

SINGAPORE ACCIDENT STATEMENT

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 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 15/05/2023 17:10 (SGT)
Reported by Actual Driver
Date of Accident 13/05/2023 11:45 (SGT)
Exact Location of Accident 1 Kim Seng Promenade, Singapore 237994
Additional Location Information CARPARK EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW3320G

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORTDELGRO RENT A CAR PTE LTD
Company Reg No 198105775H
Email Address dannyng@cdgrentacar.com.sg
Mobile Phone No (Phone) +65-98350842
Alternative Phone No (Office) +65-68820888

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
Variant ALTIS
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Private car
Transmission Auto
CC 1798

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Policy Number / Cover Note Number D20MFL0000326_02

DRIVER

Name of Driver SAIFU SENGO
Passport No/FIN F1734503Q
Date Of Birth 27/08/1960
Occupation Outdoor

Date Of Driving Pass	11/11/2022
Driving experience	6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98350842
Alt. Phone Number	-
Email Address	dannyng@cdgrentacar.com.sg
Address	49 ST THOMAS WALK #02-04
Address complement	-
Postcode	238140
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 13/05/2023 AT ABOUT 1145HRS I WAS DRIVING VEHICLE A (SMW3320G) ALONG GREAT WORLD CITY CARPARK. UPON EXITING THE CARPARK I WAS LOOKING OUT FOR THE CARS ON THE MAIN ROAD AND WHILE OBSERVING I DIDNT MANAGED TO STOP IN TIME CAUSING MY VEHICLE TO COLLIDE INTO VEHICLE B(SLT7617C) REAR

NO OTHER VEHICLES INVOLVED
NOBODY WAS INJURED

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	SLT7617C
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-

Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	CHAUDHURY MINAL JETHWA
Passport No/FIN	M4296112K
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.

Policyholder’s Signature / Date & Time

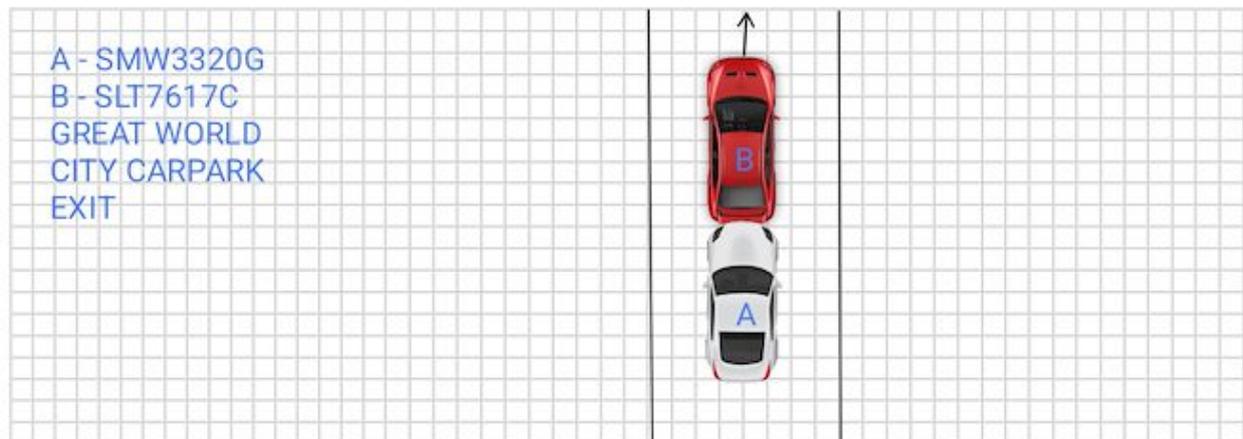
Sketch Plan

Witnessed by Reporting Centre Personnel

DHIYAA

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

13/05/2023 1510HRS



Describe Circumstances of the Accident

ON 13/05/2023 AT ABOUT 1145HRS I WAS DRIVING VEHICLE A (SMW3320G) ALONG GREAT WORLD CITY CARPARK. UPON EXITING THE CARPARK I WAS LOOKING OUT FOR THE CARS ON THE MAIN ROAD AND WHILE OBSERVING I DIDNT MANAGED TO STOP IN TIME CAUSING MY VEHICLE TO COLLIDE INTO VEHICLE B(SLT7617C) REAR

NO OTHER VEHICLES INVOLVED
NOBODY WAS INJURED

Declaration

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

Policyholder's Signature / Date &
Time



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

13/05/2023 1510HRS



Witnessed by Reporting Centre Personnel

DHIYAA

















