

## 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 Actual 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 ..... 26/09/2022 19:07 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 16/08/2022 13:54 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... PUNGGOL EAST ROAD  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SHB7934D

#### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... TRANS-CAB SERVICES PTE LTD  
Company Reg No ..... 200303878K  
Email Address ..... Claims@transcab.com.sg  
Mobile Phone No ..... (Phone) +65-62876666  
Alternative Phone No ..... -

#### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... PRIUS 5 DR HATCHBACK (AUTO)  
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 your vehicle? ..... No - Reporting only  
Vehicle Category ..... Taxi  
Transmission ..... Auto  
CC ..... 1798

#### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Policy Number / Cover Note Number ..... VFX/P2413997

#### DRIVER

Name of Driver ..... KOH KIM LYE KEVIN  
NRIC No ..... S1414868Z  
Date Of Birth ..... 15/07/1960  
Occupation ..... Outdoor

Date Of Driving Pass .....	28/04/1983
Driving experience .....	39 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94501551
Alt. Phone Number .....	-
Email Address .....	claims@transcab.com.sg
Address .....	926 Jurong west st 92
Address complement .....	#03-133
Postcode .....	640926
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 .....	Side Swipe
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) .....	2
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 .....	-

#### PASSENGER 1

Name .....	P1
Gender .....	Male

#### 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 received a call from Transcab saying that on 16/08/22 my vehicle was involved in an incident with a white colour vehicle. On 16/08/22 I was sending my passenger to 653 Punggol Dr which I'm not to sure where is the location. When I was turning in into golf driving range, the passenger told me that I had turn into the wrong carpark and I immediately switch on my hazard light to make a reverse back. As I check onto the rear mirror it was clear and safe for me to make a reverse back, the moment I was making a reverse back suddenly the 3rd party vehicle appears right behind my vehicle. I immediately entered the carpark to make a 3 point turn to make an exit, I wind down my window and asked her is she ok and asked if she want to check if there is any damage and she said she is alright and there's no damage and she's rushing for time and drove off so I process to send my passenger to his destination and before reaching I got another job to pick and send my next passenger to VivoCity after I picked up the next passenger I off my app as I need to pee ,after the passenger alighted I drove to Seah Imm road to go to pee and came out to have a smoke and check my taxi and saw some white paint line ,no dent or damage thereafter I continue to look for my next passenger. What "puzzled me is that after more than a month then am ask to do a report???

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	NA
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	White
Vehicle Category .....	NA / Unknown
Name of Driver .....	Na
- .....	Na
Contact Number .....	-
Address .....	Na
Address complement .....	Na
Postcode .....	Na
Insurance Company Name .....	-
Nature Of Damage .....	Na
Details of property damaged in accident .....	Na
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN****IMPORTANT NOTICE**

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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.

Policyholder's Signature / Date & Time

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

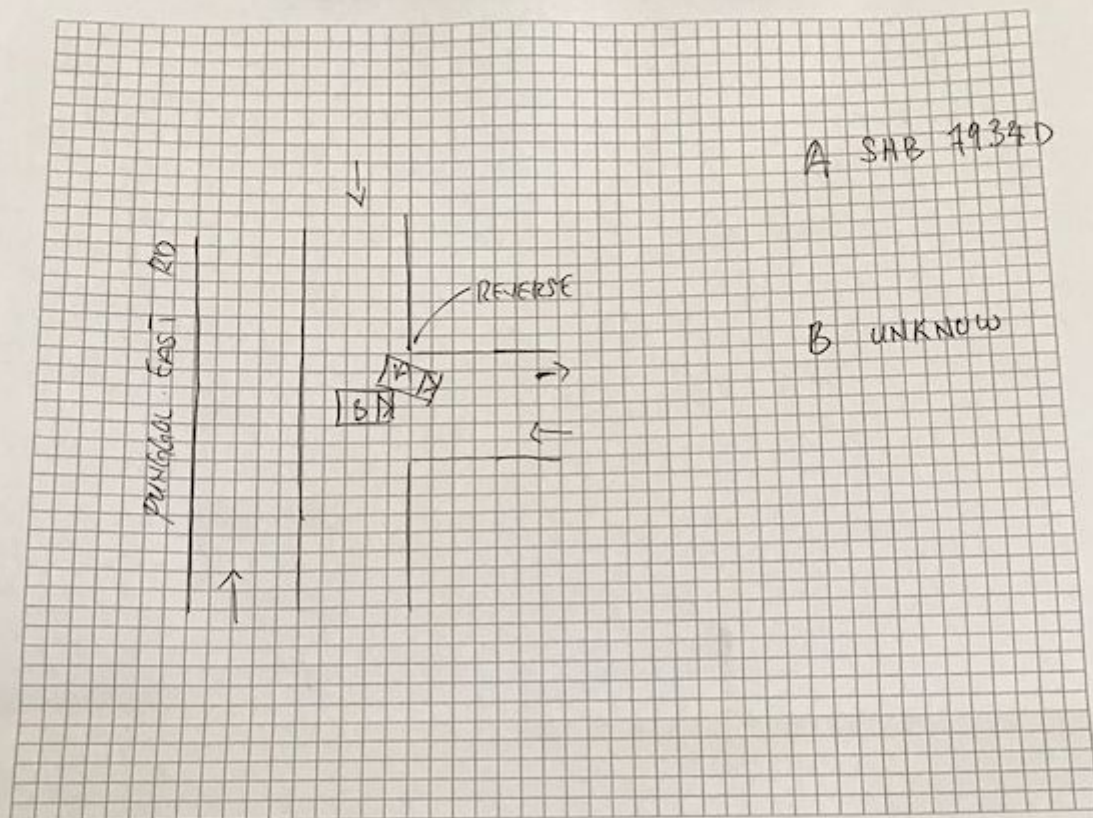
Witnessed By Reporting Officer  
Muhammad Sumardi Bin Mohd Affandi  
Witnessed by Reporting Centre  
Personnel

**Sketch Plan**

REFER TO ATTACHED ACCIDENT DIAGRAM

ACCIDENT DIAGRAM

Ver. Jun2022



Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer  
Muhammad Sumardi Bin Mohd Affandi  
Witnessed by Reporting Centre  
Personnel

AJAX MARS PTE LTD



**Describe Circumstances of the Accident**

I received a call from transcab saying that on 16/08/22 my vehicle was involved in an incident with a white colour vehicle. On 16/08/22 I was sending my passenger to 653 Punggol dr which I'm not to sure where is the location. When I was turning in into golf driving range, the passenger told me that I had turn into the wrong carpark and I immediately switch on my hazard light to make a reverse back. As I check onto the rear mirror it was clear and safe for me to make a reverse back, the moment I was making a reverse back suddenly the 3rd party vehicle appears right behind my vehicle. I immediately entered the carpark to make a 3 point turn to make an exit, I wind down my window and asked her is she ok and asked if she want to check if there is any damage and she said she is alright and there's no damage and she's rushing for time and drove off so I process to send my passenger to his destination and before reaching I got another job to pick and send my next passenger to VivoCity after I picked up the next passenger I off my app as I need to pee, after the passenger alighted I drove to Seah Imm road to go to pee and came out to have a smoke and check my taxi and saw some white paint line, no dent or damage thereafter I continue to look for my next passenger. What "puzzled me is that after more than a month then am ask to do a report???

**Declaration**

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

Witnessed By Reporting Officer  
Muhammad Sumardi Bin Mohd Affandi  
\_\_\_\_\_  
Witnessed by Reporting Centre Personnel













































