

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. 6148698836SG
 Sum Insured: _____ Excess: 300
 (Client's Record)
 Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 10 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: SLB 9706K Yr Regn: 27/4/16
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Audi A4 c.c. 1395
 Colour: Black A/C: Insured / Std / NI / NA
 Sp. Reading: 45888 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WAZZEL PUN GA 048/97
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modl: Nil / SRim / STD A/Rim or
 Tyre Size: F: 205/60R16
 R: 11
 BS / DUN / EXNOVA / GY / FS / LIZ / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Pirelli
 Front Rear
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 26/7/22 D.O.I. 28/1/22
 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

NY-80K

Already inform Workshop \$42K limit

PR-36,081

NK-43,919

01/08/22@10.03am revert to AIG via Merimen.

01/08/22@10.44am Kok Chong informed C/A via Merimen.

01/08/22@12.01pm Informed George C/A & ex.\$300 by email.

28/10/22@2.23pm confirmed with Mr Boo final fig \$29299.40, 10 days. (Red \$20894.60, 42%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Repair Format: MER-ODLump Sum / I.B.I. (\$) 29299.40Days Of Repair: 10Resurvey No. of Trip: 2

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech, Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type: Singapore NRIC
Owner ID: 075H

Vehicle Details

Vehicle No.: SLB9706K
Vehicle to be Exported: No
Intended Deregistration Date: 28 Jul 2022
Vehicle Make: AUDI
Vehicle Model: A4 1.4 TFSI S TRONIC
Primary Colour: Black
Manufacturing Year: 2016
Engine No.: CVN006626
Chassis No.: WAUZZZF41GA048197
Maximum Power Output: 110.0 kW (147 bhp)
Open Market Value: \$32,083.00
Original Registration Date: 27 Apr 2016
First Registration Date: 27 Apr 2016
Transfer Count: 0
Actual ARF Paid: \$26,917.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 26 Apr 2026
PARF Rebate Amount: \$17,496.00

Intended COE Rebate Details

COE Expiry Date: 26 Apr 2026
COE Category: B - Car above 1600cc or 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$49,602.00
COE Rebate Amount: \$18,585.00
Total Rebate Amount: \$36,081.00

The information contained herein is correct as at 28 Jul 2022

OK



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/0627/2022/EQ
DATE : 27-Jul-22
WIP : 34767

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 28/7/2022.

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. RISHAB MUKHERJEE
ADDRESS : 5 PEMIMPIN DRIVE
#16-04, SEASONS VIEW
SINGAPORE 576149
TELEPHONE : HP +65 81276956
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 2100462077-06
VEHICLE NO : SLB 9706 K
MODEL CODE : AUDI A4 SEDAN 1.4 TFSI S-TRONIC
MODEL YEAR : 27/4/2016
ENGINE NO : CVN 006626
CHASSIS NO : WAUZZZF41GA048197
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 26-Jul-22
PLACE OF ACCIDENT : NORTH BUONA VISTA ROAD & COMMONWEALTH AVE

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLB 9706 K

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 AND HEADLIGHT WASHER ASSY.	S/N \$ 480.00 /	
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 350.00 250	
3	TO REMOVE AND RENEW AIRCON CONDENSER, CHARGE AIR COOLER, RADIATOR. CHECK ELECTRICAL FANS AND CONTROL UNIT. PRESSURISE COOLING SYSTEM. TO CARRY OUT VACUUM AND REGAS.	S/N \$ 1,400.00 /	
4	TO REMOVE AND REINSTALL LHS AND RHS FRONT DOOR PANEL TRIM. TO REMOVE AND REINSTALL LHS AND RHS WING MIRROR ASSY TO FACILITATE RESPRAY FOR LHS FRONT DOOR.	S/N \$ 560.00 /	
5	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET, LHS FRONT FENDER AND LHS HEADLIGHT. TO REPAIR LHS FRONT DOOR, LHS FRONT FENDER TOP SUPPORT AND LHS UPPER A-PILLAR. TO RENEW FRONT LOCK CARRIER AND 2.5 ALIGN TO POSITION. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 6,000.00 3000 6 x 500	
6	TO RESPRAY FRONT BUMPER, BONNET, HINGES, LHS FRONT FENDER, LHS FRONT FENDER TOP SUPPORT, LHS X UPPER A-PILLAR AND LHS FRONT DOOR. 1 Fm RM door - 1	\$ 5,000.00 3025	
SUB-TOTAL LABOUR CHARGES		: \$ 13,790.00	
		55 x 550	



