# **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 02/02/2023 10:15 (SGT) Reported by Driver Date of Accident 01/02/2023 16:30 (SGT) Exact Location of Accident Balestier Rd, Singapore Additional Location Information BEFORE CTE CITY Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number SNF4493L

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner FOCUS RENTALS PTE LTD Company Reg No 201836450G **Email Address** operations@focusrentals.sg Mobile Phone No (Phone) +65-96989808 Alternative Phone No (Office) +65-98875600

VEHICLE PARTICULARS

Manufacturer

Model Prius Variant **PLUS** 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 No - Reporting only your vehicle?

Vehicle Category Private hire Transmission Auto CC 1798

**INSURANCE COMPANY** 

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D20MFL0007747 02

DRIVER

Name of Driver HONG SHAO WEI NRIC No S1556585C Date Of Birth 20/07/1962 Occupation Outdoor

Date Of Driving Pass 26/07/1984 Driving experience 38 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-96989808 Alt. Phone Number Email Address operations@focusrentals.sg Address BLK 834 YISHUN STREET 81 #08-422 Address complement Postcode 760834 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 Collision - Change/cross lane Weather Conditions Clear Road Surface Dry 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? Nο Translator's name Translator's ID 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 01/02/2023 AT ABOUT 1630HRS I WAS DRIVING VEHICLE A (SNF4493L) ALONG BALESTIER ROAD. WHILE DRIVING STRAIGHT NEAR JUNCTION BETWEEN BALESTIER ROAD AND SLIP ROAD TOWARDS CTE CITY I MADE A LANE CHANGE TO MY LEFT, I HAVE SIGNALLED LEFT AND CHECKED MY BLINDSPOT AND THE LANE WAS CLEARED WHILE DOING SO I DID NOT HEAR ANY SOUND OR HORN SUDDENLY VEHICLE B (SNA9758S) SWIPE VEHICLE A FRONT LEFT PORTION. NOBODY WAS INJURED DURING THE ACCIDENT. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SNA9758S

Accident report SJ0G2322000F

Vehicle Registration Number

Vehicle Manufacturer	Honda
Vehicle Model	Shuttle
Vehicle Variant	_
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	ONG HUI LING
NRIC No	S9125617G
Contact Number	(Phone) +65-97416382
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please correctly report the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorized Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any willful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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 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.
- (ii) 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 involvedisclosure 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.



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 21/02/2023 2035HRS

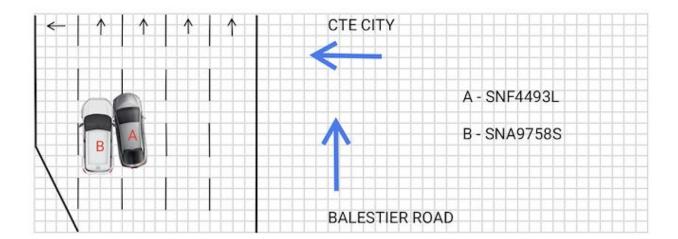
FRO NAZREEN

REPORTING OFFICER

Witnessed by Reporting Centre Personnel

FLASH ACCIDENT

## Sketch Plan



### Describe Circumstances of the Accident

ON 01/02/2023 AT ABOUT 1630HRS I WAS DRIVING VEHICLE A (SNF4493L) ALONG BALESTIER ROAD. WHILE DRIVING STRAIGHT NEAR JUNCTION BETWEEN BALESTIER ROAD AND SLIP ROAD TOWARDS CTE CITY I MADE A LANE CHANGE TO MY LEFT, I HAVE SIGNALLED LEFT AND CHECKED MY BLINDSPOT AND THE LANE WAS CLEARED WHILE DOING SO I DID NOT HEAR ANY SOUND OR HORN SUDDENLY VEHICLE B (SNA9758S) SWIPE VEHICLE A FRONT LEFT PORTION. NOBODY WAS INJURED DURING THE ACCIDENT.

