

# 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 .....	13/06/2023 18:08 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	10/06/2023 17:00 (SGT)
Exact Location of Accident .....	133 New Bridge Rd, Singapore 059413
Additional Location Information .....	CHINATOWN POINT DROP OFF POINT
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLL9745U
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	M LABEL AUTO LEASING PTE. LTD.
Company Reg No .....	2XXXXX044Z
Email Address .....	reporting.gt@gmail.com
Mobile Phone No .....	(Phone) +65-96245154
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Wish
Variant .....	-
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 - Claiming third party
Vehicle Category .....	Private hire
Transmission .....	Auto
CC .....	1798

### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	C/N: MHC202300127CN

### DRIVER

Name of Driver .....	SERENE LEE
NRIC No .....	SXXXX742B
Date Of Birth .....	21/06/1976
Occupation .....	Outdoor

Date Of Driving Pass .....	08/12/2003
Driving experience .....	19 YEARS AND 6 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-93633768
Alt. Phone Number .....	-
Email Address .....	serene7600@gmail.com
Address .....	BLOCK 228 PASIR RIS STREET 21 #08-16
Address complement .....	-
Postcode .....	510228
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 - Opening Door of Vehicle
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) .....	7
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 .....	-

#### PASSENGER 1

Name .....	UNKNOWN
Gender .....	Male

#### PASSENGER 2

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 3

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 4

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 5

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 6

Name .....	UNKNOWN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Pasir Ris Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005852999
Alt. Police Station Phone No .....	(Fax) +65-65855261
Police Station Address .....	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT G/20230610/2118

#### 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 .....	SHD5777T
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	-
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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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.

Policyholder's Signature (if driver is not the policyholder) / Date & Time  
 Driver's Signature (if driver is not the policyholder) / Date & Time  
 Witnessed by Reporting Centre Personnel (Name as in NRIC/ND card)

Sketch Plan

A: 8LL97454			Chuan-Joon Hoat Ong Hsuan Fong
B: PHD57277			

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Describe Circumstance of the Accident

*Refer to TP Report*

*4/20230610/2119*

Declaration

We declare the foregoing particulars are true in every respect.

*[Signature]*  
 Policyholder's Signature (if policyholder is not the driver)  


*[Signature]*  
 Driver's Signature (if driver is not the policyholder) / Date

*[Signature]*  
 Witnessed by Reporting Centre Personnel

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**SINGAPORE  
POLICE FORCE**



G/20230610/2119

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POLICE REPORT (NP299)

Report No. G/20230610/2119

Police Station Of Origin  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5652999

Date/Time Report Made 10/06/2023 22:56	Vide Report No. A/20230610/0132	Station Diary No. 92
Name Of Informant SERENE LEE	Address APT BLK 228 PASIR RIS STREET 21 #08-16 SINGAPORE 510228	
ID Type / ID No. NRIC NO / S7617742B	Contact No. Home/Office Mobile 93633768	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation GRAB DRIVER	Sex Female	Age 46
Institution/School Name	Date of Birth 21/06/1976	Race Chinese
	Language	
Date/Time Of Incident 10/06/2023 17:00	Location Of Incident 133 NEW BRIDGE ROAD CHINATOWN POINT SINGAPORE 059413	

Brief details.

I am a Grab driver and my vehicle number SLL9745U. On the 10/06/2023 at around 4.28pm, I picked up 6 foreign passengers from ION Orchard vide Grab reference booking number A-5XOWG3LWVERI and proceeded to send them to their destination at Chinatown Point. I subsequently arrived at the destination at around 5pm and when I arrived, I alighted from the vehicle to assist my passengers to bring down the rear seats for them to disembark. However, while I was walking to the rear passenger door, one of my passengers who was seating on the left side, opened the door without looking out for the traffic.

Signature Of Officer Recording The Report: G / SGT 3 MUHAMMAD FIRDAUS BIN ABDULLAH SHAFI-IE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/06/2023 22:56
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (2) NG SU YAN, SHANNON Contact No.: 62447200	Classification Of Case:

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 70-2  
 9-23  
 P-13

**SINGAPORE  
POLICE FORCE**

G/20230610/2119

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230610/2119

As such, when the passenger opened the door, it hit onto a taxi bearing plate registration number SHD5777T who drove passed my vehicle on the left. The incident caused both vehicles to be damaged. When I tried to ask the passengers to compensata for the damages that were caused, they refused and hence, police assistance was called vide Incident A/20230610/0132.

Therefore, as advised, I am lodging a report for record purposes.

Signature Of Officer Recording The Report: G / SGT 3 MUHAMMAD FIRDAUS BIN ABDULLAH SHAFI-IE 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 10/06/2023 22:56
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (2) NG SU YAN, SHANNON Contact No.: 62447200	Classification Of Case:

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M LABEL AUTO LEASING PTE LTD

UEN: 202218044Z

PAYA UBI INDUSTRIAL @ 53 UBI AVE 1 #02-44

Singapore 408934

**CAR RENTAL AGREEMENT**

RENTAL NO: 0075 (RENEWAL)

HIRER'S NAME:	SERENE LEE
HIRER'S NRIC:	S7617742B
HIRER'S ADDRESS:	228 PASIR RIS STREET 21 #08-16 (S)510228
DATE OF BIRTH	21/6/1976
DRIVING LICENCE PASS DATE:	8/12/2003
CONTACT NUMBER:	93633768 / 84886876
EMAIL:	serene7600@gmail.com
PURPOSE OF RENTAL:	PHV
EMERGENCY CONTACT:	97300802 - Verson (Sister)

**RENTAL VEHICLE DETAILS**

CAR PLATE NO.:	SLL9745U	MAKE & MODEL :	TOYOTA WISH 1.8 CVT
CHASIS NO.:	JTDGG20WX0J000219	ENGINE NO.:	2ZR1307448
WEEKLY RENTAL:	\$441/- (DAILY @ \$63/-)	CDW RATE:	
TOTAL WEEKLY PAYMENT: \$441/-			
DRIVING LICENCE TYPE: CLASS 3 / PDVL / TDVL / LESS THAN 2 YEARS			
EXCESS : \$2500/\$2500 , EXCESS \$4000/\$4000 LESS THAN 2 YEARS LICENCE			
CONTRACT TERM :			
START DATE & TIME:	17/3/2023	END DATE & TIME:	1/10/2023
START MILEAGE:		END MILEAGE:	

**Hirer/Authorized Ride('Hirer')/Relief)**

Hirer must produce a valid Singapore NRIC and Driving License or a valid International Driving License & valid Foreign.

Driving License and Passport or FIN card. Hirer guarantees that he / she is not under any suspension order on his/her Driving License.

**Terms of Payment / Security Deposit Amount : \$500**

Hire charges and Security Deposit for the hire period is payable by The Hirer at the time of taking over the vehicle. The Hirer is to pay a mandatory amount of security deposit. It will be refunded back to The Hirer by bank transfer, 14 days from the end of the hiring period. The Company will use the security deposit to offset any repairs, fines or summons incurred by The Hirer during the rental period. All rental charges paid in advance is non-refundable.



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