SS1I21770002 / SPECIALISTS MOTOR PTE LTD ENTRY DATE & TIME: 07/07/2021 17:30 (SGT) SUBMITTED BY: Tham HL VERSION: 1 (07/07/2021 17:30 (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 <u>completed by the Policyholder and/or the Authorised Driver</u>

 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

07/07/2021 17:30 (SGT) 07/07/2021 12:22 (SGT) Near 6 Figaro Gardens, Singapore 454981 FIGARO GARDENS Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SML95J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address Mobile Phone No

Alternative Phone No

TAN SZE SZE, SUZIE(CHEN SISHI, SUZIE)

SXXXX445B

suzie.tan@gmail.com (Phone) +65-96614806

+65-96614806

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Porsche Macan

Private use

Yes

1984

Private car Auto

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number

Cover Note Number

AXA Insurance Pte Ltd Comprehensive

Nο

GA474608/1

DRIVER

Name of Driver NRIC No

TAN SZE SZE, SUZIE(CHEN SISHI, SUZIE) SXXXX445B



Date Of Birth 05/05/1972 Occupation Indoor Date Of Driving Pass 22/05/1992 Driving experience 29 YEARS AND 2 MONTHS Gender Female Mobile Number (Phone) +65-96614806 Alt. Phone Number +65-96614806 **Email Address** suzie.tan@gmail.com Address 1 EVERGREEN AVUE Address complement Postcode 168917 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Yes Vehicle Registration Number of Other Vehicle Owned by Driver SFZ95T Insurance Company of Other Vehicle Owned by Driver China Taiping Insurance (Singapore) Pte. Ltd. GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Major/Minor Rd Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 4 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name LIV RIEZEBOS Gender Female PASSENGER 2 JAZ RIEZEBOS Name Gender Female PASSENGER 3 Name RICA NG Gender Female DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG JALAN TUA KONG AND TURNED INTO FIGARO GARDENS. THERE WAS A CAR(SJE 9257 Y) PARKED ALONG THE ROAD. THERE WAS NO HAZZARD LIGHTS, REVERSE LIGHTS OR SIGNAL LIGHTS. I CHECKED THAT THE OPPOSIT SIDE IS CLEAR AND DROVE OUT TO PASS THE CAR. AT ABOUT HALF WAY, I HEARD A BANG AND UPON CHECKING, THE VEHICLE (SJE 9257 Y) HAD MOVED AND HIT THE SIDE OF MY CAR.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

Yes



SKETCH PLAN

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- 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 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:
- (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
- $(v) \ complying \ w \ ith \ applicable \ law \ \ in \ administering, \ processing, \ handling \ and/or \ dealing \ w \ ith \ my \ claims.$

(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 & Time 7777 23

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

F16ARO

GAR DENS

Witnessed by Reporting Centre Personnel

A: SML95J

B-STE 92574

Sketch Plan

Describe Circumstances of the Accident

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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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



Witnessed by Reporting Centre Personnel