

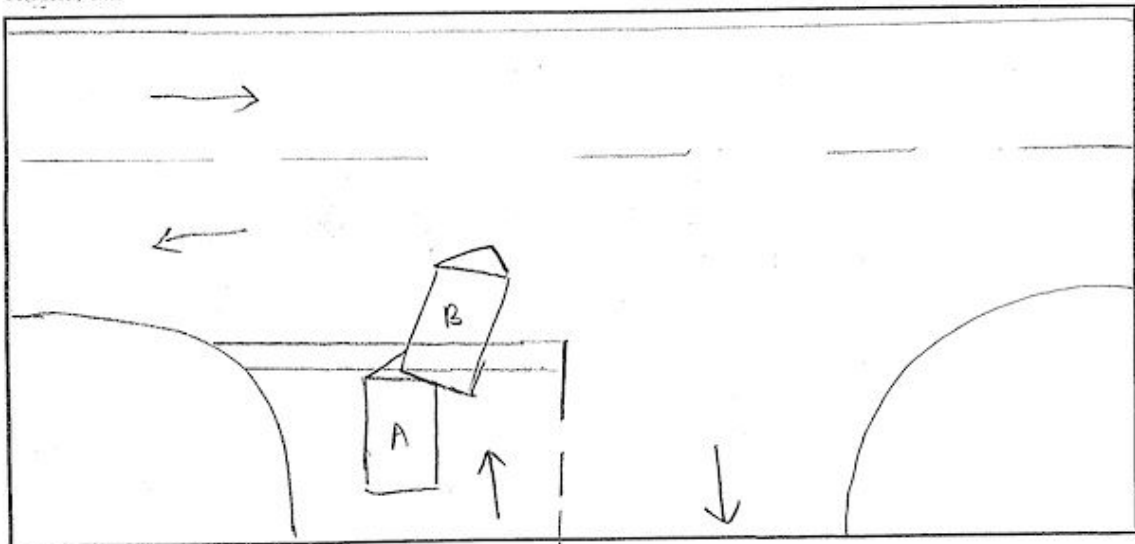
**SKETCH PLAN**

Insurer - Budget  
Direct  
Vch: SML 4411 D

**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. 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)**  
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.

**Sketch Plan**



**AH LIM MOTOR COMPANY**

(SIN MING BRANCH)

178, Sin Ming Drive, #05-12

Sin Ming Autocare, Singapore 575721

Tel: 6456 3687 Fax: 6456 3688

Witnessed by Reporting Centre

Personnel

21/01/2022

AH LIM MOTOR COMPANY

Policyholder's Signature / Date & Time

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

Date of accident: 21 Jan 2022 Time: 11.30am Location: Ang Mo Kio Industrial Park 2  
 My Vehicle A: SML4911D Vehicle B: GBL2964T Vehicle C: /

SKETCH PLAN

Describe Circumstances of the Accident.

While approaching the T junction, I slowed down as I reached the stop line and briefly checked my GPS on my phone to ensure I was turning in the right direction. By the time I looked up I had bumped the back of the vehicle.

We alighted to check, take photos and exchanged details. There was 1 person in the van in front and there were no injuries to him. The van was slightly dented at the back.

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

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

**AH LIM MOTOR COMPANY**  
 (SIN MING BRANCH)  
 176, Sin Ming Drive, #05-12  
 Sin Ming Autocare, Singapore 575721  
 Tel: 6456 3637 Fax: 6456 3686

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

21/01/2022



















































