ASS. REG. BY: Steve All	
	ASSIGNMENT
From: Date:	Veh No: SJA 55557 Yr Regn: 27/12/2)
Estimated Cost:	Type: N.Cgr / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Traller or
To Inspect Vehicle No:	Make: Audi AS c.c 1984
at Workshop m/s	Colour White A/C: Insured/Std/NI/NA
of	Sp.Reading 1/325 T/Radio: Insured / Std / NI / NA
insured:	Eng/No:
Policy No.	CNO: WAY 222 PS 6N A P COUTS.
Claims No.	Gen. Cond: pool / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh;	Modi: Nil / Skim / STD A/Rim or
	Tyre Size: F: 255/357R 10
(Dallas Candillan)	
(Policy Condition)  Remark: The veh had commenced Its  N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO OF PICELLY
1	Front Rear
Ball or Market Value:  IDAC Accident Rood: Consistent? : Yes or No	R/Bal, W mm R/Bal. W mm
15.10 100.00.11	UBal. III mm UBal. IV mm
GIA / PR Seen: Consistent? : Yes or No	D.O.A. 8/10/22 D.O.I. 12/0/12
Est Repairs: days Res.: Yes or No	Demilia
Lum Sum: % 3 Val.: Yes or No	
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted: Vehicle:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	
MV-713K	
Oale/Time, File Pass W? : Preli. Report	Days Of Repair:
: Final Report	Resurvey No. of Trlp: Survey Fee:
Date/Tyne, File Return to?	Transportation:
	Add Fee: : Site Insp (\$)s + RSsi
1	:Interview (\$ ) Photo
Repart Format :	: Tech, Invs (\$ ) Others
Lump Sum / LBJ: (%	: Weel and (%
	TOTAL
•	

r nominary nominary



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** 6366 2323

**CONTACT NO FAX NO** 

6841 1183

REFERENCE

PA/OD/0874/2022/EQ

DATE

11-0ct-22

WIP

45409

### VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 12/10/2022

#### 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** 

: MS MILLIE LENG MI LIN

**ADDRESS** 

107 BUKIT WAY

SINGAPORE 587785

**TELEPHONE** 

HP +65 90613201

TYPE OF CLAIM

OWN DAMAGE CLAIM

**POLICY NO** 

7210153572

**VEHICLE NO** 

S1A 5555 1

MODEL CODE

**AUDI A5 SPORTBACK 2.0 TFS** 

**MODEL YEAR** 

27/12/2021

**ENGINE NO** 

DEM 034415

**CHASSIS NO** 

WAUZZZF56NA002175

MILEAGE

11,325

DATE IN

10-0ct-22

**ESTIMATED BY** 

JOHNNY BOO / ALLAN WU

**ACCIDENT DATE** 

8-Oct-22

PLACE OF ACCIDENT

NORTH BUONA VISTA ROAD AND DOVER

ROAD / AYER RAJAH AVE JUNCTION



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

## ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SJA 5555 J

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO CARRY OUT FIRST MEASUREMENT TEST ON CAR OLINER.	S/N	\$ 800.00	1
2	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR. CHECK FUNCTION.	S/N	\$ 360.00	
3	TO RENEW LHS 1/4 GLASS TO FACILITATE FENDER RENEWAL.	S/N	\$ 300.00	/
4	TO INSTALL SOLAR FILM FOR 1/4 GLASS.	S/N	\$ 400.00	
5	TO DISLODGE AND REINSTALL REAR WIRE HARNESS FOR LIGHTS, BATTERY MANAGER, FUSE AND RELAY TRAYS, ELECTRICAL AND AUDIO EQUIPMENT. INSPECT FOR DAMAGE AND RENEW WHERE NECESSARY.	5/N	\$ 1,600.00	
	TOTAL LABOUR CHARGES	:	\$ 3,460.00	•



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

## ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SJA 5555 J

				ESTIMATED	SURVEYOR'S
5/N	NATURE OF JOBS			CHARGES	RECOMMENDATIONS
6	TO REMOVE AND REINSTALL REAR SEAT, BACK REST, HAT TRAY, ABCD PILLAR TRIMS, LUGGAGE COMPARTMENT TRIMS. DISLODGE ROOF LINER AND DISENGAGE CURTAIN AIRBAG ETC.	S/N		1,600.00	
7 (	TO REMOVE AND REINSTALL EXHAUST SYSTEM AND REAR SUSPENSION ASSEMBLY, INCLUDING REAR AXLE AND PROPELLOR SHAFT. RENEW ACCORDINGLY.	S/N	\$	2,800.00	450
8	TO REMOVE AND REINSTALL FUEL TANK ASSY.	S/N	\$	600.00	Ü
9	TO SETUP VEHICLE ON CAR-O-LINER FOR REPAIR. ( )	S/N	\$	2,400.00	7
10	TO DISMANTLE AND RENEW REAR BUMPER. TO REMOVE AND REINSTALL LHS SILL PANEL TRIM. TO REPAIR REAR LID. CUT OUT AND WELD LHS REAR ENDER, LHS BOTTOM PLATE, LHS INNER WHEEL HOUSING, LHS OUTER WHEEL HOUSING, LHS REAR INNER SIDE PANEL AND LHS D-PILLAR REINFORCEMENT. RE-ORGANIZE REAR CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	(	s 501	15,200.00	J000
	TOTAL LABOUR CHARGES	:	\$	22,600.00	-