# Declaration

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

Reg. No.: 201836450G

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 01/02/2023 2035HRS

FLASH ACCIDENT Code
REPORTING OFFICER
FRO NAZREEN

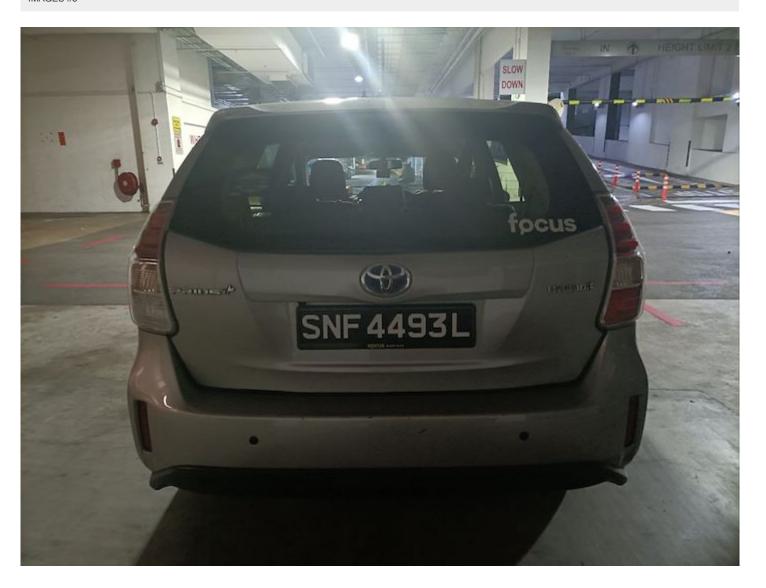
Witnessed by Reporting Centre Personnel



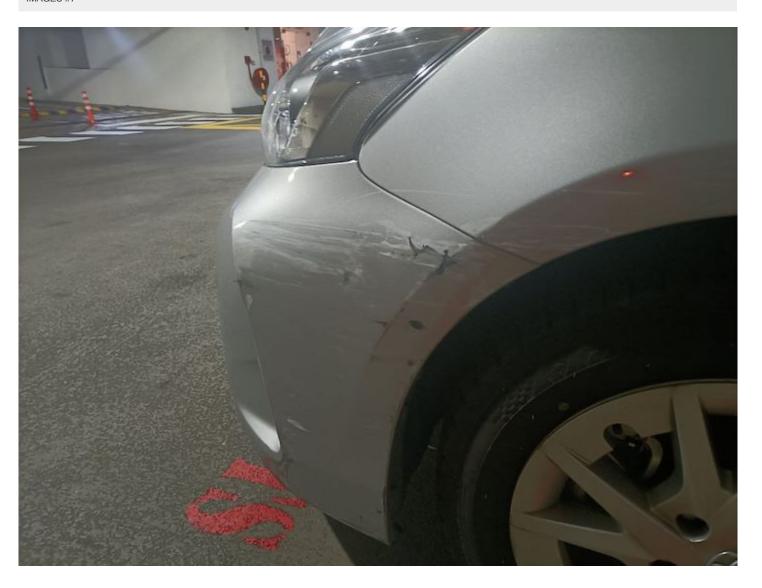


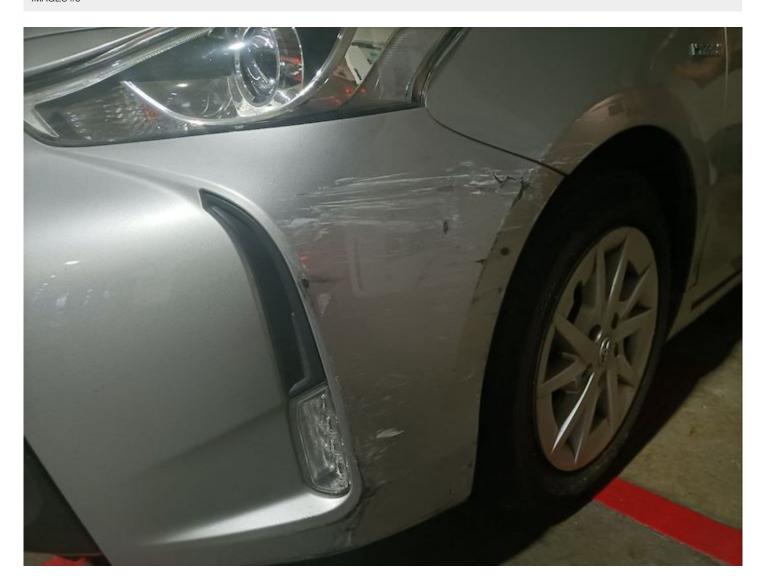


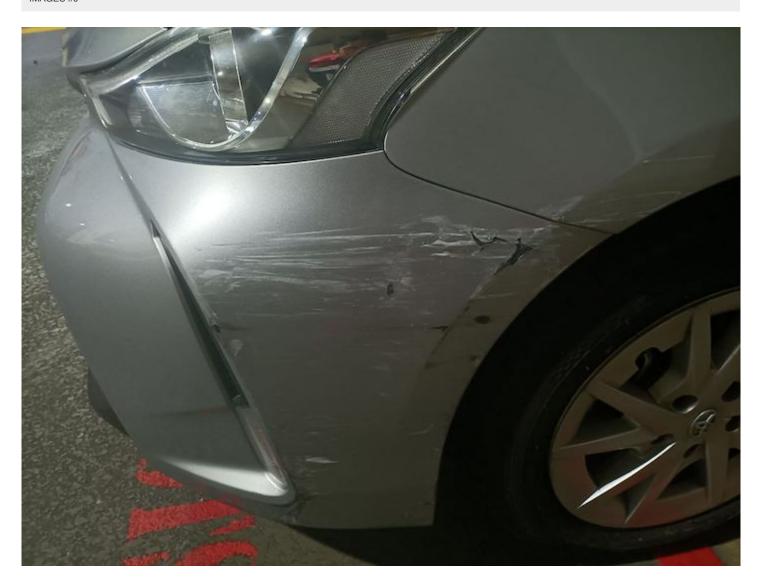




