Accident report SM08217C0003



## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

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  1. Please report <u>correctly</u> 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 3. Information provided must be as truthful and accurate as possible. Any witrul misrepresentation or witnoiding of material racts 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 aforesald.

## **ACCIDENT STATEMENT**

Date of Submission 12/07/2021 18:18 (SGT) Date of Accident 02/07/2021 20:50 (SGT) Exact Location of Accident 604 Sembawang Rd, Singapore 758459 Additional Location Information Country/State of Loss Singapore

**DETAILS OF OWN VEHICLE** Vehicle Registration Number SMP3807G INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner BIS MOTORING PTE LTD Company Reg No 2XXXXXX055D Email Address KEIFTAN@BISMOTORING.COM.SG Mobile Phone No (Phone) +65-86881311 Alternative Phone No (Office) +65-68963633 **VEHICLE PARTICULARS** Manufacturer ..... Renault Scenic 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 .... Private hire Auto 1461 INSURANCE COMPANY Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Type of Coverage ..... Comprehensive Fleet Policy .... Yes Policy Number ...... COI-SPMF1000000413-SMP3807G Cover Note Number DRIVER Name of Driver ABU BAKAR BIN SAINI NRIC No. SXXXX906E

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

I understand, acknowledge, agree and consent that:

- (a) My insurer , my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho 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
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to (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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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 ag

(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	Driver's Signature (If dri	er is not the policyholder) / Date	Witnessed by Paris
Sketch Plan	a line		Witnessed by Reporting Centre Personnel
Cambas A	e BA	Sembawang Road	A= SMP38079 B= SLK97712
		Janvon-G 1300	· · · · · · · · · · · · · · · · · · ·