

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. 4372634731SGSum Insured: _____ Excess: 0/-

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 17 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SM27626H Yr Regn: 30/9/19Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make: Audi A4 c.c. 1984Colour Red A/C: ☒ Insured / ☐ Std / ☐ NI / ☐ NASp. Reading 26749 T/Radio: ☒ Insured / ☐ Std / ☐ NI / ☐ NA

Eng/No: _____

C/No: WAG 222F 15 KA087970Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orModl: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim orTyre Size: F: 245/40R18R: 11BS / DUN / EXNOVA / ☒ GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 11/5/22 D.O.I. 11/5/22Survey held at PremiumDes. 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-145K

12/05/22@10.50am revert to AIG via Merimen.

12/05/22@5.39pm Kok Chong informed C/A & frt LH rim & labour not approved, to obtained F&A coverage from claim examiner to confirm.

13/05/22@9.21am Informed Tony C/A & ex:\$0/- & Frt LH rim & labour TBC.

28/07/22@2.44pm confirmed with Mr Boo final fig \$26528.32, 17 days (Red \$44245.28, 63%)

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 17

1)

☐ : Final ReportResurvey No. of Trip: 2

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)Report Format: MER-ODLump Sum I.B.F. (\$ 26528.32)

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/365/2022/GW
DATE : 10-May-22
WIP :

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 5/5/22

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 : MS PUVANESWARI SANDIRASEKARAN
ADDRESS : 80 LORONG M TELOK KURAU
#03-36
SINGAPORE 425414
TELEPHONE : HP +65 90692143
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 721010932
VEHICLE NO : **SMZ 7626 H**
MODEL CODE : A5 SPORTBACK 2.0 TFSI S tronic
MODEL YEAR : 30/9/2019
ENGINE NO : CVK 084387
CHASSIS NO : WAUZZZF45KA087920
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 7-May-22
PLACE OF ACCIDENT : JOO CHIAT LN & TEMBELING RD , SINGAPORE

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMZ 7626 H- 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 WHASHER ASSY AND FRONT PARKING AID.	S/N \$ 480.00 /	
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MOUDLE.	S/N \$ 350.00 250	
3	TO REMOVE AND TRANSFER LHS FRONT DOOR AND RHS REAR DOOR'S MULTI-LOCK SYSTEM AND POWER WINDOW DEVICES. INSPECT FOR DAMAGES.	S/N \$ 700.00 560	
4	TO RENEW LHS FRONT FENDER INNER PIPES. TO CARRY OUT VACUUM AND REGAS.	S/N \$ 280.00 ?	
5	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET, LHS FRONT FENDER, LHS FRONT DOOR, LHS REAR DOOR AND LHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 4,200.00 7000 4 x 500	
6	TO RESPRAY FRONT BUMPER, LHS FRONT FENDER, BONNET, LHS FRONT DOOR, LHS WING MIRROR COVER, DOOR HANDLE AND LHS REAR DOOR.	\$ 5,000.00 2980 550 x 5 + 150 x 8	
7	TO REMOVE AND RENEW LHS FRONT WHEEL SUSPENSION ASSY WITH SUBFRAME.	S/N \$ 2,400.00 ?	
8	TO RENEW LHS FRONT RIM WITH TYRE. TO CARRY OUT PRE/POST WHEEL ALIGNMENT.	S/N \$ 520.00 /	
SUB TOTAL LABOUR CHARGES		: \$ 13,930.00	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMZ 7626 H - REAR

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AND REAR LID KICK SENSOR.	S/N \$ 360.00	✓
2	TO DISMANTLE AND RENEW REAR BUMPER. TO REPAIR REAR LHS FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 1,400.00 1.5 X \$500	750
3	TO RESPRAY REAR BUMPER AND LHS REAR FENDER.	\$ 2,000.00 \$50 X 2	1100
4	TO RENEW LHS REAR RIM.	S/N \$ 40.00	X
5	TO TOW BACK THE VEHICLE FROM ACCIDENT SCENE.	S/N \$ 280.00	X
6	TO CARRY OUT PRE/POST DIAGNOSTIC CHECK.	S/N \$ 384.00	✓
TOTAL LABOUR CHARGES		: \$ 18,394.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMZ 7626 H - FRONT

