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.

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 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 18/10/2021 12:37 (SGT) Date of Accident 16/10/2021 07:15 (SGT) Exact Location of Accident Upper Thomson Rd, Singapore Additional Location Information UPPER THOMSON ROAD TOWARD CITY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Nissan

Vehicle Registration Number YF7667C

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner MANDARIN AUTO PTE LTD Company Reg No 197500938G Email Address INBOX@MANDARINAUTO.COM.SG Mobile Phone No (Phone) +65-64536969 Alternative Phone No (Office) +65-64536969

VEHICLE PARTICULARS

Manufacturer

Model Cabstar Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 3153

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DMCPHQ21-000524 Cover Note Number 12/03/2021 TO 11/03/2022

DRIVER

Name of Driver **LIEW KWAI TANG** NRIC No. S6910198D

Date Of Birth 01/04/1969 Occupation Outdoor Date Of Driving Pass 20/02/2003 Driving experience 18 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-97884180 Alt. Phone Number Email Address INBOX@MANDARINAUTO.COM.SG Address BLK 483 ADMIRALTY LINK #13-23 Address complement Postcode 750483 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **DRIVER** Does Driver Own Other Vehicles? Nο 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 Collision - Head to Rear 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? 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? Nο PASSENGER 1 Name SJQ4590D 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 REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

SJQ4590D

Private car

Hvundai

Avante

Vehicle Category Accident report SA1821AI0001

Vehicle Model

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Variant
Vehicle Colour

Name of Driver	
Contact Number	
Address	
Address complement	
Postcode	-
Insurance Company Name	·····
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	<u>-</u>

SKETCH PLAN

ETI QA INSURANCE Vehide: YF7667C 18/10/2021

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

lunderstand, acknowledge, agree and consent that :

(e) 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 pessessed 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 "financial", the financial language is the process of the Allective Change and any relevant collectively referred to as the "insurers"), the insurers' law yers fixed 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;
- (II) carrying out end/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (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/mall 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.

Sketch Plan



Policyholder's Signature / Date &

Driver's Signature (if driver is not the policyholder) / Date 8. Timo

Witnessed by Reporting Centre Personnel

18/10/2021

Pate of accident: 16/10/2/ Time: 0715 Location: A Themson Rd -towards Cry Tiny Vehicle A: YE 766 7 C Vehicle B: SJQ 4549 D Vehicle C:
16/10/71 - 12 - 1 Thouse the towned The
ate of accident: Control of Time: Control of Location: A Provide Control of C
Ty Vehicle A: YE 766 +C Vehicle B: 33 Q 43 47 Vehicle S:
ETCH PLAN scribe Circumstances of the Accident
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I way drake on Thomas Rd toward Coy
when the front Vel2h storzed sudderly as The
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(2700 Jul 10/1 122 2000)
Therefore hit in to his sear.
Note: Please take note that your insurer have to days time frame for you to submit own damage claim under
Not own boards Wittel Categorist The Land Land Land Land
1 Gain ON 1402-06' SIN MING AD 100-14
tWe declare the foregoing particulars are true in every respect.
FEL: 6453 1900, 0133 300
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Davore Streeture (If driver is not the policyholder) / Date Witnesdad by Reporting Centre
Policyholder's Signature / Date & Personnel 18/10/25/21
Personnel 18/0/2021 Time 8. Time 18/10/2021
Personnel 18/0/2021 Time 8 Time 18/10/2021
Personnel 18/10/2521 Time 文華汽車私人有限公司 MANDARIN AUTO PTE LTD MANDARIN PRIVE
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Personnel 18/10/2021 Time 文華汽車私人有限公司 文華汽車和人有限公司



