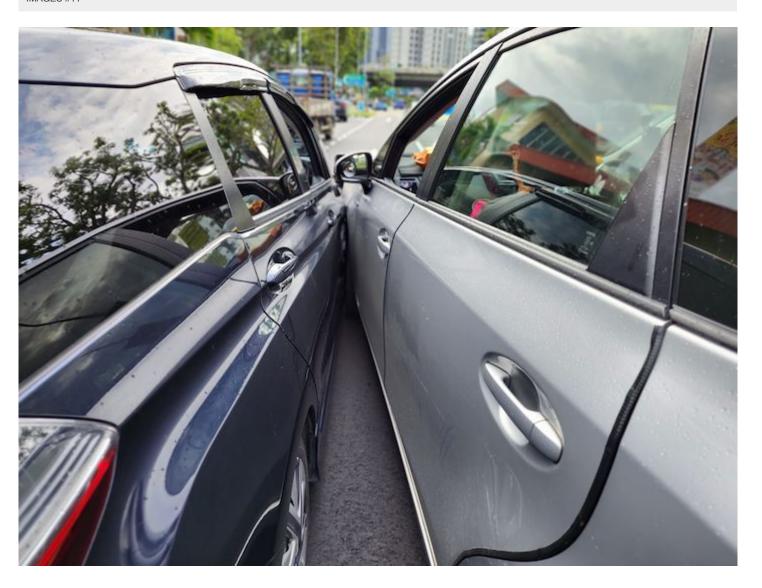




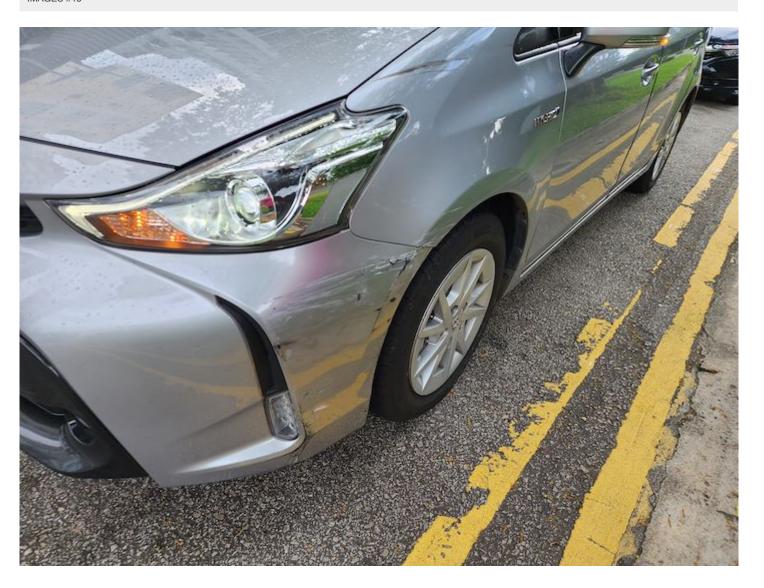


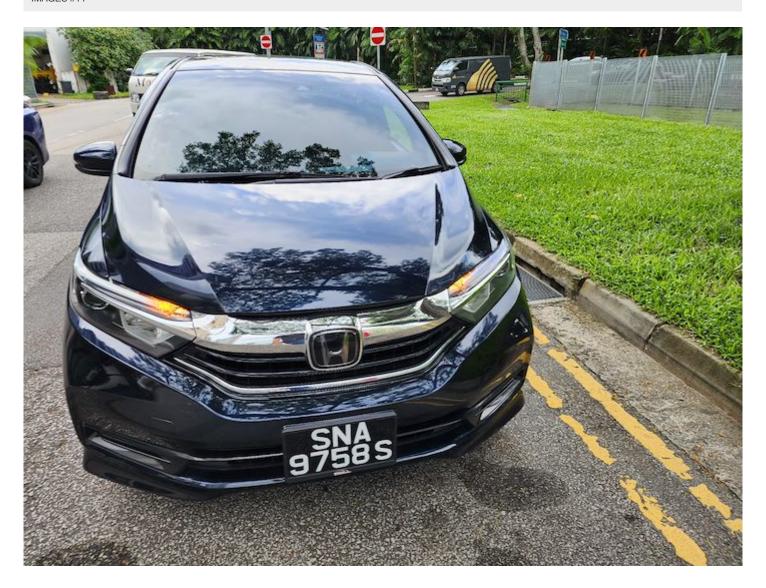


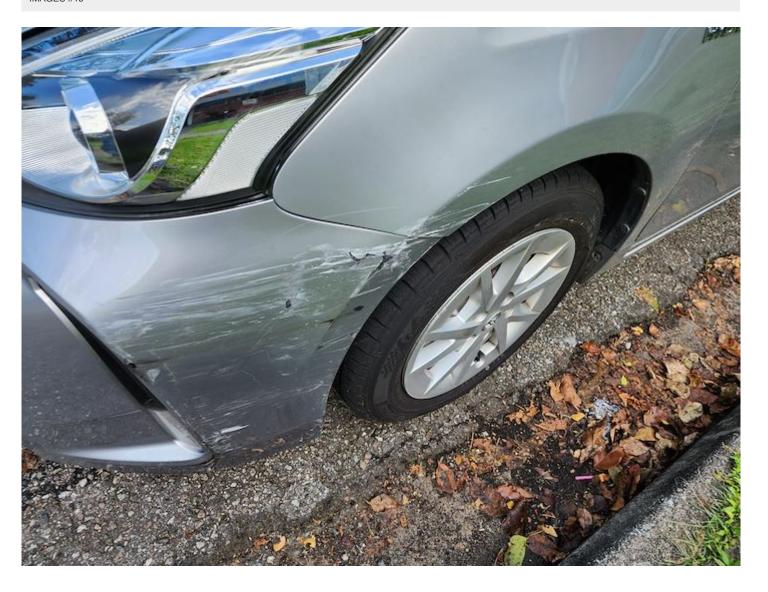


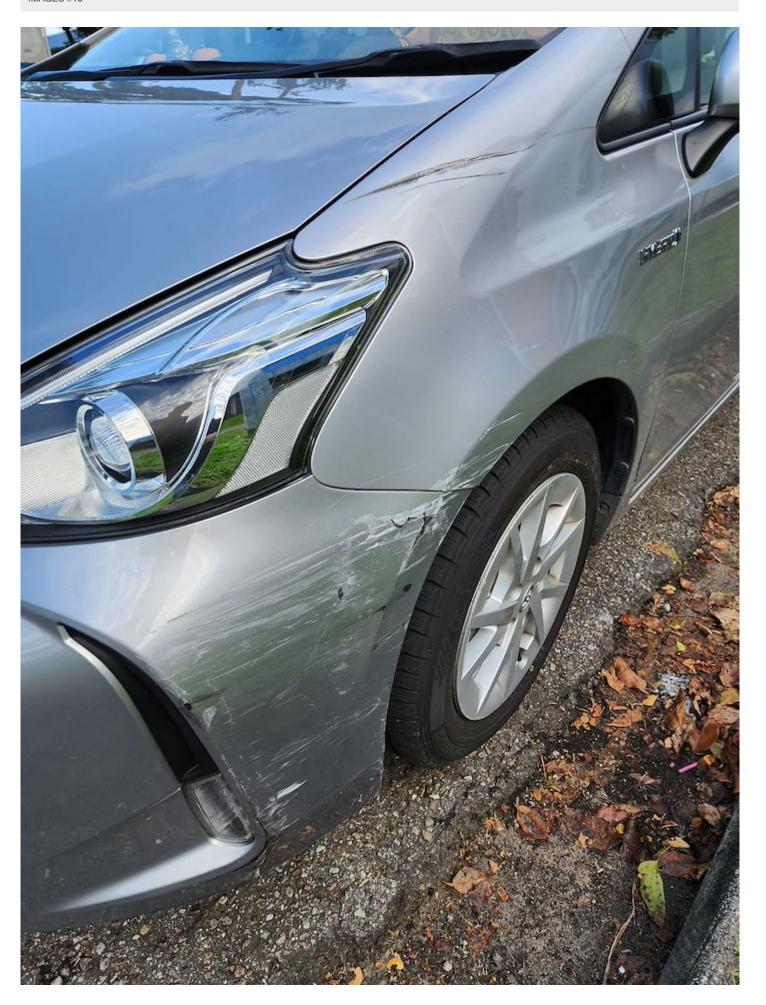


































IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

		ADD	ENDUM		
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:				
	Original Report No:	SJ0G2322000F	Vehicle Registration No: SNF4493	E	
	Name (as shown in NRIC)FOCUS RENTALS PTE LTD NRIC/FIN/Passport No: 201838450G				
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate				
	Address:		Singapo	re ( )	
	Contact (Tel):		Mobile No.:		
	Email Address:				
	Date of Accident:	01/02/2023	Time of Accident: 16:30		
	Place of Accident:	Balestier Rd,			
	Insurance Company	India International Insur	ance Pte Ltd		
(B)	B) ADDITIONAL INFORMATION /AMENDMENTS:				
(10)	I have made a report on the above-mentioned accident and would like to include additional information or				
	make the following amendments:				
	UPDATE REL	ATIONSHIP			
	S				
	<u> </u>				
	03 (2018) 03 (2018)	LS 000 PM 000 PM 0000 PM	Sáz		
	Policyholder / Drive	er's Signature	Reporting Centre Personnel's Signa	ature	
	Date:		Name: NRIC/FIN No.: Date: 02.02.2023		

CACcident report SJ0G2322000F

