

AH LIM MOTOR COMPANY

Tow-in
2/04/23 @ 10.00 pm.

Data Collection for Accident Reporting

Please write clearly

Insurance Company - Budget Direct OD / TP / Reporting Only

Date Of Accident - 2/5/2023 Time Of Accident - 9.11 pm

Exact Location of Accident Roundabout near Marymount Rd (Ang Mo Kio) exit

Weather - Clear / Dry / Raining / Drizzling / After Rain / Wet / Others CC _____

Vehicle Number - SLL7853D Vehicle Model - Subaru XV Auto / Manual

Policy Holder Name - Adrian Hng Tanwen

Policy Holder NRIC/Fin No - S8205527D Email Address addie_hng@hotmail.com

Policy Holder HP - 94874862 Alt Phone No _____

Home Address - BLK 235 Bishan St 22 #09-150, S'pore 570235

Driver Name - As above Relation with owner owner

Driver NRIC/Fin - ✓ Policy Holder HP - _____ Alt Phone _____

Date Of Birth - 26/2/1982 Licence Pass date 04 Sep 2023 Occupation - Indoor / Outdoor

Email Address addie_hng@hotmail.com

Home Address - BLK 235 Bishan St 22 #09-150 S'pore 570235

Injury - Yes / No - Conveyance to Hosp Y / N - Video In Car - Yes / No _____

H | ✓ ← Driver

No. Of Pax In Own Car - 2 Names / Gender Adrian Hng Tanwen (M/F)

Names / Gender Alvin Tan Jianong (M/F)

Names / Gender _____ (M/F)

Third Party's Particulars : Vehicle No. SMH72X HP# 96930208 Name
: Lu Siew Bee Nric/Fin S7304606H
(Lu Xiumei)

Third Party's Particulars : Vehicle No. _____ HP# _____ Name
: _____ Nric/Fin _____

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

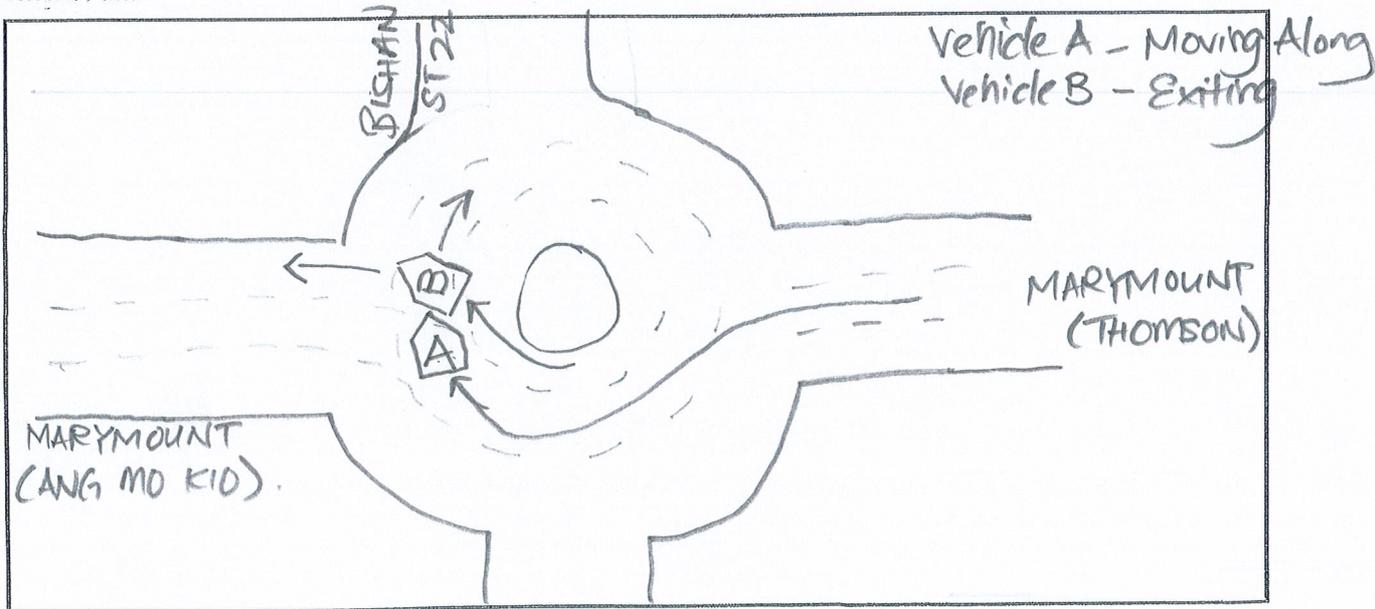
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(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.

Sketch Plan




Policyholder's Signature / Date & Time
3/5/23
1040hs


Driver's Signature (if driver is not the policyholder) / Date & Time
3/5/23
1040hs

Witnessed by Reporting Centre Personnel

Date of accident: 2/5/23 Time: 9.11pm Location: Roundabout near Marymount Community Centre
My Vehicle A: my car / SLL7853D Vehicle B: 3rd Party Car / SMH72X Vehicle C: _____

SKETCH PLAN

Describe Circumstances of the Accident

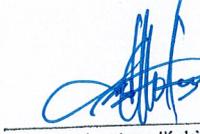
Followed Signs on Roundabout but car on right most side of lane went to exit into Marymount road notwithstanding she was in the most part of roundabout. # 3rd Party car did not signal, did not slow down and assumed she had right of way notwithstanding the road markings was not indicating so. I was on my way home to Bishan St after work.

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

We declare the foregoing particulars are true in every respect.

 3/5/23
Policyholder's Signature / Date & Time
1040hrs

 3/5/23
Driver's Signature (if driver is not the policyholder) / Date & Time
1640hrs

Witnessed by Reporting Centre Personnel