SJ0G22AC000U / JP Knights Pte Ltd ENTRY DATE & TIME: 12/10/2022 15:31 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (12/10/2022 15:31 (SGT))

# **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 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 12/10/2022 15:31 (SGT) Reported by Driver Date of Accident 11/10/2022 19:40 (SGT) Exact Location of Accident Binjai Park, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Mazda

1496

Vehicle Registration Number SLR2861G

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner LION CITY RENTALS PTE LTD Company Reg No 201504621K Email Address lcrarc@lioncityrentals.com.sg Mobile Phone No (Phone) +65-94758388 Alternative Phone No (Office) +65-62525525

### VEHICLE PARTICULARS

Manufacturer

Model 3 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 - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto

#### **INSURANCE COMPANY**

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Policy Number / Cover Note Number 22-MN000208-R00

#### DRIVER

CC

Name of Driver TAN LI SHAN NRIC No S8927645D Date Of Birth 08/08/1989 Occupation Outdoor

Date Of Driving Pass 13/03/2013 Driving experience 9 YEARS AND 7 MONTHS Gender Female Mobile Number (Phone) +65-94758388 Alt. Phone Number Email Address lcrarc@lioncityrentals.com.sg Address BLK 206 ANG MO KIO AVENUE 1 #07-1041 Address complement Postcode 560206 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 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 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? 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE 11/01/2022 AT ABOUT 1940 HOURS, I WAS DRIVING VEHICLE A (SLR2861G) ALONG BINJAI PARK WHEN VEHICLE B (SMJ3991M) DROVE OUT OF A MINOR ROAD FROM A CARPARK EXIT TO JOIN THE MAJOR ROAD WHICH IS BINJAI PARK. AND HIS RIGHT WING MIRROR HIT ONTO MY RIGHT WING MIRROR AS HE ENCORACHED INTO MY LANE COMING FROM THE OPPOSITE DIRECTION. IT WAS A SINGLE LANE DUAL CARRIAGEWAY AND I WAS IN MY LANE AT ALL TIMES WITHOUT ANY SUDDEN MOVEMENT. NOBODY IS INJURED. ATTACHMENT(S) Are accident photos available for attachment? Yes

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Nο

Vehicle Registration NumberSMJ3991MVehicle ManufacturerHondaVehicle Model-Vehicle Variant-Vehicle Colour-



Was there any video captured by Car Camera?

Vehicle Category	Private hire
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)	1

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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
- 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)

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), w hich may be sited outside of Singapore, for one or more of the above Purposes.

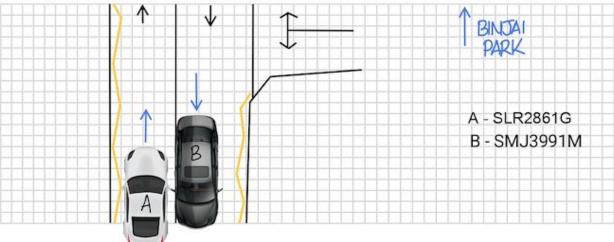


Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 12/10/22 1300

Witnessed by Reporting Centre Personnel

#### Sketch Plan



Describe Circumstances of the Accident

ON THE 11/01/2022 AT ABOUT 1940 HOURS, I WAS DRIVING VEHICLE A (SLR2861G) ALONG BINJAI PARK WHEN VEHICLE B (SMJ3991M) DROVE OUT OF A MINOR ROAD FROM A CARPARK EXIT TO JOIN THE MAJOR ROAD WHICH IS BINJAI PARK, AND HIS RIGHT WING MIRROR HIT ONTO MY RIGHT WING MIRROR AS HE ENCORACHED INTO MY LANE COMING FROM THE OPPOSITE DIRECTION. IT WAS A SINGLE LANE DUAL CARRIAGEWAY AND I WAS IN MY LANE AT ALL TIMES WITHOUT ANY SUDDEN MOVEMENT. NOBODY IS INJURED.

## Declaration

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

RENTALS OF THE STATE OF THE STA

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time 12 10 22 1300

Witnessed by Reporting Centre Personnel



















