

ASSIGNMENT

From:

Date:

Estimated Cost:

☒ TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

 Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Report

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SAB 3121X

Yr Regn:

28/5/14

Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make:

Audi A3

c.c

1395

Colour

White

A/C: Insured / Std / NI / NA

Sp. Reading

102332

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WAY 2228 V X EN 120-809

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

205/55R16

R:

11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Continental

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

13/4/22

D.O.I.

19/4/22

Survey held at

Premium

Des. of Damages: ☒ Frt / ☒ Rear / ☐ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

MV-408

PV-77, 011

NV-17, 989

Date/Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Date/Time, File Return to?

2)

Report Format:

Lump Sum / L.B.E. (\$)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech, Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL



55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/OD/300/2022/NK
DATE : 18-Apr-22
WIP : 19861

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY.

AIG ASIA PACIFIC INSURANCE PTE LTD
78 SHENTON WAY
#07-16 AIG BUILDING
SINGAPORE 079120
Attn: Motor Claims Dept
Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME : MR CHAN OI LAI
ADDRESS : BLK 762, BEDOK RESERVOIR VIEW
#09-297
SINGAPORE 470762
TELEPHONE : HP +65 91194114
TYPE OF CLAIM : OWN DAMAGE CLAIM.
POLICY NO : 2100374667-07
VEHICLE NO : SGB 3121 X
MODEL CODE : AUDI A3 SB TF
MODEL YEAR : 28/5/2014
ENGINE NO : CXS 068159
CHASSIS NO : WAUZZZ8VXEA124809
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 13-Apr-22
PLACE OF ACCIDENT : PIE TOWARDS CHANGI BEFORE TOA PAYOH EXIT

LKK Auto Consult
the Repairer
• To be used for repair estimate only
• Not to be used for insurance claim
• Not to be used for 'no repair' basis
• Not to be used for 'no cash' basis
• Supplementary item(s) must be resurveyed and
is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

PREMIUM AUTOMOBILES



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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SGB 3121 X (FRONT)

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY.	S/N \$ 360.00	X
2	TO REMOVE AND TRANSFER BOTH HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 700.00	500
3	TO REMOVE AND RENEW AIR CON CONDENSER, ADDITIONAL RADIATOR AND RADIATOR. CHECK ELECTRICAL FANS AND CONTROL UNIT. TO CARRY OUT PRESSURISE, VACUUM AND REGAS.	S/N \$ 1,400.00	?
4	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET AND BOTH HEADLIGHT. TO REPAIR BOTH FRONT FENDER. TO RENEW FRONT LOCK CARRIER AND ALIGN TO POSITION. REORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 4,900.00	1250
5	TO RESPRAY FRONT BUMPER, BONNET AND BOTH FRONT FENDERS.	\$ 3,500.00	2200
FRONT TOTAL LABOUR CHARGES		: \$ 10,860.00	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SGB 3121 X (REAR)

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID.	S/N \$	280.00 /	
2	TO REMOVE AND TRANSFER REAR LID'S CONVENIENCE LOCK SYSTEM AND WIRE HARNESS FOR TAIL LIGHTS AND REAR LID WIPER ASSY.	S/N \$	480.00 /	
3	TO RENEW REAR WINDSCREEN TO FACILITATE RENEWAL OF REAR LID.	S/N \$	480.00 /	
4	TO CARRY OUT WATER SEEPAGE FOR REAR WINDSCREEN.	S/N \$	200.00 /50	
5	TO INSTALL SOLAR FILM FOR REAR WINDSCREEN	S/N \$	400.00 /	
6	TO DISLodge AND REINSTALL REAR WIRE HARNESS FOR LIGHTS, BATTERY MANAGER, , FUSE AND RELAY TRAYS, ELECTRICAL AND AUDIO EQUIPMENT. INSPECT FOR DAMAGES AND RENEW WHERE NECESSARY.	S/N \$	1,400.00 /	(photo)
SUB - REAR TOTAL LABOUR CHARGES		:	\$ 3,240.00	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SGB 3121 X (REAR)

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
7	TO REMOVE AND REINSTALL FUEL TANK TO FACILITATE RENEWAL OF SPARE WHEEL HOUSING.	S/N \$ 600.00	?
8	TO REMOVE AND REINSTALL REAR WHEEL SUSPENSION ASSY.	S/N \$ 2,400.00	?
9	TO CARRY OUT FIRST MEASUREMENT TEST ON CAR-O-LINER.	S/N \$ 800.00	?
10	TO SET UP VEHICLE ON CAR-O-LINER TO FACILITATE THE REPAIR.	S/N \$ 2,400.00	?
11	TO DISMANTLE AND RENEW REAR BUMPER AND REAR LID. TO CUT OUT AND WELD REAR END PANELLING AND SPARE WHEEL HOUSING. REORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 7,700.00	2500
12	TO RESPRAY REAR BUMPER, REAR LID, HINGES, REAR END PANELLING AND SPARE WHEEL HOUSING.	\$ 4,000.00	1650
13	TO RENEW REAR AND FRONT EXHAUST SILENCER. TO ALIGN TO POSITION.	S/N \$ 480.00	/
14	TO CARRY OUT PRE/ POST DIAGNOSTIC CHECK.	S/N \$ 384.00	/
TOTAL LABOUR CHARGES (REAR)		: \$ 22,004.00	
GRAND TOTAL LABOUR (FRONT + REAR)		: \$ 32,864.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (FRONT)

