SJ0G22CC0019 / JP Knights Pte Ltd ENTRY DATE & TIME: 12/12/2022 18:56 (SGT) SUBMITTED BY: Weine Chieng VERSION: 1 (12/12/2022 18:56 (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
- 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. 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 12/12/2022 18:56 (SGT) Reported by Driver Date of Accident 10/12/2022 14:50 (SGT) **Exact Location of Accident** Whampoa E, Singapore Additional Location Information TOWARDS SERANGOON ROAD

Country/State of Loss

Singapore

Hyundai

1580

DETAILS OF OWN VEHICLE

Vehicle Registration Number SH97871

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD Company Reg No 1XXXXX821R **Email Address** fleetsafety@cdgtaxi.com.sg Mobile Phone No (Phone) +65-65508768 Alternative Phone No (Office) +65-98591081

VEHICLE PARTICULARS

Manufacturer

Model Ae ioniq Variant Exact purpose for which vehicle was being used at time of Private hire office and another the second Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Taxi Vehicle Category

INSURANCE COMPANY

Transmission

AXA Insurance Pte Ltd Name of Insurance Company VFX/P2419138 Policy Number / Cover Note Number

DRIVER

CC

ONG EE LYE Name of Driver SXXXX228B NRIC No 14/12/1956 Date Of Birth Outdoor Occupation

Date Of Driving Pass	22/11/2007
Driving experience	15 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98591081
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 62 GEYLANG BAHRU # 10 - 3379
Address complement	-
Postcode	330062
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
and the same and the same same same same same same same sam	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry
	Diy
OTHER INFORMATION	
Was any foreign vehicle involved in the ancident	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	2
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance? Translator's name	No
_	-
	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-
PASSENGER 1	
Name	UNKNOWN
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-
11 7001 2821101	

CIRCUMSTANCES OF ACCIDENT

ON 10.12.2022 AT ABOUT 1450HRS I WAS DRIVING MY VEHICLE A SH9787L FETCHING MY PASSENGER TO QUEENSTOWN LIBRARY, MY VEHICLE A WAS ON THE MOST RIGHT LANE OF WHAMPOA EAST TURNING RIGHT ONTO SERANGOON ROAD. VEHICLE B SMS9843X WHICH WAS ON MY LEFT WAS TURNING RIGHT AS THE SAME TIME, CUT INTO MY LANE ON SERANGOON ROAD. HIS VEHICLE B RIGHT SIDE SWIPE MY VEHICLE A LEFT FRONT. MY PASSENGER IS NOT INJURED AND I PROCEEDED TO SEND HER TO DESTINATION AFTER TAKING SCENE PHOTOS BUT PARTICULARS EXCHANGED.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident

Yes Yes

FILE IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	SMS9843X BMW
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	i iivate cai
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Insurance Company Name Nature Of Damage	-
	-
Details of property damaged in accident	RIGHT SIDE
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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- 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) 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' law yers/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 the claims;
- (ii) investigating the accident and/or my claims:
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (w) 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

龙峰荣,

Driver's Signature (If driver is not the policyholder) / Date & Time 12.12.2022 1225HRS Witnessed by Reporting Centre

FLASH ACCIDENT

KYMI YONG

Sketch Plan

A - SH9787L

Policyholder's Signature / Date &

B-SMS9843X



Describe Circumstances of the Accident

EXCHANGED.

ON 10.12.2022 AT ABOUT 1450HRS I WAS DRIVING MY VEHICLE A
STIPPOPE PETCHING MY PASSENGER TO OLIFENSTOWN LIBORDY MY
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VOT INTO MY LANE ON SERANGOON ROAD. HIS VEHICLE R DIGHT
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MY PASSENGER IS NOT INJURED AND I PROCEEDED TO SEND HER
TO DESTINATION AFTER TAKING SCENE PHOTOS BUT PARTICULARS
EVOLIANOED

Declaration

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

Policyholder's Signature / Date &

Time

Driver's Signature (if driver is not the policyholder) / Date & Time 12.12.2022

1230HRS

FLASH ACCIDENT REPORTING OFFICER KYMI YONG

Witnessed by Reporting Centre