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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLB 9706 K

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
7	TO CARRY OUT PRE WHEEL ALIGNMENT.	S/N \$ 240.00	X
8	TO RENEW LHS FRONT FENDER INNER AIRCON PIPE.	S/N \$ 280.00	/
9	TO CARRY OUT PRE/POST DIAGNOSTIC CHECK.	S/N \$ 384.00	/
TOTAL LABOUR CHARGES		: \$ 14,694.00	



MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLB 9706 K

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
1	FRONT BUMPER / BR	1	\$	2,377.00	
2	FRONT BUMPER FIXING PARTS / MC	1	\$	612.00	
3	FRONT BUMPER SECURING STRIP / BR	1	\$	79.00	
4	FRONT BUMPER GRILLE - CENTER ?	1	\$	219.00	
5	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE / CR4	1	\$	254.00	
6	FRONT BUMPER AIR GUIDE - LH / BR	1	\$	72.00	
7	RADIATOR GRILLE / BR	1	\$	1,277.00	
8	FRONT BUMPER AIR GUIDE GRILLE - LH / MIS	1	\$	151.00	
9	FRONT BUMPER FOAM FILLER PIECE / BR	1	\$	139.00	
10	FRONT REINFORCEMENT BEAM / BT	1	\$	899.00	
11	FRONT BUMPER GUIDE SECTION - LH / BR	1	\$	41.00	
12	FRONT BUMPER TOP COVER / BR	1	\$	143.00	
13	SIGN ' CAUTION ' STICKER / MC	1	\$	16.00	
14	STICKER FOR AIR CONDITIONER / MC	1	\$	9.00	
15	FRONT REINFORCEMENT BEAM BRACKET - LH ?	1	\$	254.00	
16	FRONT LOCK CARRIER BRACKET / BR	1	\$	154.00	
17	FRONT BUMPER SUPPORT - LH/RH / MC	2	\$	64.00	
18	POP RIVET / MC	4	\$	4.00	
19	HORN - LH ?	1	\$	134.00	
20	HORN BRACKET - LH ?	1	\$	33.00	
SUB TOTAL SPARE PARTS		:	\$	6,931.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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



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			DAMAGED PARTS & PRICES		
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS	
21	FRONT FENDER - LH / <i>OK</i>	1	\$	861.00	
22	FENDER ATTACHMENT PART <i>X</i>	1	\$	211.00	
23	FRONT FENDER CLOSING ELEMENT - LH / <i>MC</i>	1	\$	81.00	
24	FRONT FENDER BRACKET - LH FRONT / <i>BT</i>	1	\$	41.00	
25	FRONT FENDER BRACE - LH / <i>BT</i>	1	\$	132.00	
26	FRONT FENDER BRACKET - LH / <i>BT</i>	1	\$	55.00	
27	FRONT FENDER BRACKET - LH CENTER / <i>BT</i>	1	\$	36.00	
28	FRONT FENDER CLOSING ELEMENT - LH REAR <i>?</i>	1	\$	37.00	
29	FRONT FENDER SIDE COVER - LH <i>X</i>	1	\$	13.00	
30	FRONT FENDER POP RIVET / <i>MC</i>	7	\$	27.00	
31	FRONT WHEEL HOUSING LINER - LH / <i>CR4</i>	1	\$	260.00	
32	WHEEL HOUSING LINER ATTACHEMENT PART / <i>MC</i>	1	\$	219.00	
33	FRONT WHEEL SPOILER - LH / <i>BR</i>	1	\$	82.00	
34	FRONT WHEEL SPOILER TRIM - LH <i>X</i>	1	\$	39.00	
35	FRONT FENDER STONE CHIP GUARD - LH / <i>MC</i>	1	\$	57.00	
36	FRONT FENDER LEDGE COVER - FRONT / <i>MS</i>	1	\$	35.00	
37	FRONT FENDER LEDGE COVER - LH OUTER / <i>CR4</i>	1	\$	26.00	
38	BONNET / <i>OK</i>	1	\$	3,425.00	
39	BONNET ATTACHMENT PART <i>X</i>	1	\$	431.00	
40	BONNET HINGE - LH/RH <i>?</i>	2	\$	680.00	
SUB TOTAL SPARE PARTS		:	\$	6,748.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLB 9706 K

