

# 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 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 .....	30/11/2021 12:06 (SGT)
Date of Accident .....	30/11/2021 09:55 (SGT)
Exact Location of Accident .....	Tampines Ave 2, Singapore
Additional Location Information .....	TAMPINES AVE 2 // TAMPINES ST 21 & TAMPINES ST 32
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SHB8344A
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	PREMIER TAXIS PTE LTD
Company Reg No .....	2XXXXX975H
Email Address .....	CLAIMS@PREMIERTAXI.COM
Mobile Phone No .....	(Phone) +65-91550072
Alternative Phone No .....	(Office) +65-62148880

### VEHICLE PARTICULARS

Manufacturer .....	Hyundai
Model .....	I30
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Employment
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Taxi
Transmission .....	Auto
CC .....	1600

### INSURANCE COMPANY

Name of Insurance Company .....	NTUC Income Insurance Co-operative Ltd
Type of Coverage .....	ThirdParty
Fleet Policy .....	Yes
Policy Number .....	5107202885-02
Cover Note Number .....	-

### DRIVER

Name of Driver .....	TEO SIEW GIOK
NRIC No .....	SXXXX475G

Date Of Birth .....	06/10/1962
Occupation .....	Outdoor
Date Of Driving Pass .....	20/02/1991
Driving experience .....	30 YEARS AND 9 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-98181809
Alt. Phone Number .....	-
Email Address .....	CLAIMS@PREMIERTAXI.COM
Address .....	BLK 286 #10-191
Address complement .....	TAMPINES ST 22
Postcode .....	520286
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 .....	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 .....	2
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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	PAX IN THE REAR SEAT (INDIAN - GRAB BOOKING)
Gender .....	Male

#### 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 ATTACH SKETCHPLAN & STATEMENT

#### 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

Vehicle Registration Number .....	SMV2220Z
Vehicle Manufacturer .....	Kia
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car

Name of Driver .....	TANG KAI JUN
NRIC No .....	TXXXX099A
Contact Number .....	(Phone) +65-97217998
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

## SKETCH PLAN

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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 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' lawyers/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 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



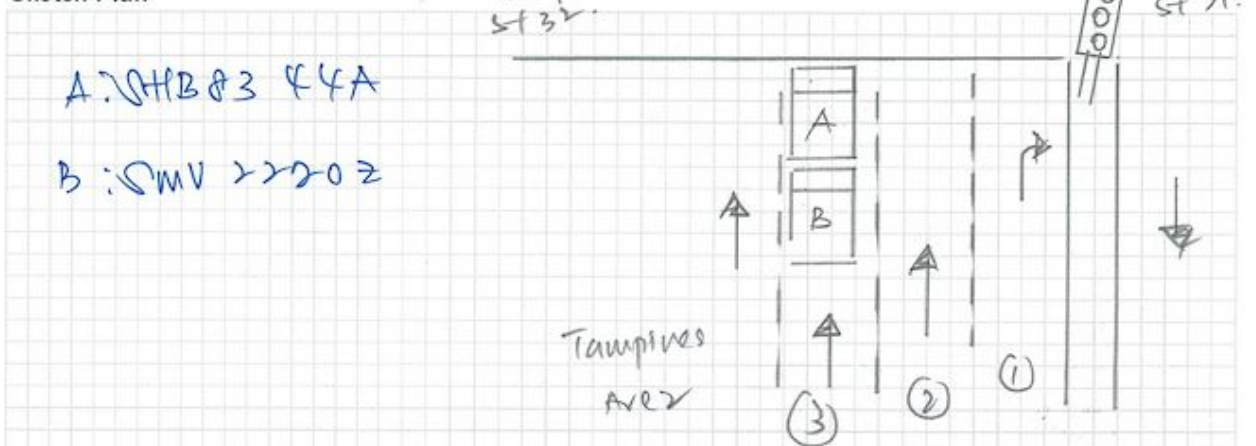
30 NOV 2021

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



Describe Circumstances of the Accident

Refer to attach statement

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

✓ 515394756

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

30 NOV 2021

Witnessed by Reporting Centre Personnel

## Describe Circumstances of the Accident.

ON 30/11/2021 @09:55HRS, I WAS DRIVING MY TAXI ( SHB 8344 A ) TRAVELLING ALONG TAMPINES AVE 2 AT THE TRAFFIC LIGHT JUNCTION OF TAMPINES ST 21 & TAMPINES ST 32 WITH A PASSENGER ONBOARD – ON LANE 3.

I SLOWED DOWN MY TAXI TO A COMPLETE STOP – AS TRAFFIC LIGHT TURNED RED BUT SUDDENLY I FELT AN IMPACT FROM THE REAR.

WHEN INSPECTED, I DISCOVERED THAT VEHICLE B ( SMV 2220 Z – KIA ) WHICH WAS BEHIND ME – HAD COLLIDED ONTO THE REAR OF MY TAXI.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE REAR PORTION & NO DAMAEGS TO VEHICLE B.

NO INJURY INVOLVED. NO AMBULANCE.  
NO PASSENGERS ONBOARD VEHICLE B.

\*SCENE PHOTOS & VIDEO FOOTAGE CAPTURED.

## DAMAGES FOUND ON VEHICLE A &amp; VEHICLE B



PREMIER  
TAXI



THIRD PARTY  
VEHICLE

  S1539475G

Driver's Signature & NRIC Number  
Tuesday, November 30, 2021 @ 11:05:48 AM

( attended by  )





