

**ACCIDENT STATEMENT**

Date	12/02/2023
Time	15:45 HR
Location	Upper Changi Road East.
VEHICLE (A)	GBH 5347B Make & Model: TOYOTA Hiace.
Name of owner	Spice Village Catering Pte Ltd
NRIC / Company Registration No.	201308383D.
Email	
Contact	HP: Tel: Fax:
Type of claim	Own Damaged / Third Party / Reporting Only
Purpose of use	Private / Commercial / Hire & Reward
Insurance Company	AXA.
Type of Policy	Comprehensive / Third Party, Fire&Theft / Third Party Only
Policy number	
Name of driver	As above / If No: Mohamed Thoufeek Abdul Saleem
NRIC no	98661891K. Any Passenger: 0
Date of birth	02/11/1994
Occupation	Indoor / Outdoor
Gender	Male / Female
Contact	83875805
Address	3015 Bedok North St 5, #02-03 S(486350)
Driving Passed date	18/06/2019
Email	
Relationship with the Insured	Owner / Children / Spouse / Employee / Others:
Does the driver own any other vehicle	No / if Yes: Vehicle no: Ins. Co:
Type of Collision	side
Weather conditions / Road surface	Clear / Raining - Dry / Wet / Others:
Any Police Report lodged	No / Yes: Where?
Notice of Intended Prosecution Given?	No / Yes: Against who?
Anybody injured in the accident?	No / Yes: Who / Vehicle no?
Any other material or property damaged?	No / Yes
Any foreign vehicle involved?	No / Yes: Vehicle no:
Any video captured by car camera?	No / Yes
VEHICLE (B) - THIRD PARTY	SLR9287T
Name of driver	01 male
NRIC / FIN no. / Passport number	
Contact	
Insurance Company	
Details of Witness	- HP:
Other Vehicles	(C) - Any Passenger:
	(D) Any Passenger:
	(E) Any Passenger:



## 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.

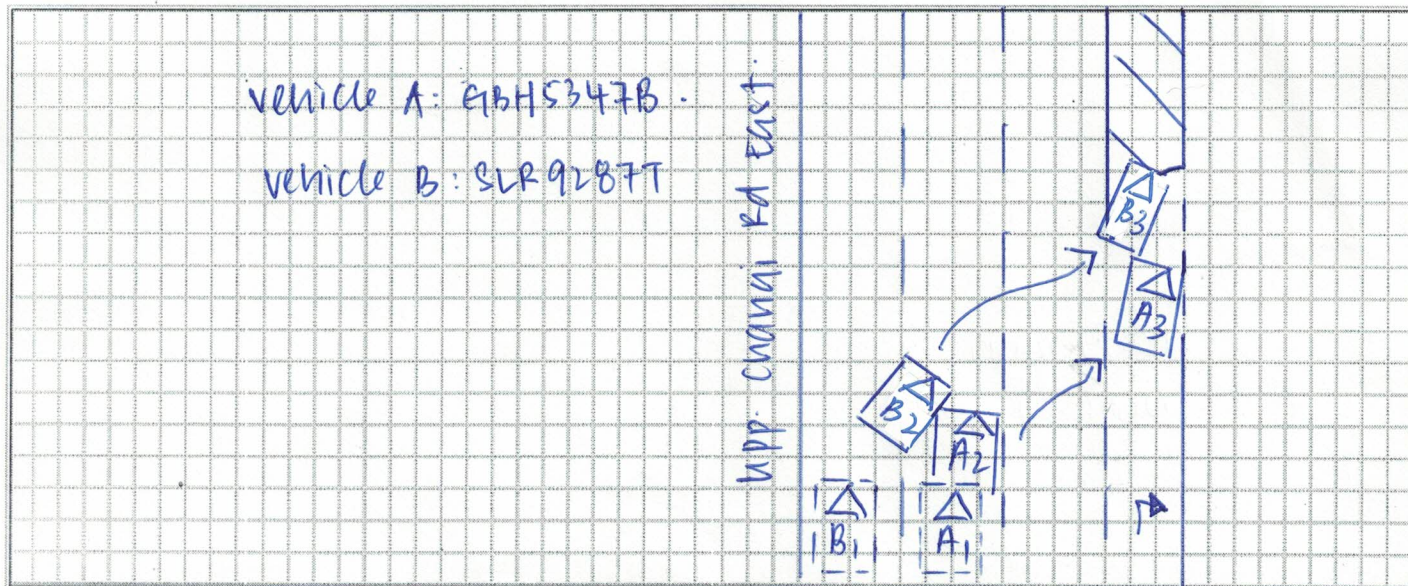
SPICE VILLAGE

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 Circumstance of the Accident

On the stated date and time, I, vehicle 'A',  
6BH5347B, was travelling straight along the stated  
venue - vehicle 'B', 8LR9287T, who was on my  
left, swerved onto my lane, attempting to make  
a U-Turn and collided onto my vehicle's  
front left portion. The impact sent both our  
vehicles to the extreme right lane.

Declaration

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

SPICE VILLAGE

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)