

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 08/11/2022 19:00 (SGT) Reported by Date of Accident 07/11/2022 22:30 (SGT) Exact Location of Accident Singapore Additional Location Information SINGAPORE INDOOR STADIUM CARPARK Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number **GBJ1378C**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SHOW PRODUCTION PTE LTD Company Reg No 201911054W Email Address SALES@SHOWPRODUCTION.SG Mobile Phone No (Phone) +65-88681378 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Variant Exact purpose for which vehicle was being used at time of accident **Employment** Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Goods vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003024562

DRIVER

Name of Driver MATTHEW CHUA HOE SIN NRIC No S9814439J Date Of Birth 09/05/1998 Occupation Outdoor

Date Of Driving Pass 22/09/2022 Driving experience 2 MONTHS Gender Male Mobile Number (Phone) +65-94513276 Alt. Phone Number Email Address MATTHEWCHUA89@YAHOO.COM.SG Address 31 BENDEEMER ROAD #09-867 S330031 Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 Collided into Parked Vehicle Weather Conditions Clear Road Surface Wet 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? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT SEE ATTACHED REPORT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SMJ7137L Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car

(Phone) +65-64608614

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)	-

SKETCH PLAN

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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")

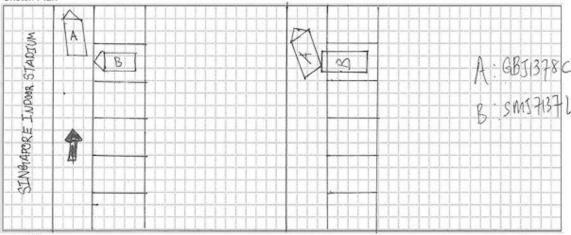
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawvers/law firms, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the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

Date & Time Policyholde

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

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

Sketch Plan



vJun2022

Describe Circumstance of the Accident On the 7/11/12, at Indoor Stadium corpork at around 1930pm, I attempted to park my
vehicle. There were 5 empty parking lats. I stopped my vehicle and turned on my harand
lights. Upon chucking that the road was clear, I feward while sloudy terning into
the lak. I think that the other goody moved forward; from the garding lak and
both of our which cam into contact.

Declaration

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



Date & Time
Actual Drivery Signature (if driver is not the policyholder)
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)



vJun2022

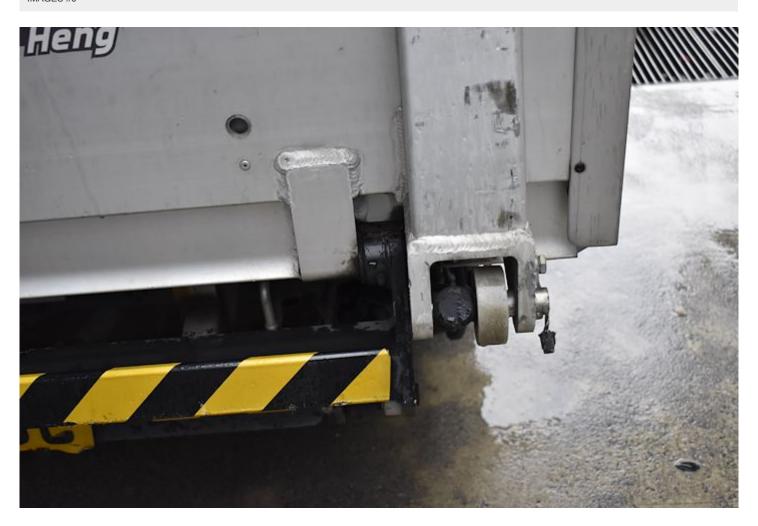


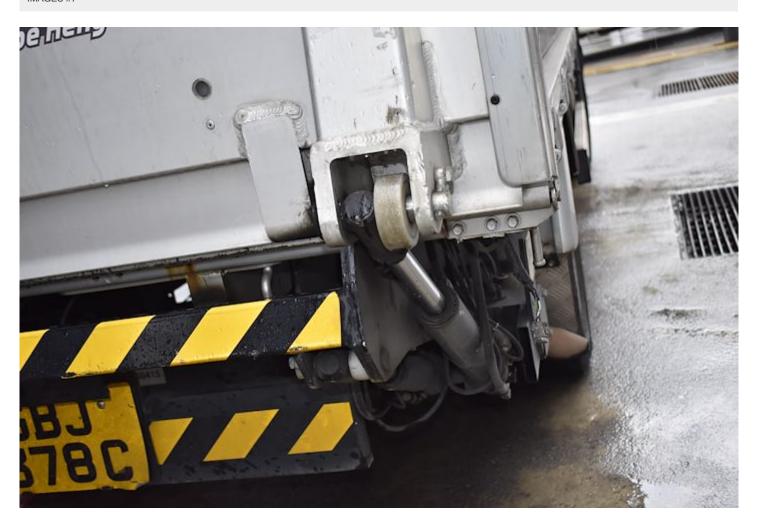


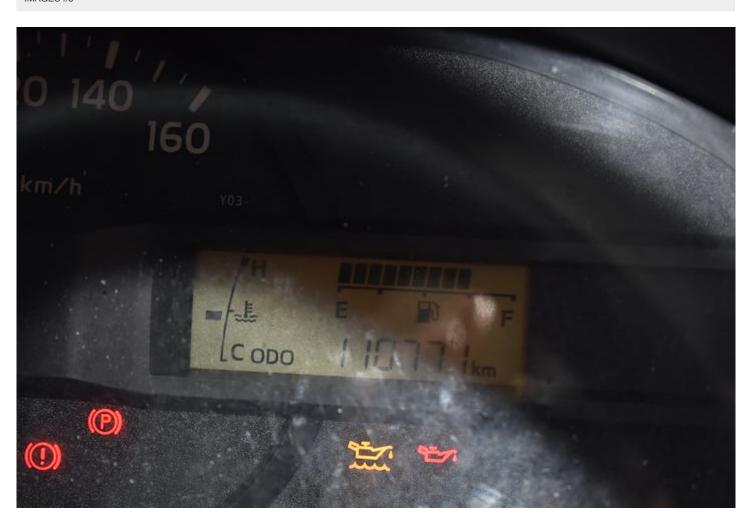


















Allianz Insurance Singapore Pte. Ltd.

POLICY SCHEDULE COMMERCIAL MOTOR INSURANCE POLICY

: 05 October 2022 Date of Issue

SP2003024562 Policy Number

ALLIANZ COMMERCIAL MOTOR INSURANCE Type of Cover

COMPREHENSIVE - AUTHORISED WORKSHOP Plan Type

Intermediary Code 0000302

Intermediary TAN & LEONG INSURANCE AGENCY PTE LTD

Policyholder/Insured SHOW PRODUCTION PTE. LTD.

UEN : 201911054W

: RENTING AND LEASING OF PROFESSIONAL RADIO AND TELEVISION SETS Nature of Business

AND SOUND REPRODUCING AND RECORDING EQUIPMENT

Correspondence Address : 52 UBI AVENUE 3 #02-41 FRONTIER SINGAPORE 408867

Replacing Cover Note

Number

AIS/AG/2022/0002833

Period of Insurance From: 02 October 2022 To: 01 October 2023 (both dates inclusive)

Premium Payable : S\$ 2,259.83 GST 7% 158.19 : S\$ Total Premium Payable : S\$ 2,418.02

Make and Model TOYOTA DYNA 150 5MT Body Type LORRY - HOOD/TAILBOARD

Registration Number GBJ1378C Private Hire Use : NO Year of Registration : 2018 Seating Capacity : 3

Cubic Capacity : 2982 CC Windscreen Limit : UNLIMITED

Tonnage : 1.49 TONNES No Claim Discount : 0%

Chassis Number : JTFAT35Y20K210915

Engine Number : 1KD2809645

Hire Purchase Owner /

Leasing Company

: NA

3000.00 Excess Young, Elderly and/or Inexperienced Driver 55 600.00 Own Damage S\$

Windscreen S\$ 100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C 79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg