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.

 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 24/01/2022 14:04 (SGT) Date of Accident 21/01/2022 14:30 (SGT) Exact Location of Accident Singapore Additional Location Information MOONBEAM WALK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJT3199S

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ABOI CAR RENTAL Company Reg No 53378618E **Email Address**

ABOICARACCIDENT@GMAIL.COM

Mobile Phone No (Phone) +65-98800332

Alternative Phone No +65-98800332

VEHICLE PARTICULARS

Manufacturer Toyota Model Corolla Variant Altis 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

Private use

No - Claiming third party

Private hire Auto

1600

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage ThirdPartyFireTheft

Fleet Policy

Policy Number 5113388789-02

Cover Note Number 20/08/2021 - 19/08/2022

DRIVER

Name of Driver TAN KIAN HO NRIC No S7316078B

Date Of Birth 03/05/1973 Occupation Outdoor Date Of Driving Pass 08/05/1992 Driving experience 29 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-86852127 Alt. Phone Number Email Address sgtankh73@gmail.com Address BLK 627 SENJA ROAD #14-186 Address complement Postcode 670627 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Hirer 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 Collided into Parked Vehicle 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? Nο 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 **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο 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? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number YN2641S

 Vehicle Negistration Number
 YN2041S

 Vehicle Manufacturer

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Commercial vehicle

 Name of Driver
 MUNIYASAMY SOUNDARA PANDIAN

 Passport No/FIN
 G6942776L

 Contact Number
 (Phone) +65-91326249

 Address

Address complement	-
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_

INCOME MOTOR SERVICE CENTRE		Report Date & Start Time:	24 01 2022 13:53
Report No; MT	D.O.A: 21/01/2022 Time: 14:30 hrs	Vehicle No. SJT3199S	Reporting Type:

SKETCH PLAN

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.
- 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>.
- 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.
- 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.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

ABOI CAR RENTAL

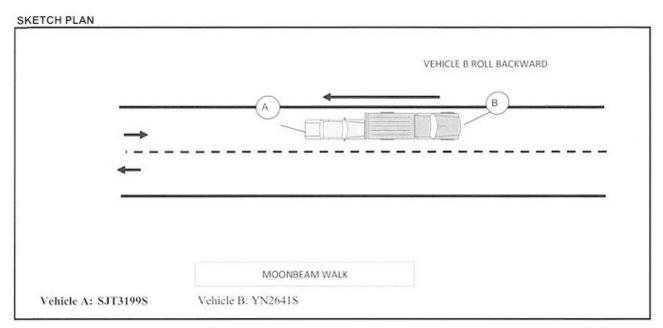
Reg No: 53378618E 81 TAGORE LANE #04-19 TAG A SINGAPONDITATION

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

24/01/22 / 13:53

Ganesh (S993561) Customer Care Executive Motor Service Centre

Witnessed by Reporting Centre Peronnel



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary parked at along the Moonbeaam walk behind of vehicle B. Awhile later vehicle B driver came to my client house and informed me that his vehicle rolled back into my vehicle front as the road was sloped. After which I assess the damage, took some photos and exchange particulars. The whole conversation between driver B and me was recorded in my phone. No one was injured in this accident.

Declaration

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

ABOI CAR RENTAL Reg No: 53378618E

81 TAGORE LANE #04-19 TAG A SINGAPORE 7875973:53

24/01/22 / 13:53

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

Ganesh (S993561) Customer Care Executive Motor Service Centre

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time