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

# ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SJA 5555 ]

<u> </u>	NATURE OF JOBS			ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
5/N	TO RESPRAY REAR BUMPER, REAR LID, LHS REAR FENDER, LHS INNER/OUTER WHEEL HOUSING, LHS BOTTOM PLATE, LHS D-PILLAR REINFORCEMENT, LHS INNER SIDE PANEL, LHS SILL PANEL, DRAIN PANEL, ROOF CHANNEL, DOOR ENTRANCES, END PANELLING. TO CARRY OUT STONE CHIP	x 220	s 2	8,000.00	
12	TO RENEW LHS REAR RIM. TO CARRY OUT PRE/POST WHEEL ALIGNMENT.	S/N	\$	520.00	
13	TO CARRY OUT PRE/POST DIAGNOSTIC CHECK.	S/N	\$	384.00	_
	TOTAL LABOUR CHARGES	:	\$ 	34,964.00	=



8,605.00

\$

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

# MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SJA 5555 ]

MATE	KIALLIST	DAMAGED PARTS & PRICES			& PRICES
		QTY		S/NETT	REMARKS
5/N	PARTS DESCRIPTION	4			
	DEAD RUMPER / OK	1	5	2,609.00	
1	REAR BOTTLES	1	\$	125.00	
2	REAR BUMPER SECURING STRIP - LOWER 7	1	\$	249.00	
3	REAR BUMPER SECURING STRIP OF ER	1	\$	276.00	
4	REAR BUMPER SPOILER (M)	12	\$	456.00	
5	REAR BUTTER BUTTER	12	\$	96.00	
6	REAR BUMPER REFERENCE	1	\$	1,269.00	
7	REAR OUTER TAIL LIGHT - LH / MI	1	\$	34.00	
8	REAR OUTER TAIL LIGHT TRIM - LH / MI	1	\$	1,135.00	
9	REAR INNER TAIL LIGHT - LH	1	\$	. 34.00	
10	AT	1	\$	1,131.00	V
11	REAR BUMPER REINFORCEMENT BEAM	2	\$	32.00	
12			\$	49.00	
1.	REAR BUMPER GUIDE SECTION - LH	1		52.00	
1	4 REAR BUMPER GUIDE SECTION - LH / RH MI	12	\$	188.00	
1	S REAR BUMPER HOLDING STRAP - LH / RH	9	\$	484.00	
1	A SAN ROOT LID OPENING CONTROL UNIT	1	\$		
1	THE STAINER CONTROL LINIT / MIC	1	\$	9.00	
	8 REAR BOOT LID OPENING SENSOR LINE	1	\$	228.00	
	9 AERIAL KEY ACCESS	1	5	120.00	
	O AERIAL RETAINER - LH 2 - BT	1	\$	29.00	
2	1 ALMAC MENTAL TO A STATE OF THE STATE OF TH		_		•

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.

SUB TOTAL SPARE PARTS



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

## MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SJA 5555 J

## **DAMAGED PARTS & PRICES**

QTY		S/N	ETT	REMARKS
1	\$		192.00	
1	5		75.00	
_			797.00	
12	\$			
1	\$		266.00	
4	\$		10.00	
			449.00	
1	٥			
1	\$		21.00	
1	\$		163.00	
1	ċ		104.00	
1			4 076 00	
1	\$			
1	\$		798.00	
1	ς.		22.00	
			506.00	
1	\$			
1	4	5	715.00	
1		5	305.00	
			229.00	
J	L	>		
	1	5	62.00	
	1	\$	1,561.00	
	1	5	379.00	
	1	\$	00.00	
		-	11 398 00	-
	٠	<del>-</del>	11,550.00	=
	1 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1 \$ 192.00 1 \$ 75.00 797.00 1 \$ 266.00 4 \$ 10.00 1 \$ 449.00 1 \$ 21.00 1 \$ 163.00 1 \$ 104.00 1 \$ 4,076.00 1 \$ 798.00 1 \$ 22.00 1 \$ 506.00 1 \$ 715.00 1 \$ 305.00 1 \$ 229.00 1 \$ 62.00 1 \$ 379.00 1 \$ 379.00 1 \$ 379.00

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.



