE PARTICULARS

Manufacturer Audi
Model A1 SB ADVANCED 1.0 TFSI S TRONIC
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? Yes
Vehicle Category Private car
Transmission Auto
CC 999

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNA00026022100
Cover Note Number 30/1/21-29/1/22

DRIVER

Name of Driver KOH BOON HOU,ALVIN(XU WENHAO)
NRIC No SXXXX082Z

Date of Birth	25/04/1985
Occupation	Indoor
Date of Driving Pass	09/01/2008
Driving experience	13 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) 465-91090354
Alt. Phone Number	465-91090354
Email Address	skel2937@gmail.com
Address	BUK 1011401/GAING AVE 1 #07-1161
Address complement	"
Postcode	530101
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	"
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	7
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	CHERYL
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

ACCIDENT OCCURED ALONG CTE TOWARDS CITY ON THE EXTREME RIGHT LANE. UPON NOTICED M/CAR(B) BRAKED AND CAME TO A STOP. I ALSO FOLLOW TO BRAKE TO STOP BEHIND. HOWEVER, I COULD NOT STOP IN TIME AND COLLIDED ONTO THE REAR OF M/CAR(B). I CAME DOWN AND REALIZED I AM INVOLVED IN A CHAIN ACCIDENT INVOLVING 7 VEHICLES INCLUDING MINE. NO INJURIES ON ANYONE. ALL PARTIES EXCHANGED PARTICULARS. I THEN ARRANGED MY VEHICLE TO TOW TO THE WORKSHOP.

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

Vehicle Registration Number	SMP5790G
Vehicle Manufacturer	"
Vehicle Model	"

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ASTON
NRIC No	-1
Contact Number	(Phone) +65-91701122
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGY5647K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ANG JIONG SONG
NRIC No	SXXXX941A
Contact Number	(Phone) +65-97530435
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMQ2484E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHUA KOK NENG JOE
NRIC No	SXXXX837E
Contact Number	(Phone) +65-96463825
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SKA1748J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MOHD YAHDI BIN ALI
NRIC No	SXXXX626E
Contact Number	(Phone) +65-87292264
Address	-
Address complement	-

Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 6

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

SLB438T
-
-
-
-
Private car
TAN ALLEN
SXXXX358Z
(Phone) +65-97335640
-
-
-
-
-
-
-
-

DETAILS OF OTHER VEHICLE PROPERTY 6

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

EM5599D
-
-
-
-
Private car
KELVIN LIM LEE HIAN
SXXXX879H
(Phone) +65-96348844
-
-
-
-
-
-
-

SKETCH PLAN

IMPORTANT NOTICE

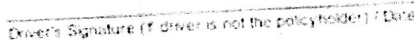
1. Please report correctly the details of the accident to speed up the claim process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation is a violation of material fact and allows insurers and 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. 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.

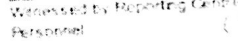
8. Consent under the Personal Data Protection Act (PDPA)

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 insurers who have insured vehicle(s) involved in this accident (all insurers who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firm, 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 related 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 making 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 my 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 firm, 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/are be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firm), which may be used 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

Sketch Plan

PLEASE
TURN
OVER