

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.

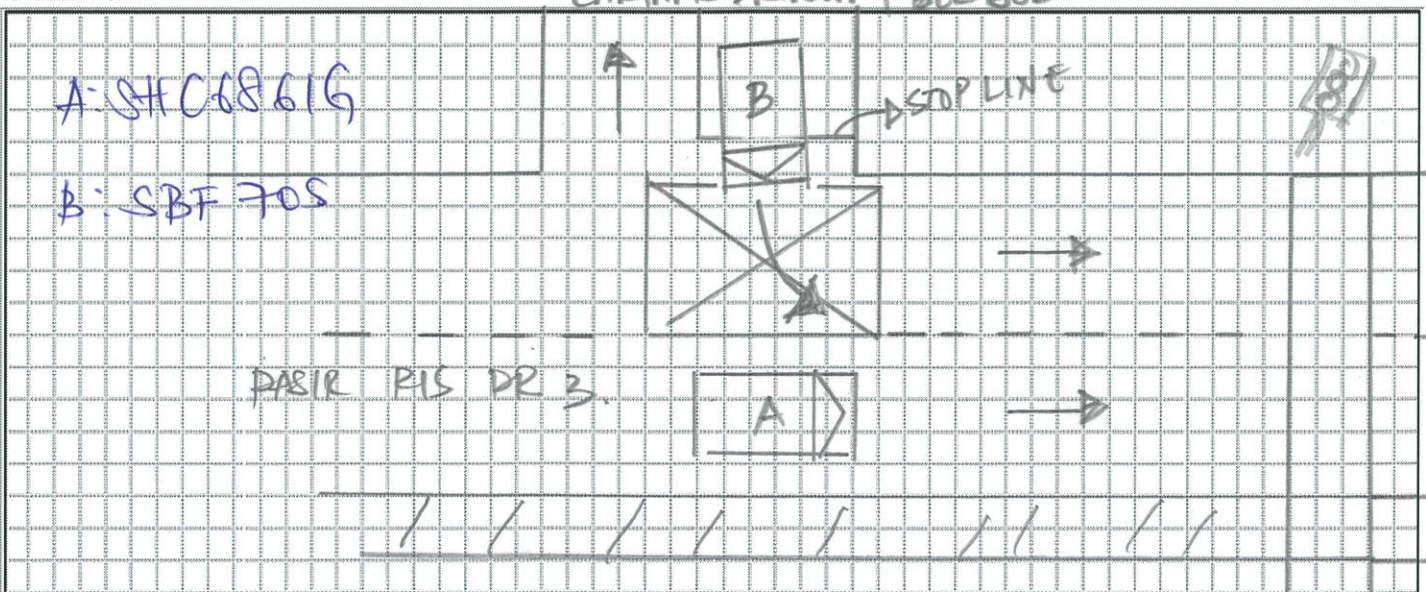


Policyholder's Signature / Date & Time

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 10/02/2023 @ 08:35 HRS, I WAS DRIVING MY TAXI (SHC 6861 G) TRAVELLING ALONG PASIR RIS DRIVE 3, WITH MY SPOUSE ONBOARD – ON THE RIGHT LANE.

WHILE I WAS MOVING STRAIGHT AHEAD, SUDDENLY I FELT AN IMPACT FROM MY LEFT.

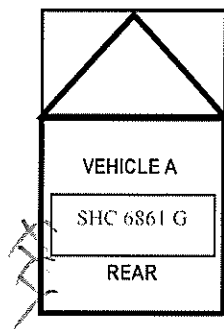
WHEN INSPECTED, I DISCOVERED THAT VEHICLE B (SBF 70 S – TOYOTA/RED) WHICH WAS EXITING FROM CARPARK DRIVEWAY ON MY LEFT (BLK 602) – HAD FAILED TO KEEP FOR PROPER LOOK OUT, FAILED TO GIVE WAY TO ONCOMING VEHICLES FROM MY ROUTE, HAD ENCROACHED & COLLIDED ONTO THE LEFT PORTION OF MY TAXI.

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

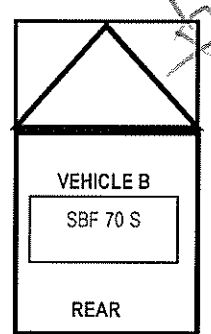
NO INJURY INVOLVED. NO AMBULANCE AT SCENE
VEHICLE B HAD HIS SPOUSE ONBOARD.

*VIDEO FOOTAGE CAPTURED

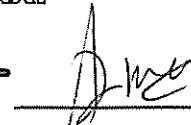
DAMAGES FOUND ON VEHICLE A & VEHICLE B




PREMIER
TAXI



THIRD PARTY
VEHICLE

 51591227/H

Driver's Signature & NRIC Number
Friday, February 10, 2023 @ 9:29:11 AM

(attended by )

Text size + -

Enquire Transaction History**Transaction History Details**

Log Date/Time:	02 Sep 2015 / 08:15:04	Receipt No.:	AACCK001-AX239-150902-000025
Asset Type:	Vehicle	Transaction Amount:	\$69,270.00
Asset ID:	SHC6861G	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20150902081504423086		

Vehicle No.:	SHC6861G
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Scheme:	Taxi (Company)
First Registration Date:	02 Sep 2015
Original Registration Date:	02 Sep 2015
Vehicle Make:	KIA
Vehicle Model:	OPTIMA 1.7(A) DIESEL
Chassis No.:	KNAGM414MF5588165
Engine No.:	D4FDEH313290
Motor No.:	-
Trailer Chassis No.:	-
Propellant:	Diesel
Passenger Capacity:	4
Engine Capacity:	1685
Power Rating:	-
Unladen Weight:	1584
Maximum Laden Weight:	2050
Primary Color:	Silver
Secondary Color:	-
Manufacturing Year:	2014
Open Market Value:	\$21,255.00
Minimum PARF Benefit:	\$13,054.00
PARF Eligibility:	Y
No. of Transfer:	0
Effective Ownership Date/Time:	02 Sep 2015 08:15:04
COE No.:	2015090201003478C
COE Expiry Date:	01 Sep 2023
COE Bid Category:	-
Actual QP/PQP Paid Amount:	\$47,373.00
Lifespan Expiry Date:	01 Sep 2023


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SBF70S

Date of Accident

10/02/2023 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance Allianz Insurance Singapore P...

Period of Insurance 28/12/2022 - 27/12/2023

Requested By VINCENT CHUA WEE AN (PREM...

Requested Date 10/02/2023 09:54

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**