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

## MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SJA 5555 J

## **DAMAGED PARTS** & PRICES

s/N	PARTS DESCRIPTION	QTY		S/NETT	REMARKS
	DEAR WHEEL HOUSING LINER - LH / CP4	1	\$	299.00	
41	REAR WILLEL HOUSING CHILL			176.00	
42	REAR WHEEL HOUSING LINER ATTACHMENT PARTS $\ oldsymbol{\chi}$	1	\$	399.00	
43	REAR CROSS PANEL TRIM 🐰	1	\$		
44	REAR LUGGAGE COMPARTMENT FLOOR COVERING Y	1	\$	786.00	
45	REAR LUGGAGE COMPARTMENT TRIM - LH	1	5	1,153.00	
	EXHAUST SILENCER - LH / M	1	\$	1,226.00	
46	EXHAUST SILENCER BRACKET	1	\$	45.00	
47	0	1	\$	956.00	
48		1,2	\$	766.00	
49	EXHAUST TAILT IT E THAT	1	\$	169.00	
50	EXHAUST HEAT SHIELD - LIT	1	\$	76.00	
5	1 EXHAUST HEAT SHIELD - CENTER '-	1	\$	3,643.00	
5		1	\$	963.00	
5	3 REAR LOWER ARM CONTROL		\$	624.00	
5	4 REAR UPPER ARM CONTROL - LH	1		137.00	
	55 REAR SUSPENSION - LH FRONT	1	\$	501.00	
	56 REAR SUSPENSION - LH REAR	1	\$	188.00	
	TRACK DOD - LH 1	1	\$		
	PEARING HOUSING - LH	1	\$	1,097.00	
	DEADING	1	\$	723.00	
		1	\$	49.00	
	60 REAR STONE CHIP GUARD - LH		5	13,976.00	
	SUB TOTAL SPARE PARTS	•	_	,	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.



55 UBI ROAD 1, SINGAPORE 408699 55 UBI ROAD 1, SINGAPORE 408699 16L: 6366 2323 FAX: 6841 1183 16L: 6366 2323 FAX: 6841 1183 16L: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

# MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SJA 5555 J

## DAMAGED PARTS & PRICES

PARTS DESCRIPTION	QTY	S/NETT	REMARKS
68 ACRYLIC SEALANT / NC 69 CAVITY WAX / NC 70 STONE CHIP / NC 71 METAL FILLER POWDER / NC	1 1 1 1 1 1 5/N 5/N 5/N	\$ 342.00 \$ 94.00 \$ 456.00 \$ 363.00 \$ 136.00 \$ 221.00 \$ 180.0 \$ 140.0 \$ 180.0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
TOTAL SPARE PARTS TOTAL LABOUR CHARGES GRAND TOTAL	:	\$ 37,371.0 \$ 34,964.0 \$ 72,335.0	00

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.

5 UBI ROAD 1, SINGAPORE 408699 EL:6366 2323 FAX: 6841 1183

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

NAME

SURVEYED DATE

**AUTHORISED DATE** 

**EXCESS COST** LIABILITY

REMARKS

Steve (LKK)
13/10/17, 17.30 pm
00-1/1 pc
EXMIN ?
1/10/17

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:

JOHNNY BOO BODY REPAIR MANAGER ALLAN WU CLAIMS CONSULTANT

SP1422AA0004 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 10/10/2022 14:21 (SGT) SUBMITTED BY: FOONG CHIN FONG VERSION: 1 (10/10/2022 14:21 (SGT))



## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow in a sance compared.

3. Information provided must be as fruitful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow incurance companies to reposate 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 Sungapore (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 accessed

#### **ACCIDENT STATEMENT**

Date of Submission Reported by Date of Accident **Exact Location of Accident** 

Additional Location Information

Country/State of Loss

10/10/2022 14:21 (SGT)

Driver

08/10/2022 22:30 (SGT)

North Buona Vista Rd & Dover Rd, Singapore

NORTH BUONA VISTA ROAD AND DOVER ROAD / AYER

RAJAH AVE JUNCTION

Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJA5555J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No Email Address Mobile Phone No

Alternative Phone No

No

MILLIE LENG MI LIN

SXXXX155C

PBLENG@YAHOO.COM.SG (Phone) +65-90613201

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

CC

Audi

A5

SPORTBACK 2.0 TFS

Private use

Yes

Private car Auto

1984

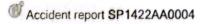
INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number AIG Asia Pacific Insurance Pte. Ltd. 7210153572

DRIVER

Name of Driver NRIC No Date Of Birth

MATTHEW YEO MING SXXXX387D 29/04/1998



Page 1 of 48



Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
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

