

SINGAPORE ACCIDENT STATEMENT

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

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

15/06/2021 16:28 (SGT) Date of Submission 14/06/2021 12:00 (SGT) Date of Accident Exact Location of Accident Upper Serangoon Rd, Singapore Additional Location Information UPPER SERANGOON TO BRADDELL ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

SLU5300Z Vehicle Registration Number

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner GRAB RENTALS PTE LTD

VEHICLE PARTICULARS

Honda Model Vezel

Vehicle Category Private hire Transmission Auto 1496 CC

INSURANCE COMPANY

India International Insurance Pte Ltd Name of Insurance Company

Comprehensive Type of Coverage

Fleet Policy

D21MFL0000447 Policy Number

Cover Note Number

DRIVER

Address

YONG YU YEN (YANG YOURAN) Name of Driver

S8029810B NRIC No.

APT BLK 299A COMPASSVALE STREET

#08-136 Address complement

SINGAPORE 541299 Postcode

Does Driver Own Other Vehicles?

GENERAL INFORMATION OF THE ACCIDENT

Collision - Head to Rear
Clear
No
No
Yes
2

CIRCUMSTANCES OF ACCIDENT

ON 14/06/2021 AT 1200HRS, AT THE SLIP ROAD OF UPP SERANGOON TO BRADDELL ROAD I LOOKED ON MY RIGHT TO ENSURE THE ROAD IS CLEAR BUT I DID NOT NOTICE VEH B ABOUT TO STOP AT THT STOP LINE. MY VEH A FRONT PORTION COLLIDED ONTO VEH B REAR PORTION. NO SERIOUS INJURY AND MY PASSENGER WAS FINE AFTER THE IMPACT.

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 NOT SUITABLE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLZ8974H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	UNG SOOK KIM
Insurance Company Name	

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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)

Lunderstand, 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) 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 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.

Policyholder's Signature / Date & Time Sketch Plan

Production Francisco Driver's Signature (illdriver is not the policyholder) / Date & Time Sketch Plan

Personnel

Describe Circumstances of the Accident

14062021 1200HRS AT THE SLIP ROAD OF UPP SERANGOON TO BRADDELL RD I LOOKED ON MY RIGHT TO ENSURE THE ROAD IS CLEAR BUT I DID NOT NOTICE VEH B ABOUT TO STOP AT THE STOP LINE.MY VEH A FRONT PORTION COLLIDED ONTO VEH B REAR PORTION.NO SERIOUS INJURY INVOLVE AND MY PASSENGER WAS FINE AFTER THE IMPACT.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reperting O



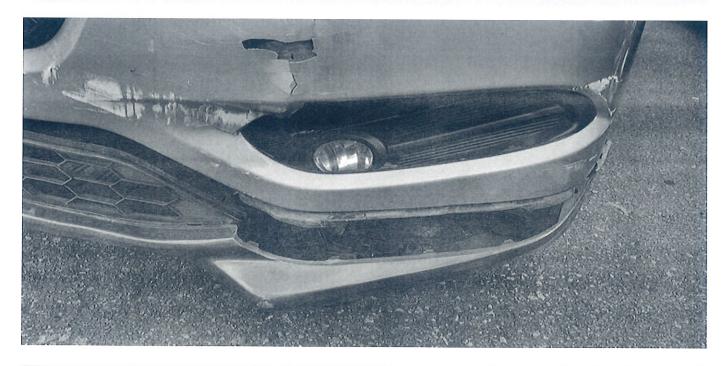


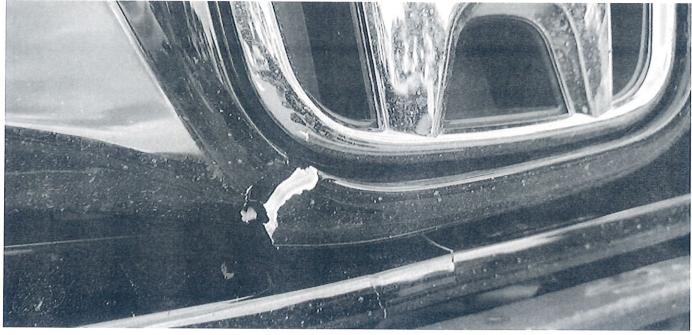






















OTHER DOCUMENTS



