SP1822CF0008 / PROGRESSIVE CAR CARE PTE LTD ENTRY DATE & TIME: 15/12/2022 16:34 (SGT) SUBMITTED BY: Liang Siew Chin VERSION: 1 (15/12/2022 16:34 (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.

- 4. The issue and acceptance of this is form by instrained 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 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 15/12/2022 16:34 (SGT) Reported by Driver Date of Accident 15/12/2022 10:35 (SGT) Exact Location of Accident Killiney Rd, Singapore Additional Location Information KILLINEY ROAD SINGAPORE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLD8292H

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ASIA CAR LEASING PTE. LTD. Company Reg No 201437397C Email Address SIMON@ASIACARRENTAL.COM.SG Mobile Phone No (Phone) +65-94559450 Alternative Phone No (Office) +65-62828585

VEHICLE PARTICULARS

Manufacturer Toyota Model Vellfire Variant TOYOTA / VELLFIRE 2.5 CVT S/R 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

your vehicle? No - Reporting only Vehicle Category Private hire Transmission Auto CC 2494

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number SLD8292H

DRIVER

Name of Driver TAN ENG HUN REMY @ MUHAMMAD HILMI TAN NRIC No S1651414D Date Of Birth 14/11/1964 Occupation Indoor

Date Of Driving Pass 17/07/1998 Driving experience 24 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-83798000 Alt. Phone Number Email Address SIMON@ASIACARRENTAL.COM.SG Address APT BLK 35 CHAI CHEE AVENUE #04-260 Address complement Postcode 461035 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 Raining 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 REFER TO ATTACHED STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD TEL 67415336 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 SHD528D Vehicle Manufacturer Vehicle Model Vehicle Variant

Taxi

Vehicle Colour
Vehicle Category

Name of Driver	ENG TSE YANG
NRIC No	S7026194D
Contact Number	(Phone) +65-97856298
Address	<u>-</u>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

IMPORTANT NOTICE

SKETCH PLAN

- Please report <u>correctly</u> 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 withholding of material facts may allow
- 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 Traffic Police Department for investigation.
- 6. This report will be forwarded by the insurers to 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.
- 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 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

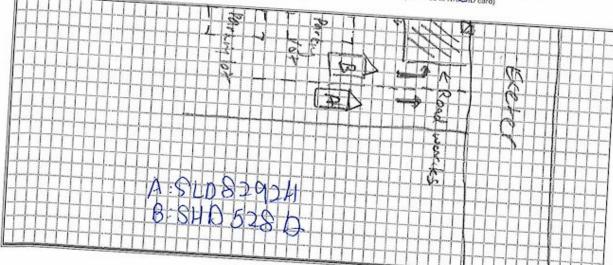
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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:
- (f) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to (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.
- (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 versitaw firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholyer's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

Sketch Plan



1

crite Circumstance of the Accident On 15 Dec 2020, at 10.359m, I was driving SLO82924. On 15 Dec 2020, at 10.359m, I was driving SLO82924. along Killiney Rd, turning lefts Exeter Rd, I extracededly hit the TAX, SHO 5280 which was alighting passenger. The weather was slight dirigiling. P.S. There was a Road works at the Juntion of Killiney Rd and Exeter Rd.	
- les was slight driggling.	
- les was slight driggling.	
- les was slight driggling.	
P.S. There was a head works at the Juntion of killing Rd and Exeter Rd.	
P.S. There was a Read works at the juntion of killing Rd and Exeter Rd.	
killing Rd and Exetor Rd.	
Killing Ra and Can	
	-
	1
	1
	7
	_
Declaration I/We declare the foregoing particulars are true in every respect. I/We declare the foregoing particulars are true in every respect. I/We declare the foregoing particulars are true in every respect.	m
Declaration I/We declare the foregoing particulars are true in every respect. If you wish to claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim if you wish to claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim if you wish to claim against war five policy, please be advised that your insurer for more details. If you wish to claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim in the claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim in the claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim in the claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim in the claim against war five policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim in the claim against war five policy.	
must be made within the made w	