S/N	PARTS DESCRIPTION	DAMAGED PARTS & PRICES			REMARKS
		QTY	S/NETT		
1	FRONT BUMPER / <i>OK</i>	1	\$	2,146.00	
2	FRONT BUMPER FIXING PARTS <i>X</i>	1	\$	195.00	
3	FRONT BUMPER CLOSING ELEMENET <i>?</i>	1	\$	175.00	
4	FRONT BUMPER PULL STRAP- LOWER <i>?</i>	4	\$	231.00	
5	FRONT BUMPER GUIDE SECTION - LH / RH <i>X</i>	2	\$	142.00	
6	FRONT BUMPER AIR GUIDE GRILLE LH / RH <i>OK</i>	2	\$	244.00	
7	RADIATOR GRILLE <i>OK</i>	1	\$	765.00	
8	RADIATOR GRILLE COVER <i>?</i>	1	\$	109.00	
9	REINFORCEMENT BEAM <i>?</i>	1	\$	847.00	
10	FRONT BUMPER FOAM FILLER PC <i>?</i>	1	\$	93.00	
11	FRONT BUMPER TOP COVER <i>?</i>	1	\$	63.00	
12	SIGNAGE STICKER "CAUTION" <i>OK</i>	1	\$	16.00	
13	STICKER FOR "AIR CON" <i>OK</i>	1	\$	9.00	
14	SIGNAL HORN - LOW TONE LH <i>?</i>	1	\$	213.00	
15	SIGNAL HORN - HIGH TONE RH <i>?</i>	1	\$	213.00	
16	BONNET <i>OK</i>	1	\$	3,370.00	
17	BONNET ATTACHEMENTS PARTS <i>X</i>	1	\$	172.00	
18	BONNET HINGE LH / RH <i>?</i>	2	\$	136.00	
19	BONNET HINGE COVER LH / RH <i>X</i>	2	\$	92.00	
20	BONNET EDGE PROTECTION <i>OK</i>	1	\$	31.00	
SUB - FRONT TOTAL SPARE PARTS		:	\$	9,262.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED
SPARE PARTS ARE SPECIAL NETT.

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (FRONT)

S/N	PARTS DESCRIPTION	DAMAGED PARTS & PRICES			REMARKS
		QTY	S/NETT		
21	BONNET CATCH HOOK ?	1	\$	100.00	
22	BONNET STRIKER LH/ RH ?	2	\$	246.00	
23	BONNET CATCH HOOK ?	1	\$	71.00	
24	BONNET LID LOCK SWITCH ?	2	\$	455.00	
25	BONNET BOWDEN CABLE CENTRE ?	1	\$	64.00	
26	BONNET BOWDEN CABLE COVER ?	1	\$	11.00	
27	BONNET LID LOCK CABLE ?	1	\$	82.00	
28	BONNET GAS FILLED STRUT X	1	\$	110.00	
29	HEADLIGHT - LH / RH / OK	2	\$	5,620.00	
30	HEADLIGHT LIFT CYLINDER - LH / RH ?	2	\$	422.00	
31	HEADLIGHT LIFT CYLINDER HOSE ?	1	\$	204.00	
32	LOCK CARRIER ?	1	\$	806.00	
33	AC CONDENSER ?	1	\$	569.00	
34	ADDITIONER RADIATOR ?	1	\$	959.00	
35	RADIATOR ?	1	\$	1,061.00	
36	RADIATOR BRACKET ?	2	\$	90.00	
37	RADIATOR BUSH LOWER ?	2	\$	22.00	
38	COOLANT READY MIXTURE 1.0L ?	6	\$	283.00	
39	RADIATOR FAN ?	1	\$	1,464.00	
40	RADIATOR AIR GUIDE LH / RH ?	2	\$	56.00	
SUB - FRONT TOTAL SPARE PARTS		:	\$	16,647.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (FRONT)

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
41	RADIATOR SEAL OUTER RH ?	1	\$	9.00	
42	RADIATOR AIR GUIDE UPPER CENTRE ?	1	\$	14.00	
43	RADIATOR BRACKET ?	1	\$	21.00	
44	WHEEL HOUSING LINER LH / RH X	2	\$	366.00	
45	MULTI-SWITCH SIDE LIGHTS (BLACK) - OK	1	\$	592.00	
FRONT TOTAL SPARE PARTS		:	\$	<u>26,911.00</u>	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (REAR)

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER <i>OR</i>	1	\$	2,201.00
2	REAR BUMPER FIXING SETS <i>?</i>	1	\$	201.00
3	REAR BUMPER LOCKING MECHANISM LH / RH <i>OR</i>	<i>1.2</i>	\$	32.00
4	REAR BUMPER SPOILER- DOUBLE PIPE <i>OR</i>	1	\$	264.00
5	REAR REINFORCEMENT BEAM <i>?</i>	1	\$	642.00
6	REAR BUMPER BRACKET INNER/ UPPER RH <i>MIS</i>	<i>(2)</i>	\$	30.00
7	REAR BUMPER GUIDE SECTION LH / RH <i>?</i>	2	\$	150.00
8	REAR BUMPER SENSOR INNER / OUTER <i>?</i>	4		TBC
9	REAR BUMPER SENSOR SEAL <i>MC</i>	4	\$	10.00
10	REAR BUMPER WIRING SET <i>?</i>	1	\$	572.00
11	REAR LID <i>OR</i>	1	\$	3,097.00
12	REAR LID PACKING ADHESIVE <i>MC</i>	1	\$	21.00
13	REAR LID ATTACHMENTS PARTS <i>X</i>	1	\$	308.00
14	REAR LID HINGE <i>?</i>	2		TBC
15	REAR LID SEAL <i>?</i>	1	\$	229.00
16	REAR LID LOCK <i>?</i>	1	\$	190.00
17	REAR LID LOCK COVER <i>?</i>	1	\$	8.00
18	REAR LID PUSH BUTTON <i>?</i>	1	\$	200.00
19	REAR LID LOCK STRIKER <i>?</i>	1	\$	102.00
20	REAR LID CLIPS <i>MC</i>	2	\$	4.00
SUB - REAR TOTAL SPARE PARTS		:	\$	8,261.00

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (REAR)

			DAMAGED PARTS & PRICES		
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
21	REAR WINDSCREEN ✓ <i>nc</i>	1	\$	905.00	
22	REAR WINDSCREEN PRIMER ✓ <i>nc</i>	1	\$	22.00	
23	FOAM STRIPS ✓ <i>nc</i>	1	\$	153.00	
24	REAR SPOILER FIXING PARTS ✓ <i>nc</i>	1	\$	184.00	
25	REAR LIGHT REFLECTOR LH / RH X	2	\$	92.00	
26	LED TAILLIGHT OUTER LH / RH ?	2	\$	1,948.00	
27	LED TAILLIGHT INNER LH / RH X	2	\$	1,948.00	
28	LED LICENCE PLATE LIGHT X	2	\$	128.00	
29	REAR CROSS PANEL ✓ <i>DD</i>	1	\$	258.00	
30	REAR CROSS PANEL REINFORCEMENT BEAM ✓ <i>DD</i>	1	\$ <i>(phr)</i>	1,037.00	
31	REAR CROSS PANEL CONNECTING PLATE LH / RH ✓ <i>nc</i>	2	\$	92.00	
32	BOOT FLOOR PLATE ?	1	\$	1,982.00	
33	BOOT FLOOR CROSS MEMBER REAR ?	1	\$	233.00	
34	REAR CROSS PANEL COVER <i>W/CRU</i> ?	1	\$	171.00	
35	REAR LUGGAGE COMPARTMENT FLOOR ?	1	\$	786.00	
36	REAR CROSS PANEL PLASTIC TRAY ? ✓ <i>CRU</i>	1	\$	319.00	
37	REAR SILENCER ✓ <i>DD</i>	1	\$	776.00	
38	REAR SILENCER DUAL CLIP ✓ <i>nc</i>	1	\$	65.00	
39	FRONT SILENCER ?	1	\$	530.00	
40	FRONT SILENCER DUAL CLIP ?	1	\$	66.00	
SUB - REAR TOTAL SPARE PARTS		:	\$	11,695.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGB 3121 X (REAR)

