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.

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 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 29/07/2022 17:38 (SGT) Reported by Driver Date of Accident 29/07/2022 14:15 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE TOWARDS TUAS Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SHA4353E

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD Company Reg No 199303821R Email Address fleetsafety@cdgtaxi.com.sg Mobile Phone No (Phone) +65-97258995 Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer

Model Prius Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Reporting only your vehicle? Vehicle Category Taxi Transmission Auto CC 1798

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number VFX/P2419138

DRIVER

Name of Driver **QUEK NIAN TZE JAMES** NRIC No S1818922D Date Of Birth 11/07/1967 Occupation Outdoor

Date Of Driving Pass 17/09/2014 Driving experience 7 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-97258995 Alt. Phone Number Email Address fleetsafety@cdgtaxi.com.sg Address BLK 411 JURONG WEST STREET 42 #12-839 Address complement Postcode 640411 Is the driver the policyholder? No 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 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 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **UNKNOWN** Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

ON 29/07/2022 AT ABOUT 14:15HRS, I WAS DRIVING VEHICLE A ((SHA4353E) ALONG PIE TOWARDS TUAS BEFORE STEVENS EXIT. WHILE TRAVELLING STRAIGHT ON FIRST LANE, FRONT VEHICLE B SMX7053X WAS BRAKE AND STOP. I APPLY BRAKE BUT MY VEHICLE STILL MOVING FORWARD AND COLLIDED ONTO VEHICLE B REAR BUMPER. ALIGHTED AND REALISE VEHICLE B COLLIDED ONTO VEHICLE C (SNE7723J) REAR BUMPER. TOTAL 3 VEHICLES INVOLVED IN THIS ACCIDENT. NOBODY WAS INJURED AT THE TIME OF THE ACCIDENT.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

Yes

Reasons for not uploading a video of the accident FILE NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMX7053X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	CHAN CHEE KAI
NRIC No	S7564055B
Contact Number	(Phone) +65-81122138
Address	<u>-</u>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SNE7723J Toyota
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	SIA CHEE SIONG
NRIC No	S8271986E
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
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- 8. Consent under the Personal Data Protection Act(PDPA)

Lunderstand, acknowledge, agree and consent that :

- (a) My Insurer, my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/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 w ith 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

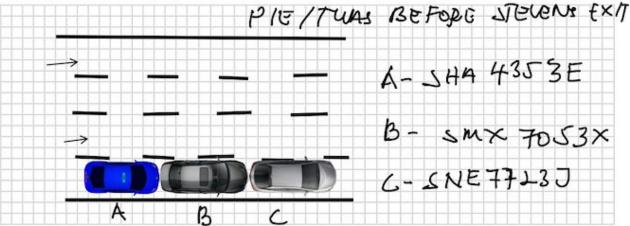
Policyholder's Signature / Date & 4/220 FRO KHAMARAJ

FLASH ACCIDENT REPORTING OFFICER

Witnessed by Reporting Centre Personnel

Sketch Plan

Time



HOCFI

Describe Circumstances of the Accident

ON 29/07/2022 AT ABOUT 14:15HRS, I WAS DRIVING VEHICLE A ((SHA4353E) ALONG PIE TOWARDS TUAS BEFORE STEVENS EXIT. WHILE TRAVELLING STRAIGHT ON FIRST LANE, FRONT VEHICLE B SMX7053X WAS BRAKE AND STOP. I APPLY BRAKE BUT MY VEHICLE STILL MOVING FORWARD AND COLLIDED ONTO VEHICLE B REAR BUMPER. ALIGHTED AND REALISE VEHICLE B COLLIDED ONTO VEHICLE C (SNE7723J) REAR BUMPER. TOTAL 3 VEHICLES INVOLVED IN THIS ACCIDENT. NOBODY WAS INJURED AT THE TIME OF THE ACCIDENT.

Declaration

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

Policyholder's Signature / Date & Time

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

FLASH ACCIDENT COGERY PROPERTING OFFICER FRO KHAMARAJ

Witnessed by Reporting Centre Personnel