Indoor 17/01/2019 3 YEARS AND 9 MONTHS Male (Phone) +65-90688994

-MATTHEW.YEOMING@GMAIL.COM 107 BUKIT WAY

-587785 No Child No

-

CIENCEAU INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Fload Surface Collision - Head to Rear Clear Dry

MOREASTON RESERVE

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 2 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement

Name Gender COCO LEE JIA JIA Female

PETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No
Alt. Police Station Phone No
Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No

CIRCLA CANCES OF AL. DENT

I WAS DRIVING HOME AFTER PICKING UP MY GIRLFRIEND ON THE 8TH OF OCTOBER AT APPROX 10.30 PM FROM ONE NORTH TO BUKIT TIMAH HILL. I WAS MAKING A RIGHT TURN AT THE JUNCTION OF NORTH BUONA VISTA ROAD, DOVER ROAD & AYER RAJAH ROAD FROM NORTH BUONA TO DOVER ROAD. IT WAS A GREEN LIGHT AND THERE WAS NO IMMEDIATE TRAFFIC (NO RED ARROW, NO GREEN ARROW). I DROVE AND MADE THE RIGHT TURN AND AS I WAS ENTERING DOVER ROAD, I HEARD AND FELT A LOUD IMPACT THAT HIT THE BACK OF MY CAR REALLY HARD. I CALLED THE POLICE AND AMBULANCE AS WE FELT (ME AND MY PASSENGER) PAIN DUE TO THE IMPACT. TO NOTE, I WAS IN THE LAST LANE WHEN I GOT HIT.

ATTACHMENT(S)

Accident report SP1422AA0004

Page 2 of 48



## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SNG2024R Vehicle Manufacturer Toyota Vehicle Model Alphard Vehicle Variant Vehicle Colour White Vehicle Category Private car Name of Driver TOH PENG YOM Contact Number (Phone) +65-83884322 Address Address complement Postcode

Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

### **INJURED PERSONS DETAILS**

#### INJURED 1

Name of injured person MATTHEW YEO MING Gender Male Phone No (Phone) +65-90688994 Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SJA5555J Were seat belts worn? Was this injured conveyed to hospital by ambulance?

#### INJURED 2

Name of injured person COCO LEE JIA JIA Gender Female Phone No (Phone) +65-89088877 Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? SJA5555J Were seat belts worn? Was this injured conveyed to hospital by ambulance?

### SKETCH PLAN

- WPORTANT NOTICE I correctly the details of the accident to speed up the clarry process it be completed by the Policyholder end/or the Authorised Driver colors rais: to as truthful and accurate as possible. Any willul representation or withholding of material facts may companies to regudiate policy liability a acceptance of this Form by insurance companies is not an admission of policy fability on the part of the insurance porting may be referred to the Police for Investigation the Forwardon by the insurers of the GIA Records Management Centre established by the General Insurance Association IAL for archiving and that copies of this report will for a fee be made available upon application by interested parties. ment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the
  - der the Personal Data Protection Act (PDPA)

ist available afcresord

- knowledge, agree and consent that my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose my personal data/personal information set out in this (form) and any other personal information provided by me or by insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) and vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be red to as the Insurers"), the Insurers lawyers/law firms, the Monetary Authority of Singapore and any relevant ncy/authority, such as the police), for the purpose(s) of
  - randing and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
  - the appident and or my claims;
  - and/or dealing with my instructions or responding to any enquiries by me;
  - g my claims (including the making of correspondence, statements, invoices, reports or notices to me, which could involve train personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail
  - th applicable awarn administering, processing, handling and/or dealing with my claims.

on sture / Date &

- witchave insured vehicle(s) involved in this accident and the insurers' law yers/law firms, may/are permitted to collect ther process by Personal Information for one or more of the above Purposes, and
- information may/can be disclosed by any of the Insurers and/or GM to their third party service providers or agents ralyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

Driver's Signature (f driver is not the policyholder) / Date

Witnessed by Reporting Centre

Setch P North Bord Yoth Rd

YAR EDWN & YAR

ZXC : HSN 024R

Page 4 of 48

Describe Circumstances of the Accident
The grade pay to begin them this arrived to the sin of cooks . He
A The other a continuent by fretal of but have a size of the
H was a shall bound that mo co minutes before to him when H
love and made the north full med to I was offered to the control total to the control total to the control total t
to the myslet
to rote, I was on the lest lone when I got him!.

### Declaration

While declare the foregoing particulars are true in every respect

10 001 2022

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

10.40 m

Witnessed by Reporting Personnel Tony 1.

Policyholder's Signature / Date & Time

Accident report SP1422AA0004

**CS** CamScanner