

VEHICLE NO: SLO7792U

MAKE & MODEL: Honda Vezel

AUTO / MANUAL

DATE OF ACCIDENT

04 / 11 / 2022.

*C.C.

TIME OF ACCIDENT

10:30 AM / PM

LOCATION OF ACCIDENT

Bukit Bator Central x Bukit Bator Ave 1.

EXACT PURPOSE USED AT TIME OF ACCIDENT

EMPLOYMENT / PRIVATE USE / PRIVATE HIRE

NAME OF OWNER

Ang Chin Yee Estner.

EMAIL:

cassidykh@hotmail.com

Office:

MOBILE: 98712909

NRIC

S1753967A.

CLAIM TYPE

OD / THIRD PARTY / REPORTING ONLY

FLEET POLICY:

YES / NO?

INSURANCE CO.

Allianz

TYPE OF COVERAGE

Comprehensive / Third Party / Third Party Fire & Theft

POLICY NO.

NAME OF DRIVER

AS ABOVE / IF NO: Yam Kok Hong

NRIC

S1525377J

DATE OF BIRTH

15 / 12 / 1962.

ANY PASSENGER

YES / NO: TOTAL 2 passengers.

NAME OF PASSENGER

Ang Chin Yee Estner + Yam Yi Fan Evania

GENDER OF PASSENGER

MALE / FEMALE

OCCUPATION

Outdoor / Indoor

DATE OF DRIVING PASS

16 / 12 / 1983.

GENDER

Male / Female

CONTACT NO.

Mobile: 94307356 Office:

Home:

EMAIL:

ADDRESS

3 Sengkang East Ave #14-07 S(544813).

DOES DRIVER OWN OTHER VEHICLES?

NO / If yes: Reg No:

INSURER:

RELATIONSHIP

Employee / If No: Spouse

WEATHER CONDITION

Clear / Raining / Other:

ROAD SURFACE

Dry / Wet / Other:

ANY INJURIES

No / If yes: Who?

CONTACT NO.

POLICE REPORT

No / If yes: Where?

NOTICE OF INTENDED PROSECUTION GIVEN?

NO / IF YES: WHO?

VEHICLE B NO.

SFS4883L. Any Passenger: 02. passengers.

NAME

CONTACT NO.

VEHICLE C NO.

Any Passenger:

VEHICLE D NO.

Any Passenger:

VEHICLE E NO.

Any Passenger:

VEHICLE F NO.

Any Passenger:

ANY WITNESS

WITNESS CONTACT NO.

WAS THERE ANY VIDEO CAPTURE?

YES / NO

WAS THERE ANY AUDIO RECORDED?

YES / NO

SCENE ACCIDENT PHOTOS TAKEN?

YES / NO

**WORKSHOP:

Have you been approach by unknown person soliciting (s) /

offering accident claims assistance?

YES / NO

SKETCH PLAN

... the details of the accident to speed up the claims process.

... signed by the Policyholder and/or the Actual Driver.

... to be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may affect the validity of the policy.

... The signature of this Form by insurance companies is not an admission of policy liability on the part of the insurance company.

Reporting may be referred to the Traffic Police Department for investigation.

... Forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore.

... It is stated and that copies of this report will for a fee be made available upon application by interested parties.

... In addition to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being forwarded to the relevant authorities.

... Personal Data Protection Act (PDPA)

... I agree and consent that:

... the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose,

... and/or transfer such Personal Information set out in this form and any other personal information provided by me or

... (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurers,

... involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be

... the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant

... authority (such as the police), for the purpose(s) of:

... and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to

... my claims and/or my claims.

... in handling with my instructions or responding to any enquiries by me.

... my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve

... personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail.

... in the law in administering, processing, handling and/or dealing with my claims.

... and/or

... the insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect

... and/or use my Personal Information for one or more of the above Purposes; and

... which may/are disclosed by any of the Insurers and/or GIA to their third-party service providers or agents

... (which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature]

Date/Time

[Signature]

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

Witnessed by Reporting Centre Person A
(Name as in NRIC/ID card)

Vehicle A: SLQ7792U

Vehicle B: SKS4883L

→ Bukit Batok Avenue 1.

A

B

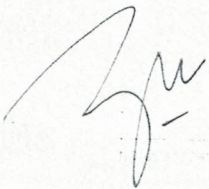
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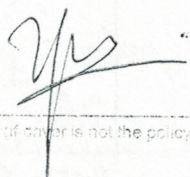
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BUKIT BATOK CENTRAL

On the stated date & time, I, vehicle 'A', SLQ7792U,
 was stationary along the stated vehicle for about more
 than 10 seconds due to red light. Suddenly, vehicle 'B',
 SKS4883L, collided onto my stationary vehicle's rear
 portion.

I hereby declare that the above information is true in every respect.





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

Witnessed by Reporting Centre Person(s)
 (Name as in NRIC/ID card)