

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 Actual 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 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.
- 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

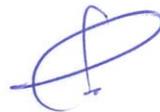
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



[Signature]

S15282288

12 JAN 2023

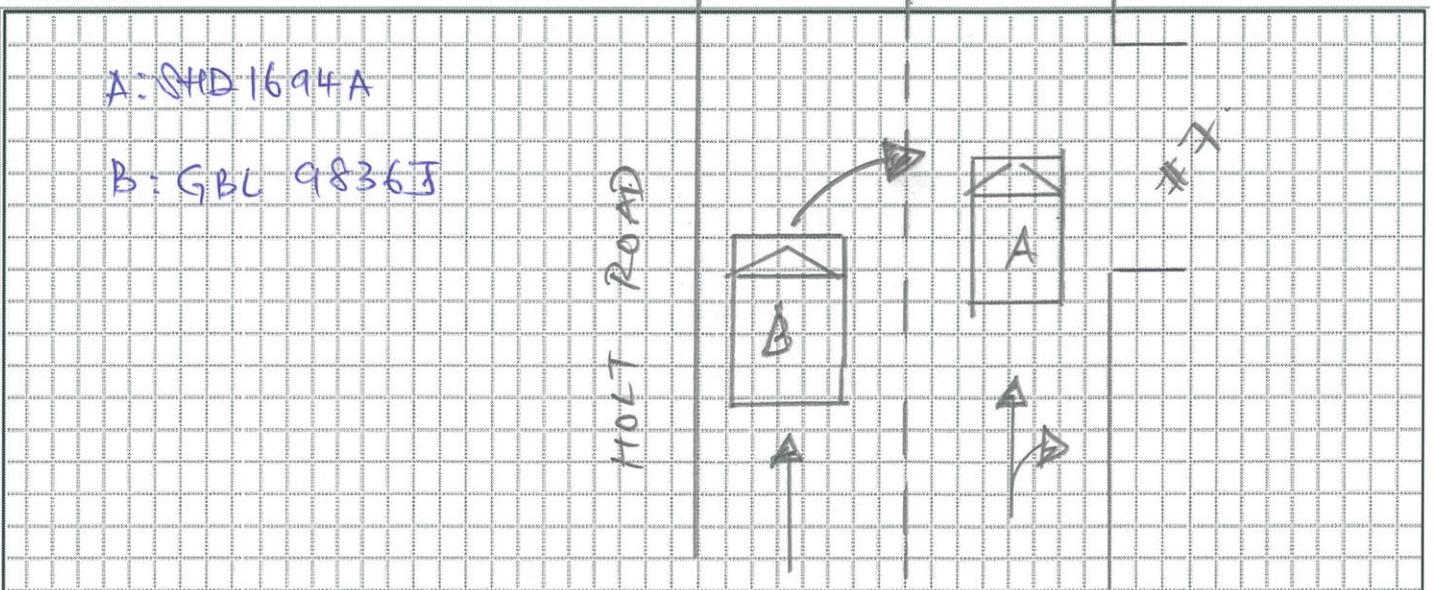


Policyholder's Signature / Date & Time

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

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

Sketch Plan



Describe Circumstances of the Accident.

ON 12/01/2023 @ 12:50 HRS, I WAS DRIVING MY TAXI (SHD 1694 A) TRAVELLING ALONG HOLT ROAD WITH 3 PASSENGERS ONBOARD (A COUPLE WITH AN INFANT) – ON THE RIGHT LANE OF A ONE WAY ROUTE (ARROW ON ROAD SURFACE SHOWS STRAIGHT AHEAD & RIGHT TURN).

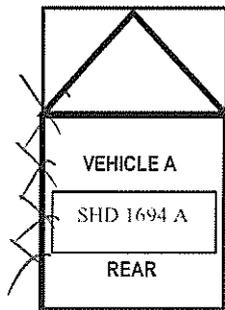
WHILE I WAS MOVING STRAIGHT AHEAD, SUDDENLY VEHICLE B (GBL 9836 J – HONDA VAN/WHITE) WHICH WAS INITIALLY ON THE LEFT LANE (ARROW ON ROAD SURFACE SHOWS STRAIGHT AHEAD ONLY), HAD ENCROACHED & COLLIDED ONTO THE LEFT PORTION OF MY TAXI WHILE MAKING HER ILLEGAL RIGHT TURN INTO UNIT #7 OF HOLT ROAD.

DUE TO THE IMPACT, MY TAXI HAD DAMAGES ON THE LEFT PORTION & VEHICLE B HAD DAMAGES ON THE FRONT RIGHT PORTION.

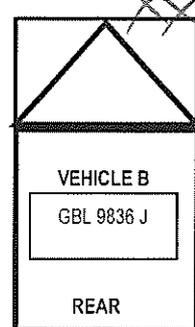
NO INJURY INVOLVED. NO AMBULANCE AT SCENE.
NO PASSENGERS ONBOARD VEHICLE B.

*VIDEO FOOTAGE CAPTURED

DAMAGES FOUND ON VEHICLE A & VEHICLE B



PREMIER
TAXI



THIRD PARTY
VEHICLE

 51528228 B

Driver's Signature & NRIC Number
Thursday, January 12, 2023 @ 3:03:15 PM

(attended by )

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

GBL9836J

Date of Accident

12/01/2023 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **Allianz Insurance Singapore P...**

Period of Insurance **30/08/2022 - 25/04/2023**

Requested By **GOH WEE DEK (PREMIER AUTO...**

Requested Date **12/01/2023 16:44**

Payment details

Request Amount: **S\$1.85**
 GST Amount: **S\$0.15**
 Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre
 GST Registration No: **M400017735**