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	FRONT BUMPER / CRV	1		TBC
2	FRONT BUMPER FIXING PARTS X	1	\$	612.00
3	FRONT BUMPER AIR GUIDE - LH ?	1	\$	72.00
4	FRONT BUMPER SECURING STRIP X	2	\$	79.00
5	FRONT BUMPER GRILLE - CENTER X	1	\$	219.00
6	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE ?	1	\$	254.00
7	FRONT BUMPER AIR GUIDE GRILLE - LH ?	1	\$	151.00
8	FRONT BUMPER GUIDE SECTION - LH ?	1	\$	41.00
9	FRONT BUMPER COVER X	1	\$	143.00
10	STICKER FOR 'SIGN CAUTION' X	1	\$	16.00
11	SITCKER FOR AIR CONDITIONER X	1	\$	9.00
12	FRONT FENDER - LH / M	1	\$	861.00
13	FRONT FENDER ATTACHMENT PARTS ?	1	\$	211.00
14	FRONT FENDER CLOSING ELEMENT - LH / Nc	1	\$	81.00
15	FRONT FENDER CENTER BRACKET - LH / Nc	1	\$	41.00
16	FRONT FENDER BRACKET FOR DEFORMATION - LH / Nc	1	\$	55.00
17	FRONT FENDER POP RIVET / Nc	6	\$	23.00
18	FRONT FENDER REAR BRACKET - LH X	1	\$	36.00
19	FRONT FENDER UPPER BRACKET - LH ?	1	\$	37.00
20	FRONT FENDER BRACE - LH ?	1	\$	132.00
SUB TOTAL SPARE PARTS		:	\$	3,073.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

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



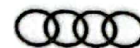
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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMZ 7626 H - FRONT

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	FRONT FENDER INSULATOR - LH ?	1	\$ 37.00	
22	FRONT FENDER COVER - LH ?	1	\$ 13.00	
23	FRONT WHEEL HOUSING LINER - LH ?	1	\$ 260.00	
24	FRONT WHEEL HOUSING LINER ATTACHMENT PARTS - LH ?	1	TBC	
25	FRONT WHEEL SPOILER - LH / OK	1	\$ 82.00	
26	FRONT END PLATE - LH ?	1	\$ 39.00	
27	FRONT STONE CHIP GUARD - LH / CUT	1	\$ 57.00	
28	FRONT FENDER LEDGE COVER LONG - LH / MZ	1	\$ 35.00	
29	FRONT FENDER LEDGE COVER SHORT - LH / HE	1	\$ 26.00	
30	BONNET X R	1	\$ 3,425.00	
31	BONNET IMPACT PROTECTION - CENTER X	1	\$ 31.00	
32	BONNET IMPACT PROTECTION - LH / RH X	2	\$ 62.00	
33	FRONT DOOR - LH / M	1	\$ 3,431.00	
34	FRONT OUTER SEAL - LH / M	1	\$ 229.00	
35	BONDING AGENT / M	1	\$ 51.00	
36	CLEANING SOLUTION / AG	1	\$ 74.00	
37	APPLICATOR X	1	\$ 8.00	
38	FRONT DOOR ATTACHMENT PARTS - LH X	1	\$ 1,153.00	
39	FRONT DOOR CATCH - LH ?	1	TBC	
40	FRONT DOOR TRIM PLATE - LH X R	1	\$ 98.00	
SUB TOTAL SPARE PARTS		:	\$ 9,111.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMZ 7626 H - FRONT

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
41	FRONT DOOR HANDLE COVER CAP - LH ✓ R	1	\$ 7.00	
42	FRONT DOOR HANDLE HOUSING - LH X	1	\$ 9.00	
43	FRONT EXTERIOR MIRROR MOUNTING - LH ✓ [H]	1	\$ 1,201.00	
44	FRONT WING MIRROR CAP - LH X R	1	\$ 308.00	
45	FRONT WING MIRROR GLASS - LH X	1	\$ 1,298.00	
46	FRONT WINDOW SLOT SEAL - LH X	1	\$ 344.00	
47	ASSEMBLY CARRIER ?	1	\$ 2,096.00	
48	FRONT WISHBONE LINK - LH ?	1	\$ 605.00	
49	FRONT SUSPENSION LINK - LH ?	1	\$ 1,057.00	
50	FRONT CONTROL ARM - LH ?	1	\$ 575.00	
51	FRONT CONTROL ARM REAR - LH ?	1	\$ 575.00	
52	FRONT WHEEL BEARING HOUSING - LH ?	1	\$ 5,070.00	
53	SWIVEL JOINT ?	1	\$ 214.00	
54	FRONT WHEEL HUB - LH ?	1	\$ 498.00	
55	FRONT BALL BEARING - LH ?	1	\$ 273.00	
56	FRONT SUSPENSION FORKS - LH ?	1	\$ 293.00	
57	FRONT COUPLING ROD ?	2	\$ 258.00	
58	FRONT DRIVE SHAFT ?	1	\$ 2,999.00	
59	FRONT GAS SHOCK ABSORBER - LH ?	1	\$ 332.00	
60	FRONT TRACK ROD ?	1	\$ 109.00	
SUB TOTAL SPARE PARTS		:	\$ 18,121.00	

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PREMIUM AUTOMOBILES



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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMZ 7626 H - FRONT

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
61	FRONT STEERING GEAR ?	1	\$	7,318.00	
62	LED HEADLIGHT - LH ?	1		TBC	
63	LIFT CYLINDER FOR HEADLIGHT WASHER SYSTEM ?	1	\$	231.00	
64	CORRUGATED PIPE FOR HEADLIGHT WASHER SYSTEM ?	1	\$	107.00	
65	CORRUGATED PIPE BRACKET ?	1	\$	7.00	
66	FRONT NOISE INSULATION ?	1	\$	640.00	
67	A/C PIPE ?	1	\$	585.00	
68	A/C PIPE BRACKET ?	1	\$	9.00	
69	A/C DISCHARGE HOSE ?	1	\$	381.00	
70	A/C SUCTION HOSE ?	1	\$	277.00	
71	A/C LINE ?	1	\$	186.00	
72	FRONT RIM - LH ✓ (M)	1		TBC	
73	FRONT TYRE - LH ✗ ✓ TN (80%)	1		TBC	
SUB TOTAL SPARE PARTS			:	\$	40,046.00

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMZ 7626 H - REAR

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES	
			S/NETT	REMARKS
74	REAR DOOR - LH / <i>OK</i>	1	\$ 3,431.00	
75	REAR DOOR OUTER SEAL - LH / <i>MC</i>	1	\$ 229.00	
76	BONDING AGENT / <i>MC</i>	1	\$ 51.00	
77	CLEANING SOLUTION / <i>MC</i>	1	\$ 74.00	
78	APPLICATOR <i>X</i> MC	1	\$ 8.00	
79	REAR DOOR ATTACHMENT PARTS <i>X</i>	1	\$ 943.00	
80	REAR DOOR CATCH - RH <i>?</i>	1	TBC	
81	REAR BUMPER <i>X</i> <i>R</i>	1	\$ 3,188.00	
82	REAR BUMPER SECURING STRIP <i>X</i>	1	\$ 249.00	
83	REAR BUMPER GUIDE SECTION - LH / RH <i>X</i>	2	\$ 52.00	
84	REAR BUMPER UPPER GUIDE SECTION - LH <i>X</i>	1	\$ 49.00	
85	REAR RIM - LH <i>X</i>	1	TBC	
86	SUNDRIES <i>?</i>	1	\$ 700.00	
TOTAL SPARE PARTS (FRONT & REAR)		:	\$ 49,020.00	
TOTAL LABOUR CHARGES (FRONT & REAR)		:	\$ 18,394.00	
GRAND TOTAL		:	\$ 67,414.00	

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PREMIUM AUTOMOBILES



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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME :
SURVEYED DATE :
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS :

Steve (LKK)
11/5/22, 10.00 AM

00- M AL
EXAM - 2
P/P
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12 dys

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

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

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	07/05/2022 17:55 (SGT)
Date of Accident	07/05/2022 12:45 (SGT)
Exact Location of Accident	Joo Chiat Ln & Tembeling Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ7626H
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	PUVANESWARI SANDIRASEKARAN
NRIC No	SXXXX745G
Email Address	PUVANES_19@HOTMAIL.COM
Mobile Phone No	(Phone) +65-90077540
Alternative Phone No	(Office) +65-90077540

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	721010932
Cover Note Number	-

DRIVER

Name of Driver	PRABHU S/O JAYASEELAN
NRIC No	SXXXX293F



Accident report SP0R22570004

Date Of Birth	19/08/1983
Occupation	Indoor
Date Of Driving Pass	24/07/2006
Driving experience	15 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90692143
Alt. Phone Number	-
Email Address	JAY_PRABHU@HOTMAIL.COM
Address	80 LORONG M TELOK KURAU
Address complement	#03-36
Postcode	425414
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Cross Junction
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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS DRIVING STRAIGHT. THE VEHICLE WHICH COLLIDED WAS TURNING LEFT ONTO THE SAME ROAD. I WENT STRAIGHT AS I WOULD HAVE RIGHT OF WAY AND DID NOT SEE THE VEHICLE COMING FROM THE LEFT. THE VEHICLE HIT MY VEHICLE JUST AT THE INTERSECT OF JOO CHIAT LANE AND TEMBELING ROAD IF I AM NOT WRONG. THE VEHICLE HIT MY CAR ON THE LEFT. WE THEN STOPPED AND I ASKED THE DRIVER IF EVERYONE IS ALRIGHT. HE SAID YES. THEN WE EXCHANGED PARTICULARS.

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	SJW7190Z
Vehicle Manufacturer	Toyota
Vehicle Model	Alphard
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	NIKANDER MARSOLUS

Contact Number

(Phone) +65-81576141

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

-
-
-
-
-
-
-

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.
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 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 its insurers who have insured vehicle(s) involved in this accident (all insurers) 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 envelope/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

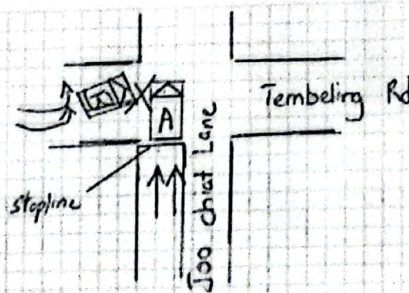
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms) which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



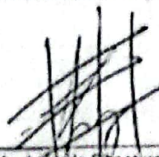
A - SMZ 7626H
B - SJW 7190Z


Describe Circumstances of the Accident


I was driving straight. The vehicle which collided
was turning left onto the same road. I went straight
as I would have right of way and did not see the
vehicle coming from the left. The vehicle
hit my vehicle just at the intersect of
Joo Chiat lane and Tembeling road. It is my not
wrong. The vehicle hit the my car on the left.
We then stopped and I asked the driver if everyone
is alright. He said yes. Then we exchanged particulars.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time

7/5/22 @ 16:00 hrs

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


Witnessed by Reporting Centre
Personnel