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
41	BONNET IMPACT PROTECTION - CENTER / LH / RH <i>— MPC</i>	3	\$	93.00	
42	BONNET HINGE COVER <i>X</i>	1	\$	68.00	
43	BONNET GAS FILLED STRUT <i>X</i>	2	\$	512.00	
44	BONNET STRIKER <i>— BT</i>	1	\$	56.00	
45	BONNET LOCK <i>— BT</i>	1	\$	228.00	
46	BONNET BOWDEN CABLE <i>?</i>	1	\$	64.00	
47	BONNET BOWDEN CABLE COVER <i>?</i>	1	\$	11.00	
48	BONNET BOWDEN CABLE <i>?</i>	1	\$	64.00	
49	BONNET RELEASE LEVER <i>?</i>	1	\$	15.00	
50	BONNET LOCK CABLE <i>?</i>	1	\$	82.00	
51	PLENUM CHAMBER COVER <i>X</i>	1	\$	108.00	
52	BONNET SOUND ABSORBER <i>— CRU</i>	1	\$	382.00	
53	LED HEADLIGHT - LH <i>— BR</i>	1	\$	8,294.00	
54	HEADLIGHT POWER MODULE <i>— BR</i>	1	\$	840.00	
55	HEADLIGHT CONTROL UNIT <i>— BR</i>	1	\$	840.00	
56	HEADLIGHT HOSE - LH <i>— CRU</i>	1	\$	42.00	
57	HEADLIGHT COMPENSATION PIECE <i>— BT</i>	3	\$	135.00	
58	HEADLIGHT WASH CYLINDER - LH <i>— BR</i>	1	\$	231.00	
59	HEADLIGHT WASH CYLINDER BRACKET - LH <i>— MC</i>	1	\$	7.00	
60	WASHER HOSE <i>?</i>	1	\$	107.00	
SUB TOTAL SPARE PARTS			:	\$ 12,179.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLB 9706 K

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
61	FRONT LOCK CARRIER ✓ <i>PR</i>	1	\$	1,127.00	
62	RADIATOR SUPPORT - LH/RH ✓ <i>PR</i>	2	\$	86.00	
63	A/C CONDENSER X	1	\$	683.00	
64	REFRIGERANT LINE ✓ <i>PR</i>	1	\$	186.00	
65	REFRIGERANT LINE ✓ <i>PR</i>	1	\$	381.00	
66	REFRIGERANT LINE ✓ <i>PR</i>	1	\$	277.00	
67	BOLT ✓ <i>PR</i>	1	\$	3.00	
68	REFRIGERANT PIPE ✓ <i>PR</i>	1	\$	585.00	
69	REFRIGERANT PIPE BRACKET ✓ <i>MC</i>	1	\$	9.00	
70	REFRIGERANT PIPE BRACKET ✓ <i>MC</i>	1	\$	21.00	
71	RADIATOR X	1	\$	699.00	
72	ADDITIONAL RADIATOR X	1	\$	545.00	
73	FAN RING X	1	\$	291.00	
74	RADIATOR FAN WITH CONTROL UNIT X	1	\$	2,483.00	
75	RADIATOR AIR GUIDE - LH X	1	\$	32.00	
76	RADIATOR AIR GUIDE - LH/RH UPPER X	2	\$	28.00	
77	RADIATOR AIR GUIDE - UPPER X	1	\$	19.00	
78	RADIATOR AIR GUIDE - LOWER X	1	\$	25.00	
79	COOLANT ✓ <i>MC</i>	6	\$	282.00	
80	FRONT DOOR WINDOW SLOT SEAL - LH X	1	\$	344.00	
SUB TOTAL SPARE PARTS		:	\$	8,106.00	

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PREMIUM AUTOMOBILES



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TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLB 9706 K

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
81	WINDSCREEN WATER DEFLECTOR - LH X	1	\$ 75.00	
82	FRONT DOOR WINDOW TRIM STRIP - LH X	1	\$ 287.00	
83	INTAKE AIR DUCT X	1	\$ 25.00	
84	INTAKE AIR GUIDE X	1	\$ 61.00	
85	INTAKE HOSE X	1	\$ 110.00	
86	AIR FILTER X	1	\$ 418.00	
87	FRONT NO. PLATE / M	S/N	\$ 60.00	
88	SUNDRIES 7		\$ 500.00	
TOTAL SPARE PARTS		:	\$ 35,500.00	
TOTAL LABOUR CHARGES		:	\$ 14,694.00	
GRAND TOTAL		:	\$ 50,194.00	

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PREMIUM AUTOMOBILES



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TEL: 6366 2323 FAX: 6841 1183

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

NAME

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

:
:
:
:
:
:

Steve (LKK)
28/7/12, 11.99h

00-LAL
Excess-?