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
41	EXHAUST SYSTEM RETAINER / <i>nc</i>	1	\$	94.00	
42	CHROME EXHAUST TAIL PIPE - LH / <i>cut</i>	1		TBC	
43	REAR SILENCER HEAT SHIELD / <i>nc</i>	1	\$	180.00	
44	ACYRLIC SEALER / <i>nc</i>	S/N	\$	180.00	
45	CAVITY WAX - <i>nc</i>	S/N	\$	140.00	
46	STONE CHIP - <i>nc</i>	S/N	\$	180.00	
47	METAL FILLER POWDER - <i>nc</i>	S/N	\$	280.00	
48	REAR WINDSCREEN SEALANT / <i>nc</i>	S/N	\$	200.00	
49	FRONT NO PLATE / <i>BT</i>	S/N	\$	60.00	
50	REAR NO PLATE - <i>cut</i>	S/N	\$	60.00	
51	SUNDRIES <i>q</i>	1	\$	600.00	
TOTAL SPARE PARTS (REAR)		:	\$	21,930.00	
TOTAL SPARE PARTS (FRONT)		:	\$	26,911.00	
TOTAL LABOUR CHARGES (FRONT + REAR)		:	\$	32,864.00	
GRAND TOTAL		:	\$	81,705.00	

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NAME
SURVEYED DATE
AUTHORISED DATE
EXCESS COST
LIABILITY
REMARKS

Steve (LKK)
19/4/22, 10:00am

OP - M AL
EXM. 1-?
PIP
17 RY
14 LY

PLEASE NOTE

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE
AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER
LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF
REPAIR, WE SHALL INFORM YOU ACCORDINGLY.
FOR INSPECTION OF VEHICLE, PLEASE REFER TO
MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR
APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT



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 14/04/2022 15:43 (SGT)
Date of Accident 13/04/2022 19:23 (SGT)
Exact Location of Accident Near 299 Lor 6 Toa Payoh, Singapore 319390
Additional Location Information PIE TOWARDS CHANGI BEFORE TOA PAYOH EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGB3121X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHAN OI LAI
NRIC No SXXXX208C
Email Address GEMBIT03@GMAIL.COM
Mobile Phone No (Phone) +65-91194114
Alternative Phone No +65-91194114

VEHICLE PARTICULARS

Manufacturer Audi
Model A3
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? Yes
Vehicle Category Private car
Transmission Auto
CC 1395

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2100374667-07
Cover Note Number -

DRIVER

Name of Driver GOH JUN HAO RYAN
NRIC No SXXXX951Z



Accident report SP0R224E0003

Date Of Birth
 Occupation
 Date Of Driving Pass
 Driving experience
 Gender
 Mobile Number
 Alt. Phone Number
 Email Address
 Address
 Address complement
 Postcode
 Is the driver the policyholder?
 If No, Relationship of the Driver with the Insured
 Does Driver Own Other Vehicles?
 Vehicle Registration Number of Other Vehicle Owned by Driver
 Insurance Company of Other Vehicle Owned by Driver

20/03/1994
 Indoor
 20/05/2014
 7 YEARS AND 11 MONTHS
 Male
 (Phone) +65-81110916
 -
 94RYANGJH@GMAIL.COM
 BLK 762 BEDOK RESERVOIR VIEW
 #09-297
 470762
 No
 Child
 No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Chain Collision
 Weather Conditions Clear
 Road Surface Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No
 Number of vehicles involved in the accident 5
 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) 1
 Has the driver been approached by unknown person(s) No
 soliciting/offering accident claims assistance?

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

ON MY WAY HOME FROM WORK, KEPT A SAFE DISTANCE FROM FRONT VEHICLE AND REALISED THEY WERE SLOWING DOWN. PROCEEDED TO SLOW DOWN AND ACCIDENTALLY HIT THE CAR IN FRONT. VEHICLE BEHIND COLLIDED INTO ME AS WELL AND WHEN I GOT OUT OF THE VEHICLE, I REALISED IT WAS A 5 VEHICLE COLLISION.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? Yes
 Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLR3778B
 Vehicle Manufacturer Honda
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMH7003A
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Private car
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJF6168K
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Private car
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)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SMP8702S
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Private car
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)

IMPORTANT NOTICE

SKETCH PLAN

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 willful 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 copying 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

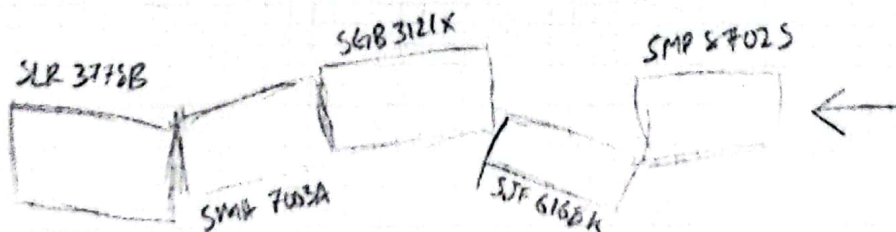
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

On my way home from work, kept a safe distance from front vehicle and realised they were slowing down. Proceeded to slow down and accidentally hit the car in front. Vehicle behind collided into me as well and when I got out of the vehicle, I realised it was a 5 vehicle collision.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

 140422
1030H
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel 