HICLE NO: SMT 6056 R	MAKE & MODEL Toyota Prenta AUTO/MANUAL
TE OF ACCIDENT.	20 3 07 1 2423
ME OF ACCIDENT:	18/5 HRS
CATION OF ACCIDENT:	Application of the second seco
ACT PURPOSE USE DURING ACCIDENT:	Upper Bukit Timah Rd towards Clement Rd before old Jwong Rd EMPLOYMENT / PRIVATE USE / PRIVATE HIRE)
AME OF OWNER:	
L NO:	Capital Car Leasing Pte Ud M/P: 8742 0435 OFFICE: HOME:
RIC:	20/6 29008 R HOME:
DDRESS;	The state of the s
MAIL:	171 Chim Suee Rd #04-08/09 CES. Centre S 169877
LAIM TYPE:	CAPITAL CARLEASING OOS @ Gmail- com
LEET POLICY:	OD / HIRD PARTY / REPORTING ONLY
NSURANCE COMPANY:	YES (NO?
YPE OF COVERAGE:	NTUC Income
POLICY NO;	Comprehensive / Third Party / Third Party Fire & Theft
	5113617409-03-000013
NAME OF DRIVER:	AS ABOVE / IF NO: Liu Yuen Lian
IRIC:	\$6933279Z ANY PASSENGER: 1 (1F)
DATE OF BIRTH:	21 / 09 / 1969 LICENCE PASSED DATE: 08 / 05 / 1991
OCCUPATION:	QUTDOOR / INDOOR
GENDER:	MALE / REMALE
CONTACT NO:	H/P: 9648 6010 OFFICE: HOME:
ADDRESS:	Apt Blk 631 Senja Road #07-228 S 670631
EMAIL:	, , , , , , , , , , , , , , , , , , , ,
DOES DRIVER OWNED ANY VEHICLE:	NOT IF YES, REG NO: INSURER:
RELATIONSHIP:	Hirer Historian
WEATHER CONDITION:	CLEAR RAINING / OTHERS:
ROAD SURFACE:	DRY / WED/ OTHER;
ANY INJURIES:	NO / IF(YES) WHO?
NAME & CONTACT:	Liu Yuen Lian (96486010)
NAME & CONTACT:	THEIR DOTTO
POLICE REPORT:	NO / IF YES, WHERE?
NOTICE OF INTENDED PROSECUTION GIVEN?	/ If YES, WHO?
VEHICLE B REG NO:	
NAME OF DRIVER:	THE TRANSPORT OF THE PROPERTY
VEHICLE C REG NO:	Jaren Hoo Dai Cong CONTACT NO: 4182 5922
VEHICLE D REG NO:	ANY PASSENGERS:
VEHICLE E REG NO:	ANY PASSENGERS:
VEHICLE F REG NO:	ANY PASSENGERS:
VEHICLE G REG NO:	ANY PASSENGERS:
ANY WITNESS? IF YES, NAME:	ANY PASSENGERS:
WAS THERE ANY VIDEO CAPTURE?	YES)/ NQ WITNESS CONTACT:
WAS THERE ANY AUDIO RECORDED?	YES (NO)
ACCIDENT SCENE PHOTOS TAKEN?	YES)/ NO
ACCIDENT PORTION:	Rear Paction
Have you been approach by unknown person soliciti	ng (s) / offering accident claims assistance? YES /NO
WORKSHOP PARTICULAR:	N-51 Automotive Pte Ud
CONTACT NO: CONTACT PERSON:	68420051 / 67440510
FAX NO:	Stew
WORKSHOP EMAIL:	67410510 salgs@n51.com.sg

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.
- 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. 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.
- 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)

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' 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 me;

& Time

- (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' 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 propagation may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including propagation may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including propagation may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including propagation may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents

Policyholder's Signature / Date & Time

Reg. No. 201629008R

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnel

Sketch Plan

upper Bukit Timah Pd tawards clement; Rd before old Jurong Rd

Vehicle A: SMT 6056 R

Vehicle B: SLJ 1492 L

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Declaration

We declare the foregoing particulars are true in every respect.

Policy holder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel