SJ04218S0004 / JP Knights Pte Ltd ENTRY DATE & TIME: 28/08/2021 12:58 (SGT) SUBMITTED BY: Suria VERSION: 1 (28/08/2021 12:58 (SGT))

## SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- . Please report correctly the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Authorised Driver
   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.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of public and a surface of the second in the 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

28/08/2021 12:58 (SGT) 27/08/2021 16:30 (SGT) Upper Changi Rd N, Singapore TOWARDS UPPER CHANGI ROAD EAST Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SHC7660M

## INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No

**Email Address** Mobile Phone No Alternative Phone No CITYCAB PTE LTD 1XXXXX839G

fleetsafety@cdgtaxi.com.sg (Phone) +65-81233343 (Office) +65-65508768

## 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

Ae ioniq Private hire

Hyundai

No - Claiming third party

Taxi Auto 1580

## INSURANCE COMPANY

Name of Insurance Company Type of Coverage

**Policy Number** Cover Note Number AXA Insurance Pte Ltd ThirdPartyFireTheft

Yes

VFX/P2419140

## DRIVER

Fleet Policy

Name of Driver NRIC No

KOH GUAT BENG SXXXX344I



 Date Of Birth
 18/11/1953

 Occupation
 Outdoor

 Date Of Driving Pass
 11/10/1974

Driving experience 46 YEARS AND 10 MONTHS

Gender

Mobile Number (Phone) +65-81233343

Alt. Phone Number

Email Address fleetsafety@cdgtaxi.com.sg

Address BLK 802 WOODLANDS STREET 81 #05-73

Address complement -

Postcode 730802 Is the driver the policyholder? No

If No, Relationship of the Driver with the Insured

Hirer

Page Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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

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)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

PASSENGER 1

Name PASSENGER
Gender Male

#### 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

ON 27/08/2021 AT ABOUT 16:30HRS, I WAS DRIVING VEHICLE A ( SHC7660M) ALONG UPPER CHANGI ROAD NORTH TOWARDS UPPER CHANGI ROAD EAST. WHILE MAKING LEFT TURN, I NOTICED VEHICLE B ( PC1223L) WHICH WAS ON MY RIGHT LANE ALSO MAKING LEFT AND IT WAS TOO NEAR TO MY VEHICLE. SO I SLOWLY STOP VEHICLE WHEN VEHICLE B MAKE A SHARP TURN CUT INTO MY LANE AND GRAZED VEHICLE A FRONT RIGHT SIDE. NOBODY WAS INJURED.

## 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 FILE IS NOT SUITABLE

Was there any audio recorded?

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number PC1223L
Vehicle Manufacturer -



Vehicle Model		
Vehicle Variant		•
Vehicle Colour		•
Vehicle Category		•
Name of Driver		Commercial vehicle
NRIC No		CHONG YEW WAH
Contact Number		SXXXX869J
Address		(Phone) +65-87421410
Address complement		
Postcode		•
Insurance Company Name		 •
		-
Details of property damaged in ac		-
No. Of Passenger (Including Drive	or)	•
	-1)	-

## SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims proces
- This Form must be completed by the Policyholder end/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any within insrepresentation or withholding of material facts may atow insurance companies to repudiate policy (lability.
- 4. The issue and acceptance of this Formby 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 archeving 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)

funderstand, acknowledge, agree and consent that :

- (a) My insurer, myw orisinop 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) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "ineurors"), the insurers law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(6) of :
- (i) processing, handling and/or dealing with my daims 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;
- (M) administering my dains (including the mailing of correspondence, statements, involces, 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Witnessed by Reporting Centre Oriver's Signature (if driver is not the policyholder) / Date Policyholder's Signature / Date & 21 -18204 1 Sketch Plan A-LHC FLEDWA Upper Cherex B-DC (223L

# Describe Circumstances of the Academ ON 27/08/2021 AT ABOUT 16:30HRS, I WAS DRIVING VEHICLE A (SHC7660M) ALONG UPPER CHANGI ROAD NORTH TOWARDS UPPER CHANGI ROAD EAST. WHILE MAKING LEFT TURN, I NOTICED VEHICLE B ( PC1223L) WHICH WAS ON MY RIGHT LANE ALSO MAKING LEFT AND IT WAS TOO NEAR TO MY VEHICLE. SO I SLOWLY STOP VEHICLE WHEN VEHICLE B MAKE A SHARP TURN CUT INTO MY LANE AND GRAZED VEHICLE A FRONT RIGHT SIDE. NOBODY WAS INJURED.

Declaration

18104