

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 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 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 | 21/01/2023 10:39 (SGT) |
| Reported by | Driver |
| Date of Accident | 20/01/2023 17:00 (SGT) |
| Exact Location of Accident | Sentosa Gateway, Singapore |
| Additional Location Information | - |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------------------|
| Vehicle Registration Number | SMN7135X |
| INSURED/POLICYHOLDER | |
| Is company? | Yes |
| Name Of Registered Owner | COMFORTDELGRO RENT-A-CAR PTE LTD |
| Company Reg No | 1XXXXX775H |
| Email Address | dannyng@cdgrentacar.com.sg |
| Mobile Phone No | (Phone) +65-97372587 |
| Alternative Phone No | (Office) +65-68820888 |

VEHICLE PARTICULARS

| | |
|--|---------------------|
| Manufacturer | Mazda |
| Model | 3 |
| Variant | - |
| 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 | 1496 |

INSURANCE COMPANY

| | |
|-----------------------------------|---------------------------------------|
| Name of Insurance Company | India International Insurance Pte Ltd |
| Policy Number / Cover Note Number | D20MFL0000326_02 |

DRIVER

| | |
|-----------------|------------------------|
| Name of Driver | MORRELL EMMA CATHERINE |
| Passport No/FIN | GXXXX895K |
| Date Of Birth | 30/06/1979 |
| Occupation | Outdoor |

| | |
|---|------------------------|
| Vehicle Category | Private hire |
| Name of Driver | HO CHII FEI (HE QIHUI) |
| NRIC No | SXXXX779E |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | 3 |

Describe Circumstances of the Accident

ON THE 20/01/2023 AT ABOUT 1700 HOURS, I WAS DRIVING VEHICLE A (SMN7135X) ON LANE 1 ALONG SENTOSA GATEWAY HEADING TOWARDS KEPPEL ROAD WHEN I NOTICED THE TRAFFIC LIGHT HAD JUST TURNED RED AND I APPLIED MY BRAKES TO TRY TO COME TO A HALT WHEN THE CAR SKIDDED FORWARD DESPITE ME FULLY ON THE BRAKES, DUE TO THE WET ROAD SURFACE AND MY FRONT HIT ONTO THE LEFT RIM AND FENDER AREA OF VEHICLE B (SKZ8350U) WHO HAD JUST TURNED OUT OF A U-TURN AHEAD OF ME. NOBODY IS INJURED.

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

21/01/23

0830

Witnessed by Reporting Centre Personnel