P/P
by BL Y
19 45

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 legal proceedings is allowed
- Supplemental 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	26/07/2022 15:57 (SGT)
Reported by	Both
Date of Accident	26/07/2022 09:05 (SGT)
Exact Location of Accident	North Buona Vista Rd & Commonwealth Ave, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLB9706K

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	RISHAB MUKHERJEE
NRIC No	SXXXX075H
Email Address	MUKHERJEE.RISHAB@GMAIL.COM
Mobile Phone No	(Phone) +65-81276956
Alternative Phone No	-

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	1400

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100462077-06

DRIVER

Name of Driver	RISHAB MUKHERJEE
NRIC No	SXXXX075H
Date Of Birth	07/09/1987
Occupation	Indoor

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

30/05/2016
6 YEARS AND 2 MONTHS
Male
(Phone) +65-81276956
-
MUKHERJEE.RISHAB@GMAIL.COM
5 PEMIMPIN DR
#16-04, SEASONS VIEW
576149
Yes
-
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
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
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

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

LOCATION : CROSSING OF N.BUONA VISTA RD & COMMONWEALTH AVE. I WAS GOING ON N.BUONA VISTA RD DURING A REGULAR GREEN LIGHT. THE CARS BEFORE ME STOPPED SUDDENLY. I TRIED TO BRAKE BUT IT WAS NOT IN TIME, AND I HIT THE CAR FROM BEHIND.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category

SMD4839X
Volkswagen
Golf
-
Black
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)

TAN LAY HOO (CHEN LIHE)
(Phone) +65-83382613

"
"
"
"
"
"
2

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:

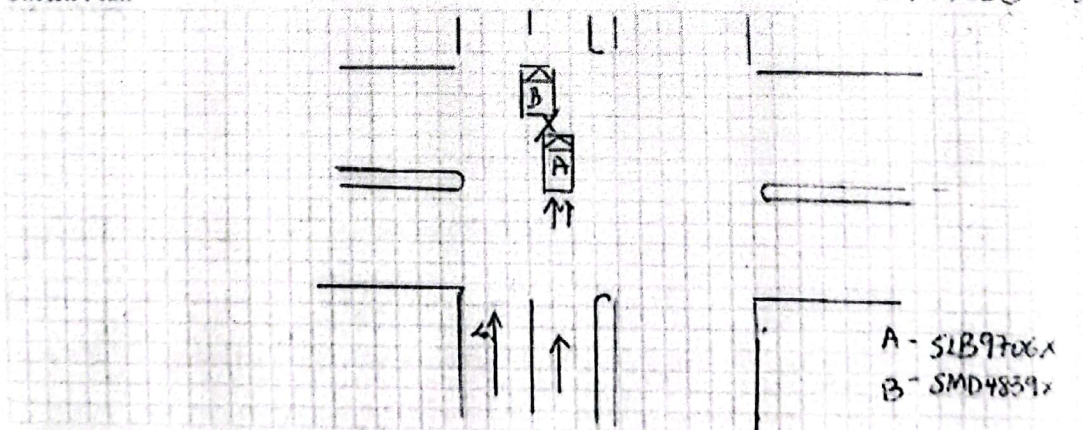
- (a) My insurer, my workshop and the General Insurance Association of Singapore ('GIA') may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the 'Personal Information') and disclose and transfer such Personal Information to 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 and packages), and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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.

[Signature]
26/7/2022
Policyholder's Signature / Date & Time

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

[Stamp]
Witnessed by Reporting Centre Personnel
26/7/22 @ 120

Sketch Plan



Describe Circumstances of the Accident

Location Crossing of N. Buona Vista Rd & Commonwealth Ave

I was going on N. Buona Vista Rd. during a regular light. The car before me stopped suddenly. I hit the brake but it was not in time, and I hit the car from behind.

Declaration

We declare the foregoing particulars are true in every respect.

M. White 26/7/2022

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

26/7/2022 @ 11:00