SY03233T0003 / YEW TEE AUTOMOBILE TECH PTE LTD [417800] ENTRY DATE & TIME: 29/03/2023 12:59 (SGT) SUBMITTED BY: TOH LEI MING

VERSION: 1 (29/03/2023 12:59 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

 2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
- 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.
- 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 29/03/2023 12:59 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 29/03/2023 10:20 (SGT) Exact Location of Accident Singapore Additional Location Information JELLICOE ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJJ2676R

INSURED/POLICYHOLDER

Is company? Nο Name Of Registered Owner LOY CHYE ZHUANG NRIC No S8224113B Email Address SELPHK38@GMAIL.COM Mobile Phone No (Phone) +65-91059453 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Fit Exact purpose for which vehicle was being used at time of Private hire

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire

Transmission Auto CC

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5124402585-01

DRIVER

Name of Driver LOY CHYE ZHUANG NRIC No. S8224113B Date Of Birth 31/07/1982 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number	12/11/2004 18 YEARS AND 4 MONTHS Male (Phone) +65-91059453	
Alt. Phone Number Email Address Address Address complement	- SELPHK38@GMAIL.COM 303C ANCHORVALE LINK #08-130 -	
Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	543303 Yes - No	
Insurance Company of Other Vehicle Owned by Driver	-	
GENERAL INFORMATION OF THE ACCIDENT		報道: 10 年度 10 日 - 日本教師の関係 10 日 - 日本教師の関係
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Dry	
OTHER INFORMATION		
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email		
Original language used in the statement PASSENGER 1	-	
Name Gender	UNKNOWN Male	
PASSENGER 2 Name Gender	UNKNOWN Male	
PASSENGER 3 Name Gender	UNKNOWN Female	
PASSENGER 4	LINEALOUNE.	
Name Gender	UNKNOWN Female	
DETAILS OF POLICE ACTION		
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No	
CIRCUMSTANCES OF ACCIDENT		

REFER TO ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF1803U
Vehicle Manufacturer	-
Vehicle Model	=
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN TIN BENG
NRIC No	S1295887J
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GM Records Management Centre established by the General Insurance Association of Singapore (GM) 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)

Funderstand, 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' law yers/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 ms;
- (iv) administering my claims (including the making of correspondence, statements, invoices, reports or notices to ma, 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, handing 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' law yers/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 law yets/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signafure / Date &

Time

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

Witnessed by Reporting Centre Personnel

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Sketch Plan

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TELICOS ROOM