DATE OF ACCIDENT : 02/11/2022 TIME : 2050

LOCATION : Serangoon Road towards CTE

INFORMANT'S PARTICULARS

1) VEHICLE NO. : SMT8464H MODEL : Toyota Corolla

2) INSURANCE CO.: NTUC POLICY NO.: 5128632203

3) CLAIM TYPE : **OWN DAMAGE / THIRD PARTY / REPORTING ONLY (PLS CIRCLE)**

4) OWNER NAME : Na Lai Renovation and Construction Pte Ltd I/C TEL: 94596666

5) OWNER EMAIL : kenz.nalairnc@gmail.com ALTERNATIVE PHONE NO.:

6) DRIVER NAME : Pang Jing Xun I/C S7738321 TEL: 94596666

7) DRIVER OCCUPATION : Director EMAIL : Kenz.projects@gmail.com

8) RELATIONSHIP WITH OWNER : Owner

9) DOES DRIVER OWN ANY CAR? **YES / NO** (QN 9 & 10 APPLY FOR NON OWNER ONLY)

10) DRIVER'S OWN VEHICLE REG NO.: INS CO.:

11) WEATHER CONDITION : CLEAR / RAINING / OTHERS

12) ROAD SURFACE : DRY / WET / OTHERS

13) ANY SCENE PHOTOS : YES / NO

14) ANY VIDEO CAPTURED BY CAR CAMERA : YES / NO

15) EXACT PURPOSE OF VEHICLE BEING USED AT TIME OF ACCIDENT : Private Use

16) I HAVE BEEN APPROACHED BY UNKNOWN PERSON(S) SOLICITING/OFFERING ACCIDENT CLAIMS ASSISTANCE : YES / NO

17) NO. OF PASSENGERS (INCLUDING DRIVER) : 01 A)PASSENGER NAME: MALE / FEMALE

18)No. of Vehicle involved (including own vehicle): 02 B)PASSENGER NAME: MALE / FEMALE

THIRD PARTY (OTHER VEHICLE) PARTICULARS

VEHICLE 1

1) VEHICLE NO.: SKR3761S MODEL:

2) DRIVER NAME : I/C

3) ADDRESS :

4) CONTACT NO.: INS CO:

VEHICLE 2

1) VEHICLE NO.: MODEL:

2) DRIVER NAME : I/C

3) ADDRESS :

4) CONTACT NO.: INS CO:

*** ANY FOREIGN VEHICLE INVOLVED IN THE ACCIDENT : (YES / NO)**

IF YES, FOREIGN VEHICLE NO.:

FOREIGN VEHICLE CATEGORY :

WITNESS PARTICULARS

1) ANY WITNESS (YES / NO) – IF YES,PLS PROVIDE AS BELOW :-

2) NAME & NRIC : TEL:

3)RELATIONSHIP WITH INVOLVED PARTIES :

OTHERS

1) ANY INJURIES **(YES / NO)** IF YES,STATE INJURY SUSTAIN :

2) WAS ACCIDENT REPORTED TO POLICE (YES/NO) – IF YES, PLEASE PROVIDE A COPY OF POLICE REPORT.

3) WAS NOTICE OF INTENDED PROSECUTION GIVEN (YES/NO) – IF YES,PLS PROVIDE A COPY OF THE NOTICE.

4) WAS ANY INVOLVED DRIVER TESTED / CHARGED FOR DRINK DRIVING DUE TO THE ABOVE ACCIDENT (YES/NO).

DRIVER'S SIGNATURE & DATE

CHENG HOE MOTOR PTE LTD (AMK)

97820185 (Whatsapp)

Email : chmamk@singnet.com

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 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. 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/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "**Purposes**")

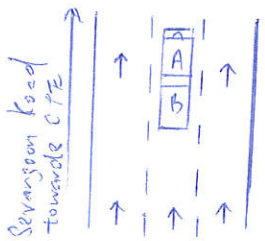
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

Na Lai Renovation & Construction Pte Ltd
Reg. No: 202200278C
80 Geylang Bahru #01-2630
Singapore 339688

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel

Sketch Plan



Veh A - SMT8464H
Veh B - SKR3761S

Describe Circumstances of the Accident

Refer to Police Report :

Declaration

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

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Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel