

YEW TEE AUTOMOBILE TECH PTE LTD

ACCIDENT STATEMENT

Accident Details

Action to be taken for type of insurance claim Own Damage / Third Party / Reporting Only
 Date & Time of Accident 19.04.2023 @ 9:30 am
 Exact Location of Accident Bradell Road (near upper Serangoon Road)
 Weather Conditions Clear / Raining / Others
 Road Surface Wet / Dry / Others
 Was the Accident reported to the Police? Yes / No

Own Vehicle

Vehicle Registration Number SLB 6394X
 Vehicle Category Private Car / Commercial / Private Hire / Others
 Vehicle Make & Model Honda Vezel 1.5CC: 1496cc Trans: Auto / (Manual)
 Exact Purpose for which vehicle was being used at time of accident Private Use / Employment / Private Hire
 Number of Passengers (Incl Driver) 3 person (1 driver / 2 passenger)
 Name & Gender Eng Yau Foo (Female)
 Name & Gender Rinith BT wasrim Rumli (Female)

Own Vehicle Policy

Name of Insurance Company Income Insurance Limited
 Policy Number 5108056869-04
 Name of Registered Owner Chan Thye Yuan
 NRIC Number / Co Reg. Number S256X 575C TEL: 9818 2110
 Email of Registered Owner tygerchan19@gmail.com

Driver Information

Name of Driver Chan Soh Ha
 NRIC Number S0642222E
 Date of Birth 06-09-1937 Date of Driving Pass: 13-03-1958
 Contact Number 9275 2200
 Address APT BLK 60 Telok Blangah Heights #05-71 Singapore 100060
 Email of Driver tygerchan19@gmail.com
 Relationship of the Driver with the Insured Father in law Occupation Indoor / Outdoor

TP Vehicle or Property

Was any other vehicle or property damage? Yes / No
 Vehicle Registration Number XD 6443K
 Vehicle Category Private Car / Commercial / Private Hire / Others
 Name of Driver Choo Thean Poh
 NRIC Number _____
 Contact Number _____
 Address _____

Other Information

Was anybody injured in the Accident? Yes / No Injured conveyed by ambulance: Yes / No
 Injured Person 1 _____ Which vehicle: _____
 Injured Person 2 _____ Which vehicle: _____
 Was there any video captured? Yes / No

Details of Witness

Name & Contact Number _____

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 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)

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.

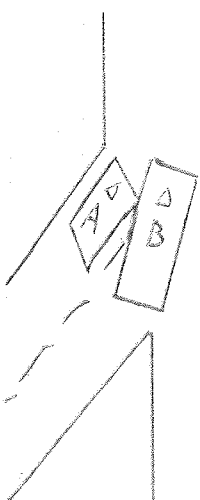
[Handwritten signature]

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan



Braddell Road
(near Upper Serangoon
Road)

A : SLB 6394X
B : XD64431C

Describe Circumstances of the Accident

On 19.04.2023 at about 9:30 am. I was travelling along Bradell Road (near upper Serangoon Road). I was going turn left. Suddenly, Vehicle B (XD 6443X) cut into my lane and hit right front portion of my vehicle (SLB 6394X).

Declaration

14 We declare the foregoing particulars are true in every respect.

$$19/4/23$$

12:02 pm

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel