



**GARAGE 13 PTE LTD**

8 KAKI BUKIT AVE 4  
#02-54/55 PREMIER@KB  
SINGAPORE 415875  
UEN GST REG NO. 202005684D

05<sup>th</sup> June 2023

Our Ref: SLR4375E  
Your Ref: SME9251C

HSBC Insurance Singapore Pte Ltd  
**Motor Claims Department**  
38 Beach Road  
#03-11, South Beach Tower  
Singapore 189767

Dear Sirs,

**ACCIDENT INVOLVING SLR4375E AND SME9251C ALONG KJE BEFORE PIE CHANGI EXIT ON 28.06.2022**

We are the representative for YongSheng E&C Pte. Ltd., whose vehicle registration number **SLR4375E** was damaged in the above accident.

We are instructed to claim for damages against your insured in connection with the above-captioned road traffic accident driven by your insured.

We are instructed that the accident was caused by your insured's negligence and/or management of motor vehicle registration **SME9251C**. As a result of the accident, our client's vehicle was damaged and our client had been put to loss and expense, particulars of which are as follows:-

Cost of repairs	\$ 21,168.00
Loss of rental for 11 days @\$180/day	\$ 1,980.00
Survey report	\$ 1,324.00
LTA search fee	\$ 7.45
	<hr/>
	\$ 24,479.45

Enclosed are the supporting documents for your perusal:-

GIA

Repair bill

Kindly let us have your payment of **\$24,479.45** in our workshop's name within the next 14 days.

Please do not hesitate to contact Ms Irene at 6385 1171 or email [motor@iaconsultingsg.com](mailto:motor@iaconsultingsg.com) should you have any queries on your matter. We thank you for your kind attention and appreciate your quick remittance.

Yours faithfully,

Encl.

## GARAGE 13

8 Kaki Bukit Ave 4  
Premier @ Kaki Bukit #03-46  
Singapore 415875  
Company Reg Number: 202005684D

### LETTER OF AUTHORISATION

I/We, YONG SHENG E&C PTE LTD ("the third party claimant")  
of NRIC/FIN/UEN No. 201717899D, owner of vehicle no. SLR4375E hereby authorize  
M/s GARAGE 13 PTE LTD ("the workshop") to my claim for repair cost  
and/or rental and/or loss of use and/or survey fee ("claim") for my vehicle no. SLR4375E that  
was damaged pursuant to the accident which occurred on 28/06/2022 (0905HRS) along  
KJE ALONG PIE CHANGI EXIT involving vehicle no/s  
SNE925K ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/ owner/ insurers of the other vehicle/s is concerned.

Dated this 29 (day) of 06 (month) 22 (year)

x



SIGNATURE OF OWNER/ COMPANY STAMP (IF APPLICABLE)



# MV AUTO

## • RENTAL AGREEMENT & INVOICE •

MVA:

| H/P: 91060030

SLR 4375E  
(MAZDA CX3)

Color.	Vehicle Reg. No. SND 9361K		Model Type MERC 180	Renting Location
Reference			Agreed Return Date	5 Hours = 1 Day Rental (1 Day Rental / 5 = 1 Hour Extension)
\$ 180 Per Day	\$ Per		KM	Time / Date In 09/07/2022
\$ Per Week	\$ Per		In	Time / Date Out 28/06/2022
\$ Per Month	Cts Per Kilometer		KM	Total / Time Chargeable
Hirer's Name		Driven		
Address		Rental Charges		
		Total _____ Days Rental		
		Dollars cents		
I/C No.				
Reference Contact		Tel. No.		
Driver's Name		Passport / IC No.		
Address				
Driving Licence No.		Expiry	Issued by	
Additional Driver		Tel. No. (Home)		
Address		Passport / IC No. / Country		
Driving Licence No.		Expiry	Issued by	
Method of Payment				
<p>RATES QUOTED ARE FOR USE IN SINGAPORE ONLY. THE HIRER IS SOLELY RESPONSIBLE FOR BREACH OF TRAFFIC LAWS AND ANY PARKING FINES OF SURCHARGES DURING PERIOD OF HIRE.</p> <p>Hirer's signature signifies acceptance of agreement.</p>		<p>Petrol E 1/4 1/2 3/4 F Out</p> <p>Petrol E 1/4 1/2 3/4 F In</p> <p>Outstanding Petrol will charge in every 1/4, 1/2, 3/4, F @ \$ _____ Par 1/4</p>		
<p>X Hirer's Signature / Company Stamp</p> <p>Remarks</p>		<p>Sub-Total</p> <p>Others</p> <p>Grand Total</p> <p>Payment Received \$</p> <p>By: ( Name in Block Letters )</p> <p>CASH CHEQUE</p> <p>Amount Due / Refundable</p> <p>Out by</p> <p>In by</p>		
		<p>FRONT FRONT</p> <p>REAR REAR</p>		

NS: Please notify our office should there be any accident involving this hired vehicle as soon as possible.

PREMIER @ KAKI BUKIT  
8 KAKI BUKIT AVE 4, GATE 1  
#01-48

UEN: 53236451  
A001

T: 6844 4640

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 29 Jun 2022 / 14:29:59

Receipt Date/Time : 29 Jun 2022 / 14:29:59

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-220629-002113

Previous Receipt No. :

**S/N Item Description/  
Business Transaction Reference  
No.**

<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
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Result of Insurance Enquiry - SME9251C

As at 28 Jun 2022/09:05:00

Insurance Co: AXA INSURANCE PTE LTD

1 Insurance Enquiry - SME9251C

Enquiry Fee

7.00	0.49	7.49
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20220629142922327276

<b>Sub-Total</b>	7.00	0.49	7.49
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<b>Total Before Rounding</b>	7.00	0.49	7.49
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<b>Rounding Difference</b>			0.04
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<b>Total Amount Payable</b>			7.45
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Paid By

526471XXXXXX2536	eNETS Credit Card	7.45
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Total		7.45
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Cash Change		0.00
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Tendered Amount		7.45
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Excess Refundable Amount		0.00
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THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.





Our reference: 22 - 170896

Date: 14/07/2022

**INVOICE NO. 170896**

**YONGSHENG E&C PTE. LTD.**

c/o Garage 13 Pte Ltd  
8 Kaki Bukit Ave 4  
#03-46 Premier@KB  
Singapore 415875

Registration No. **SLR4375E**

We enclose our fee note for your kind attention, which remains payable irrespective of the outcome of this case.

S/No.	Description of Services Provided	Qty	Amount
1	Being vehicle damage assessment report, inspection, photographs, transport and miscellaneous.	1	\$ 1,324.00
Total amount			<u><u>\$ 1,324.00</u></u>

*Please kindly cross all cheques made payable to " Impact Analysis Consulting Pte Ltd ".*

We thank you in anticipation for your prompt payment.



**L. L. Tan (Ms)**  
Principal Consultant

Our reference: 22 - 170896

Date: 14/07/2022

c/o Garage 13 Pte Ltd  
8 Kaki Bukit Ave 4  
#03-46 Premier@KB  
Singapore 415875

Dear Sirs

**RE: Road Traffic Accident on 28-06-2022  
YONGSHENG E&C PTE. LTD.**

In accordance with your instructions received in this office on **30-06-2022**, we made arrangements to examine the vehicle on **30-06-2022** at above-mentioned address. The following data was recorded:

#### Vehicle details

Make	Mazda	Registration	SLR4375E
Model	CX-3 XD TOURING 1.5 A/T DIESEL TURBO	Chassis	DK5FW131863
Colour	White	Gearbox	Auto
Odometer	84053km	Paintwork	Good
Steering	In order	Brakes	In order
Condition	Good		

#### Tyre Depths

Front left	225/50R18	75% Westlake
Front right	225/50R18	75% Westlake
Rear left	225/50R18	75% Westlake
Rear right	225/50R18	75% Michelin

Status	REPAIRABLE
Magnitude	Medium
Legal status	Unroadworthy

#### Impact Direction & Area of Damage:



Following our examination of the accident damage, we have calculated repair times and method, which are detailed on page 2 & 3. We would recommend a sum of **\$19,600.00** and **12** working days for repair, which is sufficiently lower than the pre accident value to render the vehicle an economically and physically reliable proposition.

Subsidiaries of Impact Analysis:

• Impact Analysis Consultant • IABN Pte Ltd • Impact Analysis Solution Pte Ltd  
[www.iaconsultingsg.com](http://www.iaconsultingsg.com)

Our reference: 22 - 170896

Date 14/07/2022

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### Section A: Damaged Parts Assessment

Part's Description	Qty	Condition As inspected	Repairer's Estimate	Our Adjustment
<b>List Items :</b>				
Bonnet	1	buckled	1119.00	1119.00
Bonnet hinge @\$92.40	2	refix	184.80	0.00
Bonnet lock	1	bent	215.00	215.00
Bonnet lock garnish	1	torn	16.90	16.90
Center grille	1	broken	565.80	565.80
Center grille emblem	1	necessary	96.00	96.00
Front bumper chrome garnish	1	broken	268.70	268.70
Front bumper	1	deformed	1195.50	1195.50
Front bumper number plate holder	1	deformed	76.90	76.90
Front bumper side retainer @\$65.80	2	cracked	131.60	131.60
Front bumper signal lamp @\$285.90	2	broken	571.80	571.80
Front bumper signal lamp garnish @\$124.10	2	deformed	248.20	248.20
Front bumper reinforcement	1	bent	598.00	598.00
Front bumper sponge	1	torn	221.00	221.00
Front bumper under cover	1	torn	160.50	160.50
Headlamp @\$1515.00	2	defaced.holder broken	3030.00	3030.00
Front fender outer arch garnish lh	1	holder torn	166.50	166.50
Front support panel top garnish	1	deformed	114.50	114.50
Front support panel	1	cracked	815.00	815.00
Front support panel baffle	1	deformed	168.80	168.80
Air con condenser	1	dented.twisted	1215.00	1215.00
Tail gate	1	distorted	1635.00	1635.00
Tail gate inner lock	1	bent in.jammed	416.70	416.70
Tail gate hinge @\$78.20	2	refix	156.40	0.00
Tail gate damper @\$205.70	2	bent.stiffened	411.40	411.40
Tail gate emblem 'logo'	1	necessary	115.00	115.00
Tail gate emblem 'CX-3'	1	necessary	82.00	82.00



Our reference: 22 - 170896

Date 14/07/2022

Tail gate emblem 'SKYACTIV'	1	necessary	92.00	92.00
Tail gate lamp @\$492.30	2	holder broken	984.60	984.60
Tail gate inner trim board	1	torn	367.00	367.00
Tail gate weatherstrip	1	ripped	256.30	256.30
Tail gate pull holder	1	deformed	32.60	32.60
Tail gate release switch	1	malfunction	148.30	148.30
Tail gate wiper motor	1	bent.malfunction	413.00	413.00
Tail lamp @\$582.90	2	holder broken	1165.80	1165.80
Rear fender inner side trim @\$355.20	2	torn	710.40	710.40
Rear fender arch garnish @\$115.50	2	holder fractured	231.00	231.00
Rear bumper	1	deformed	1207.00	1207.00
Rear bumper side rainer @\$50.80	2	cracked	101.60	101.60
Rear bumper reflector @\$167.50	2	cracked	335.00	335.00
Rear blind spot module lh	1	dented.malfunction	947.40	947.40
Rear blind spot module bracket lh	1	torn	70.50	70.50
Rear bumper reinforcement	1	bent	425.00	425.00
Rear bumper lower bracket @\$106.20	2	torn	212.40	212.40
Rear bumper lower inner garnish	1	torn	168.70	168.70
Rear bumper lower inner garnish cover	1	torn	43.40	43.40
Rear number plate lamp @\$71.80	2	cracked	143.60	143.60
Rear end panel	1	distorted	568.80	568.80
Rear end panel top garnish	1	deformed	92.00	92.00
Rear floor panel	1	repair.repair	736.40	0.00
Rear floor panel spare tyre sponge	1	torn.compressed	324.00	324.00
Rear exhaust silencer	1	bent	1375.00	1375.00
Rear exhaust heat shield	1	deformed	58.00	58.00
<b>Sub- Total cost</b>			<b>25205.80</b>	<b>24128.20</b>
Percentage discount : 20%			5041.16	4825.64
<b>Sub-Total costs for parts</b>			<b>20164.64</b>	<b>19302.56</b>

**Special Nett Items:**

Front bumper clip	set	necessary	50.00	50.00
Front number plate with casing	1	bent	55.00	55.00

Our reference: 22 - 170896

Date 14/07/2022

Bonnet insulation clip	set	necessary	40.00	40.00
Tail gate windscreen sealant	1	necessary	60.00	60.00
Rear bumper clip	set	necessary	50.00	50.00
Rear end panel sealant	1	necessary	40.00	40.00
Tail gate inner trim clip	set	necessary	40.00	40.00
Rear fender arch garnish clip rh/lh	2sets	necessary	60.00	60.00
Reverse camera	1	malfunction	550.00	550.00
Rear number plate with casing	1	bet	55.00	55.00

***Sub-Total costs for parts***

**1000.00      1000.00**

**Parts Repair**

Front fender rh/lh

\* \*

0.00      0.00

***Sub- Total costs***

**0.00      0.00**

***Total costs for parts***

**21164.64      20302.56**

Our reference: 22 - 170896

Date 14/07/2022

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### Section B: Labour Cost Calculation

	Hourly rate	Manhr. Req.	Total
To dismantle, replace, cut, weld, knock out dents to straighten accident parts as-mentioned on the 'Parts Repair' column inclusive of replacement parts.	\$ 45.00	36	\$ 1,620.00
Putty & Spray painting to adjacent panels. Job allowance. Paint / material.	Sub-contract work.		\$ 1,700.00
Apply rust proofing on the adjacent panels.	Sub-contract work.		\$ 100.00
Remove / replace aircon condenser and refill aircon gas	\$ 45.00	3	\$ 135.00
Remove / refix radiator, top up coolant & conduct pressure test	\$ 45.00	2	\$ 90.00
Remove and refix rear windscreen (2 man-job)	\$ 45.00	3.5	\$ 157.50
Remove and refix upholstery and cushion seat to facilitate repair	\$ 45.00	2	\$ 90.00
Transfer tailgate mechanism	\$ 45.00	1.7	\$ 76.50
Conduct water leak test for rear portion associated repair works	\$ 45.00	1.5	\$ 67.50
Remove and replace rear exhaust system	\$ 45.00	2	\$ 90.00
Remove and replace rear reverse sensor	\$ 45.00	1.8	\$ 81.00
Wiring / bulb checking (inclusive of re-focus / re-adjust on angle of light intensity.)	\$ 45.00	1.5	\$ 67.50
<b>Total labour cost</b>			<b>\$ 4,275.00</b>

Manhour rate and the number of manhours required for each repairing task are formulated based on individual workshop's operating cost and in-house@ IA Research Guidelines respectively.

Our reference: 22 - 170896

Date 14/07/2022

### Section C: Summary Table of Total Repair Cost

Description		Cost
<b>Damaged Parts Assessment (See section A)</b>		<b>\$20,302.56</b>
<b>Labour Cost Calculation (See section B)</b>		<b>\$4,275.00</b>
<b>Total cost</b>		<b>\$24,577.56</b>
<b>Lump Sum</b>		<b>\$4,915.51</b>
<b>Further discount</b>	<b>20%</b>	
<b>Total Repair Cost</b>		<b>\$19,600.00</b>

We would recommend a sum of **\$19,600.00** and **12** working days for repair.  
No further items will be approved without our expressed written agreement. Any significant additional items will be subject to a supplementary report.



Mechanical Engineer, Accident Expert Witness, Licensed Appraiser (Automobile)  
B.Eng. (Hons, NUS)  
Diploma.Mechanical Engineering  
NTC-2 Automovite Technology  
Sr.MIES, Institution of Engineers, Singapore (#20100091)  
MATAI, Maryland Association of Traffic Accident Investigators  
IAARS, International Association of Accident Reconstruction Specialists  
PMC of Singapore Business Advisors & Consultants Council  
ACTA certified Trainer, Singapore  
Enterprise Singapore - Recognised Certification for Management Consultants  
IMI Professional Certificate In Vehicle Accident Damage Assessment (UK)















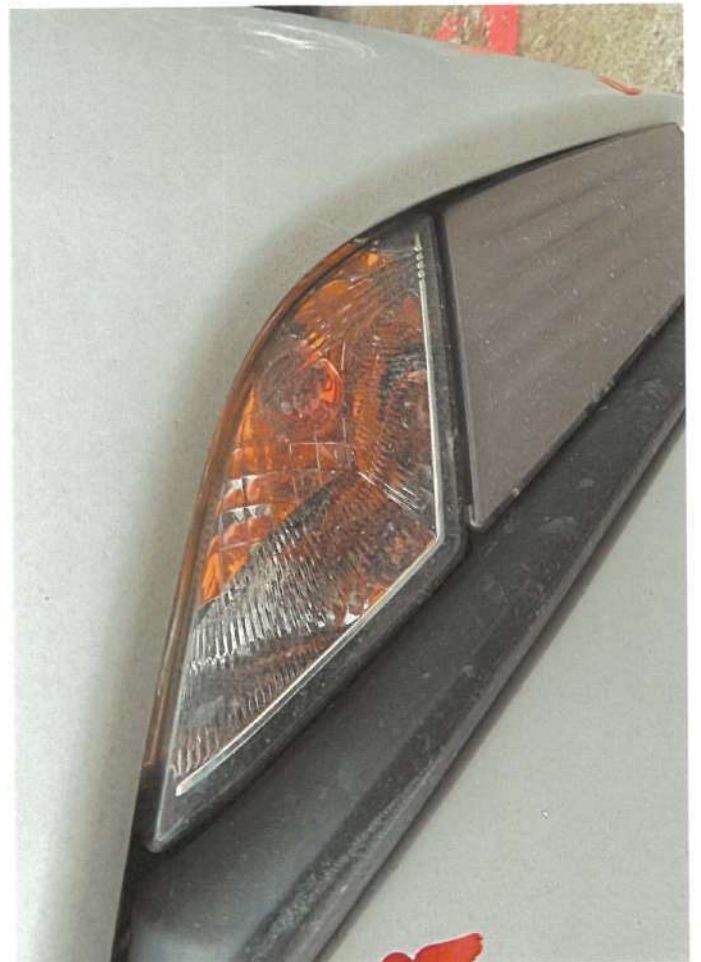


























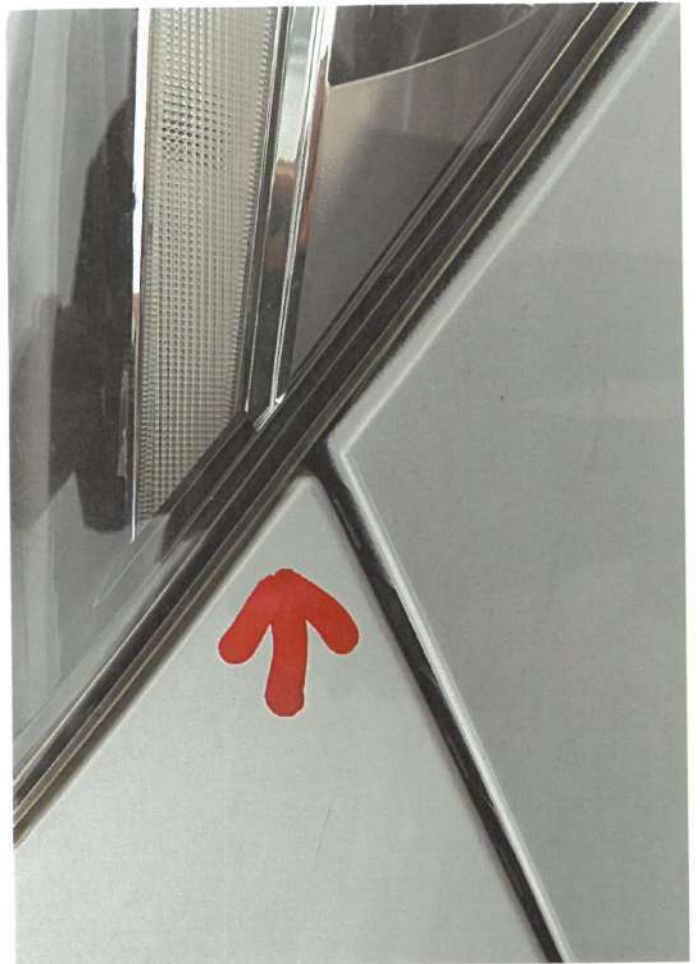










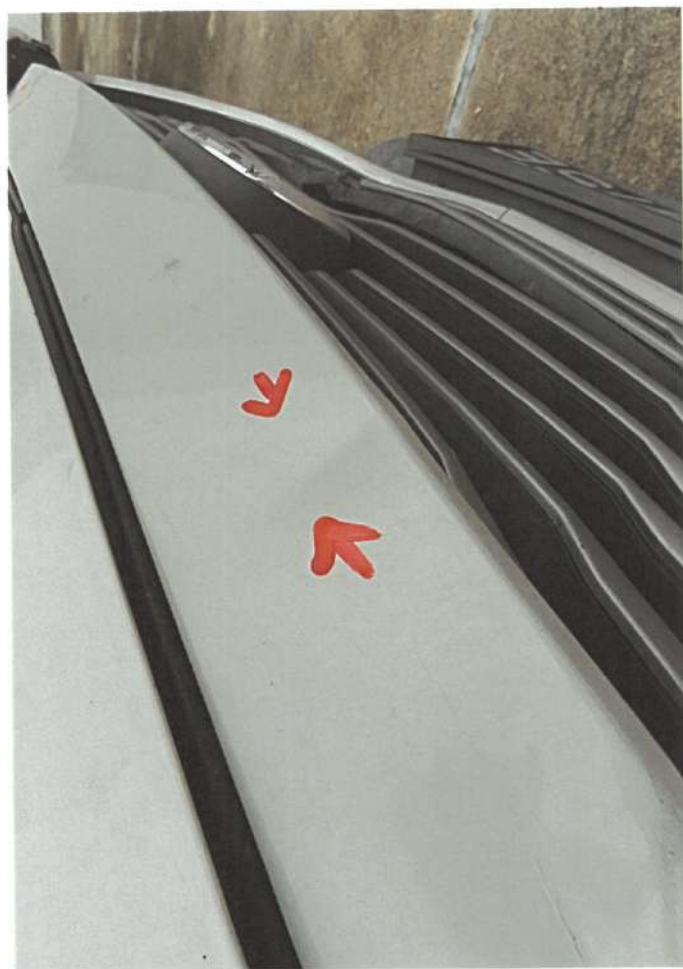
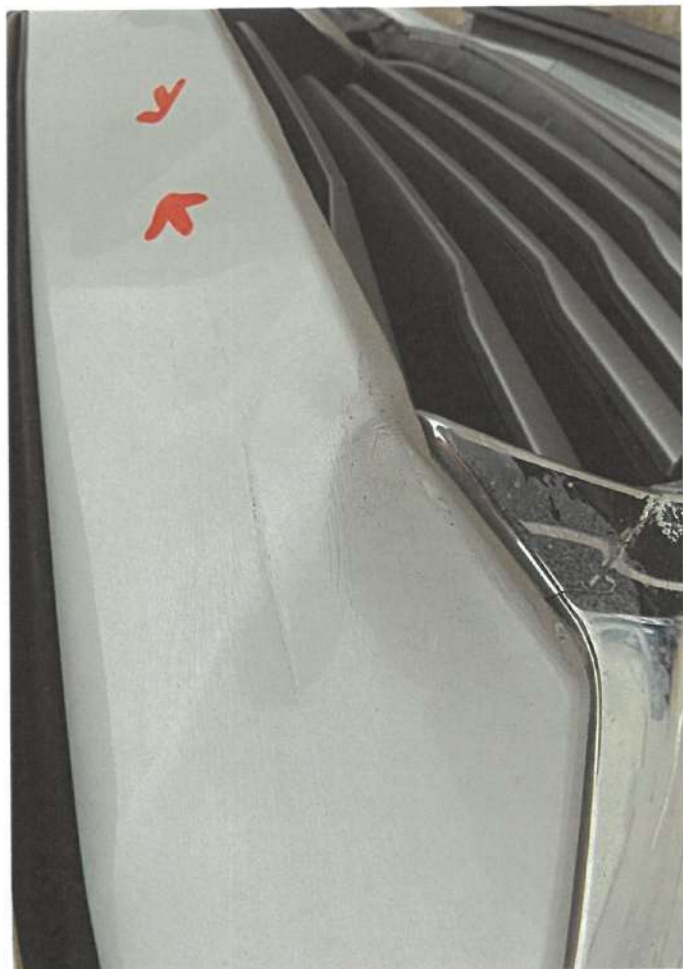




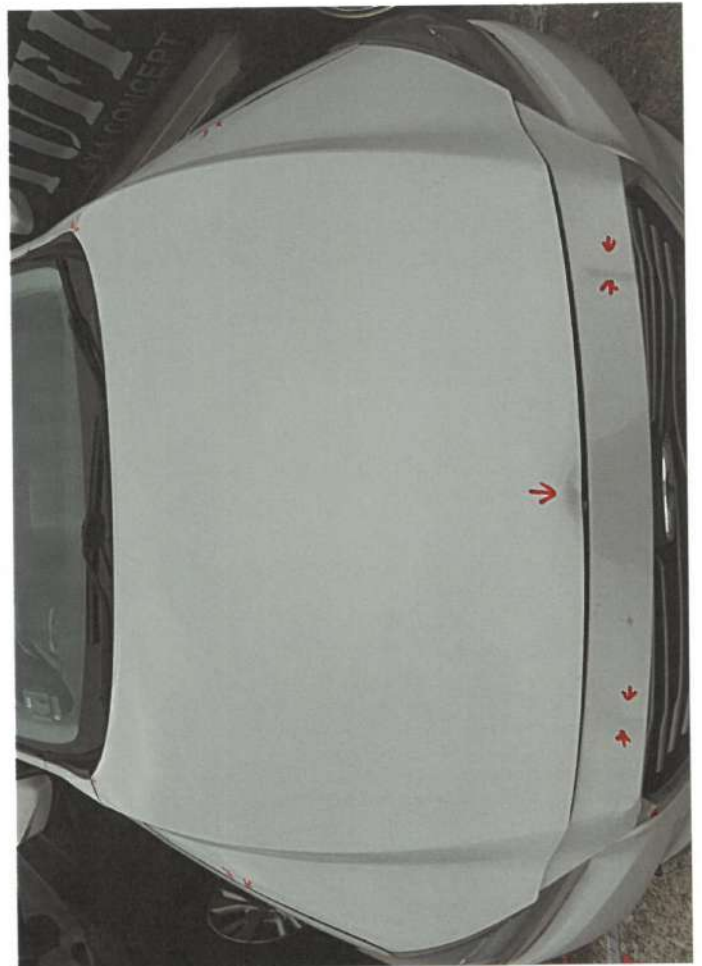
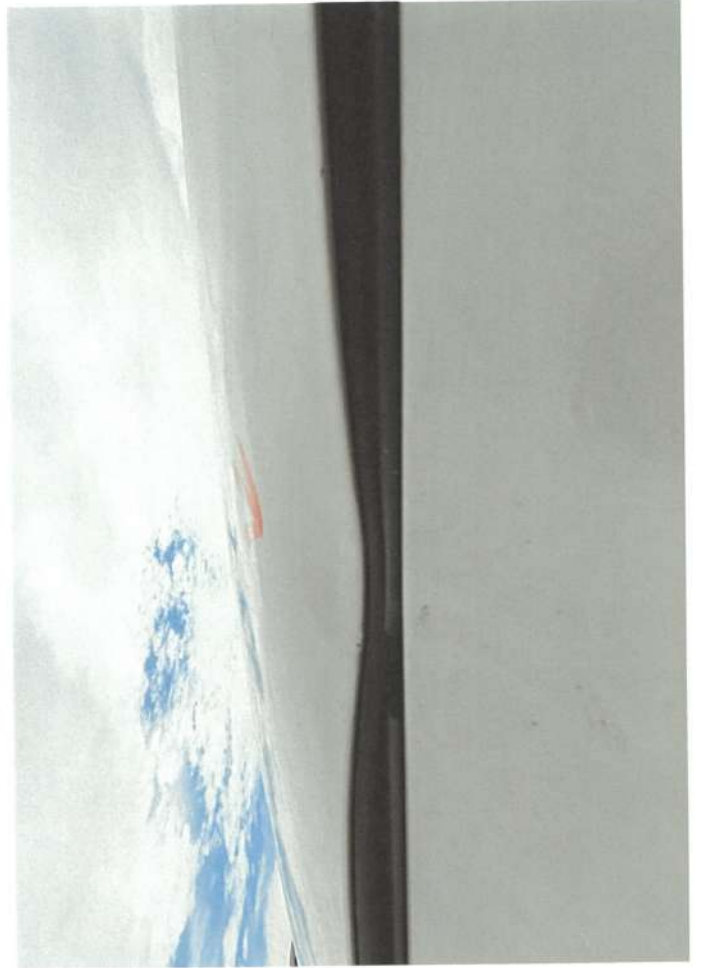
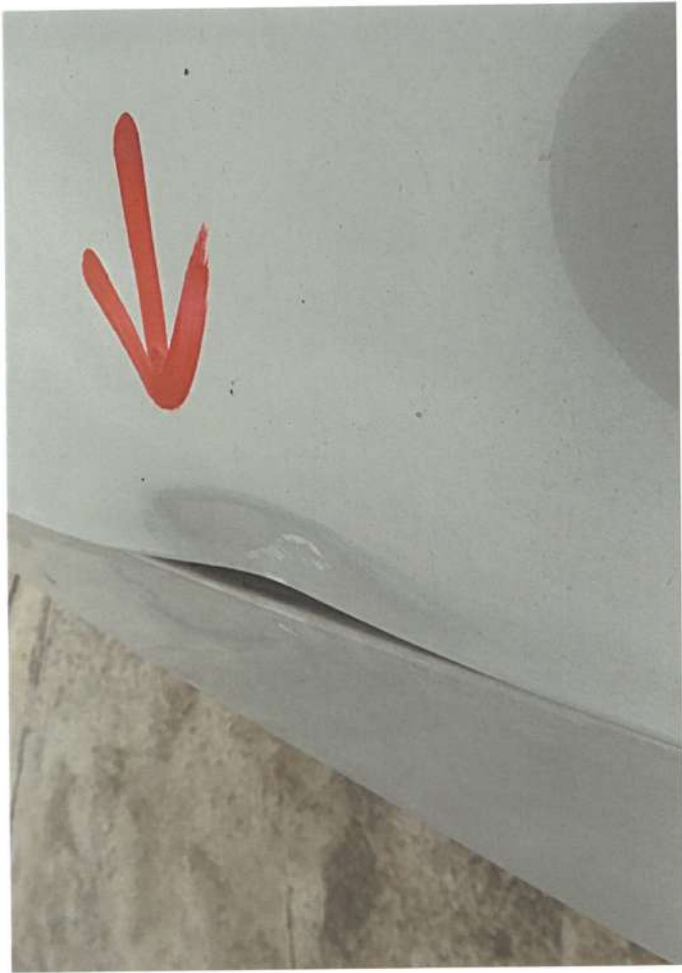




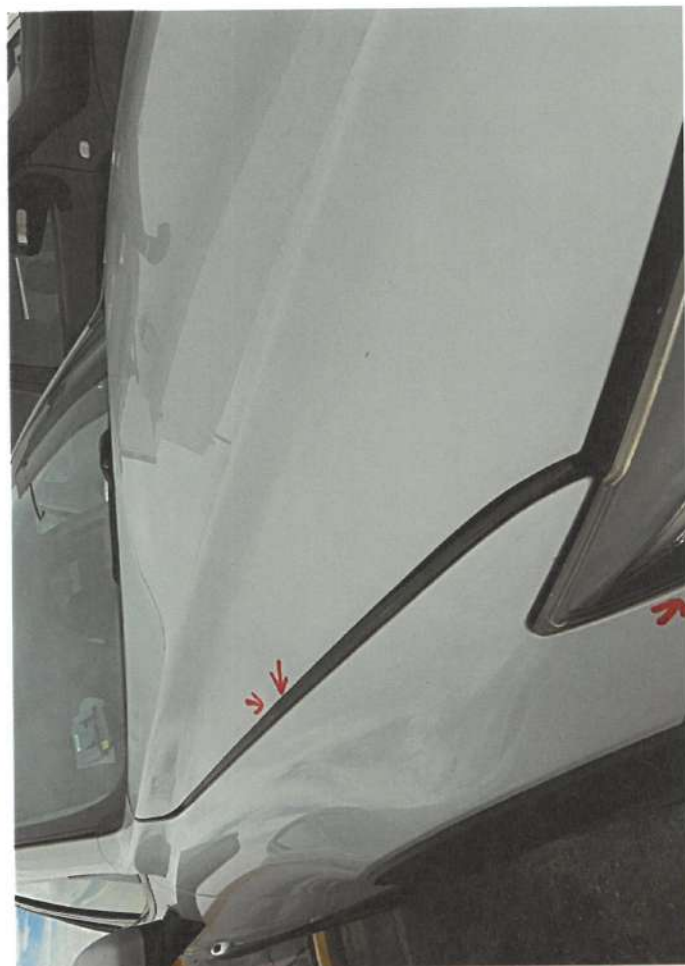


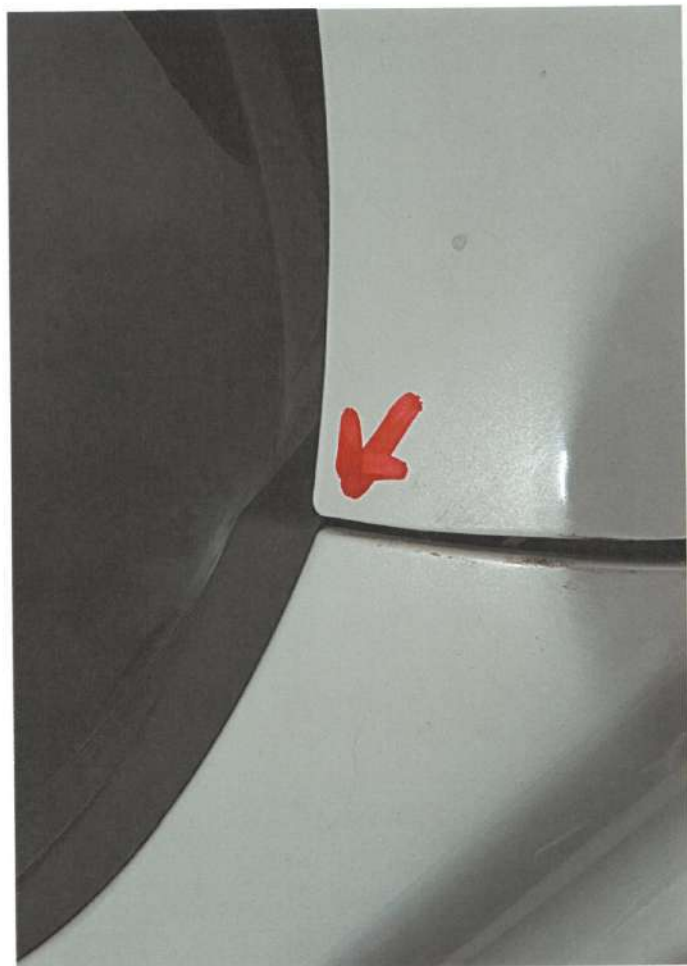
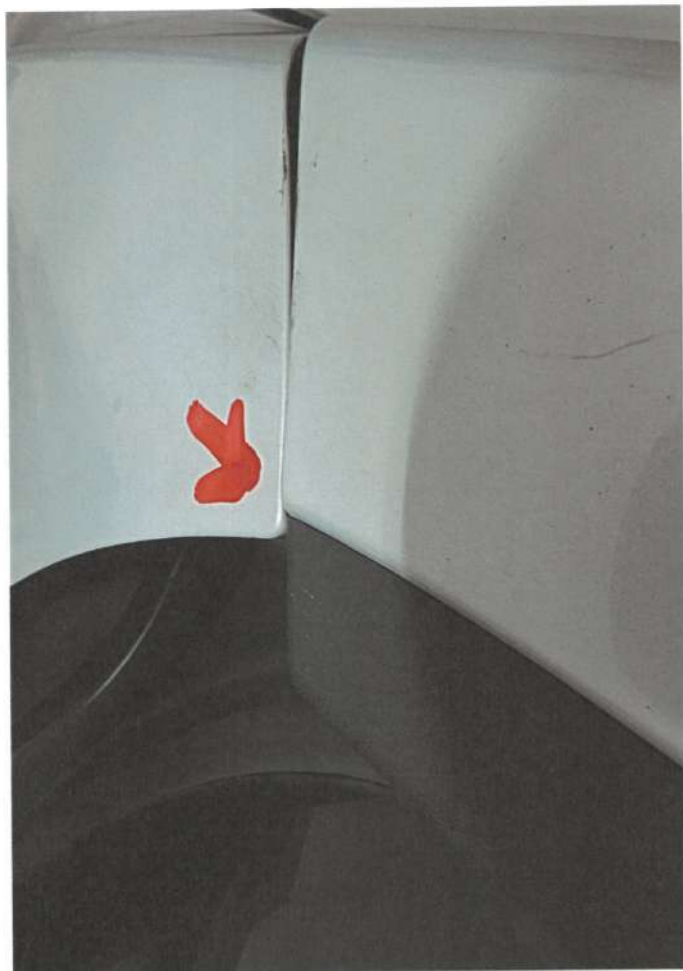




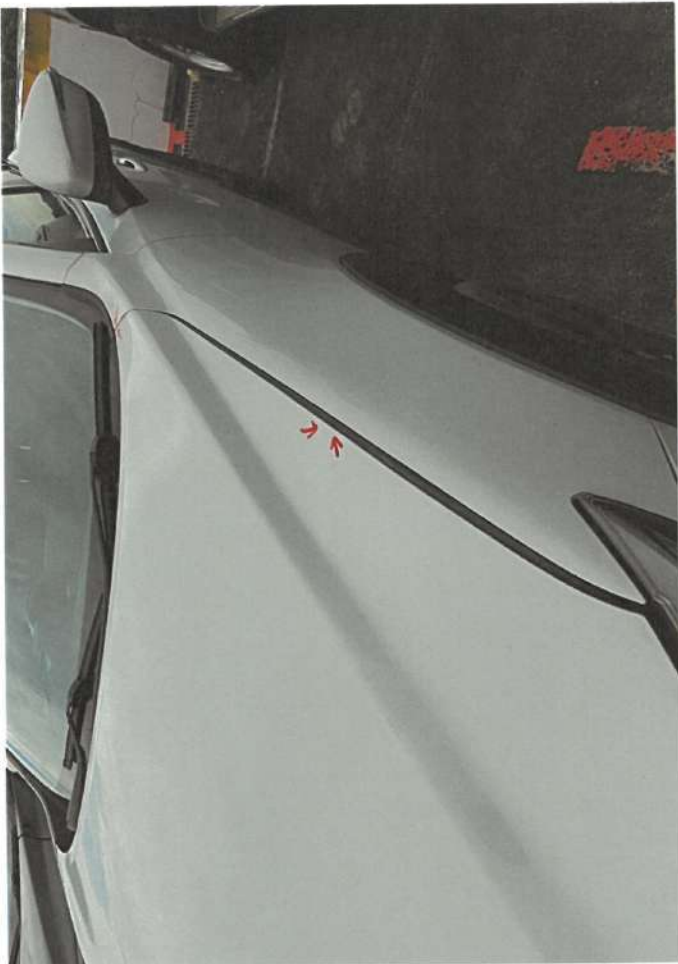


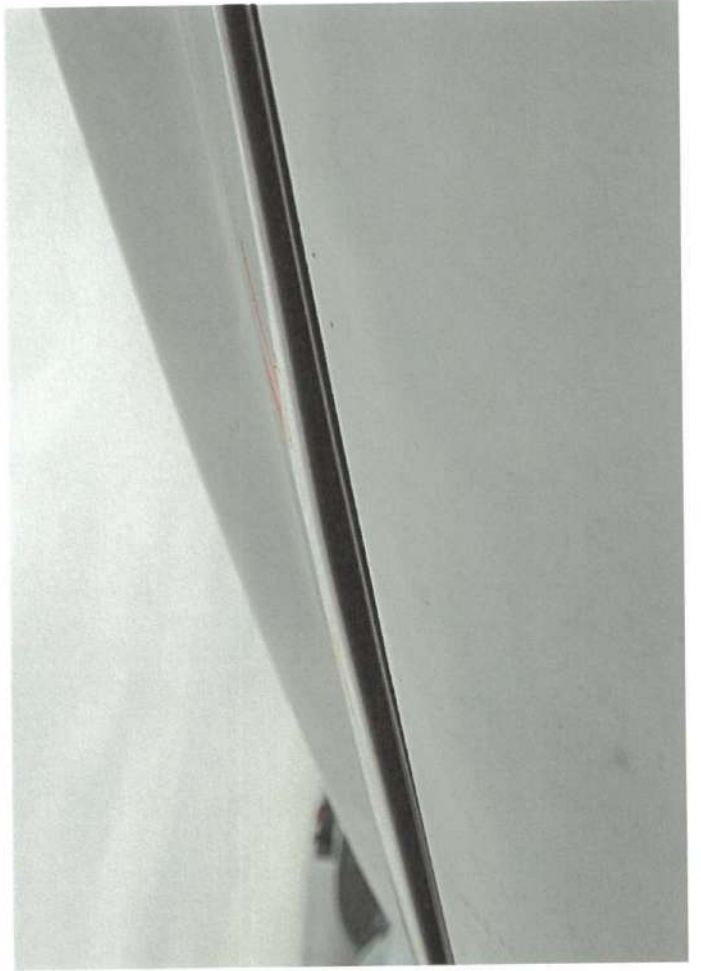




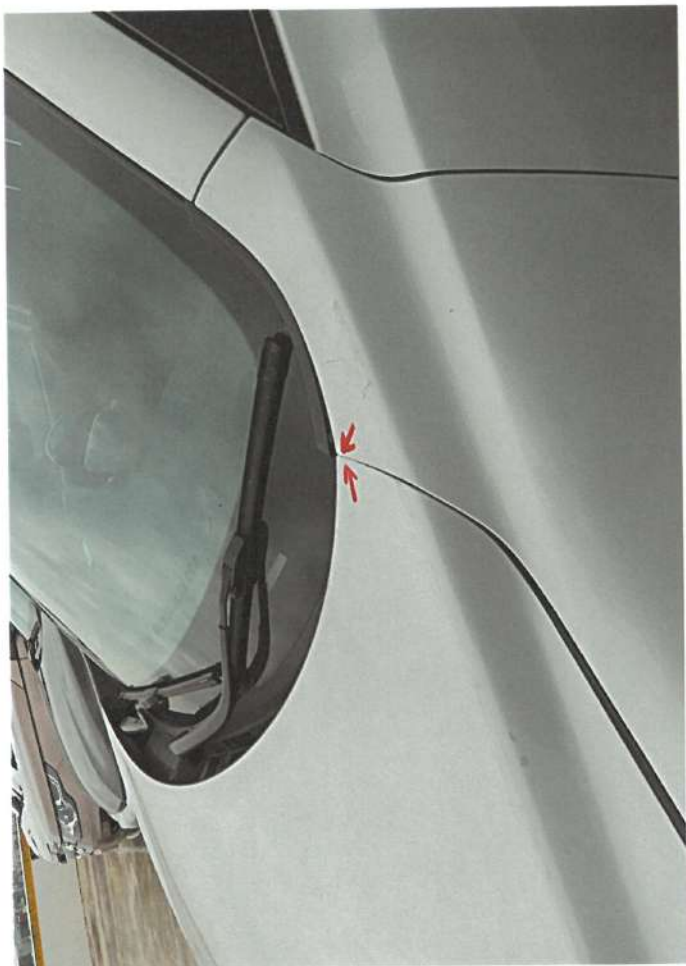
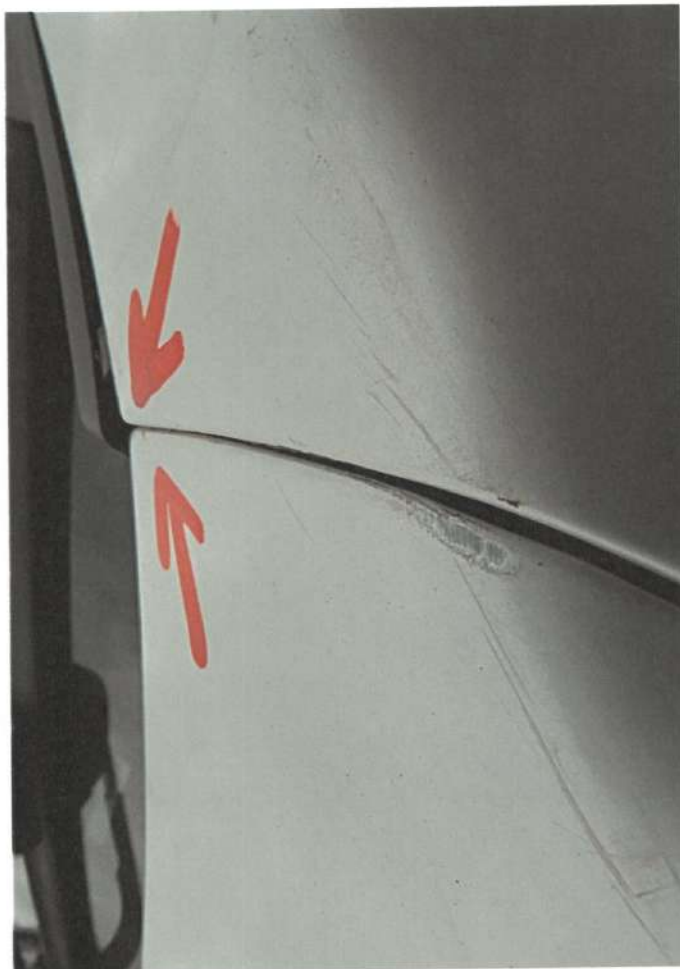
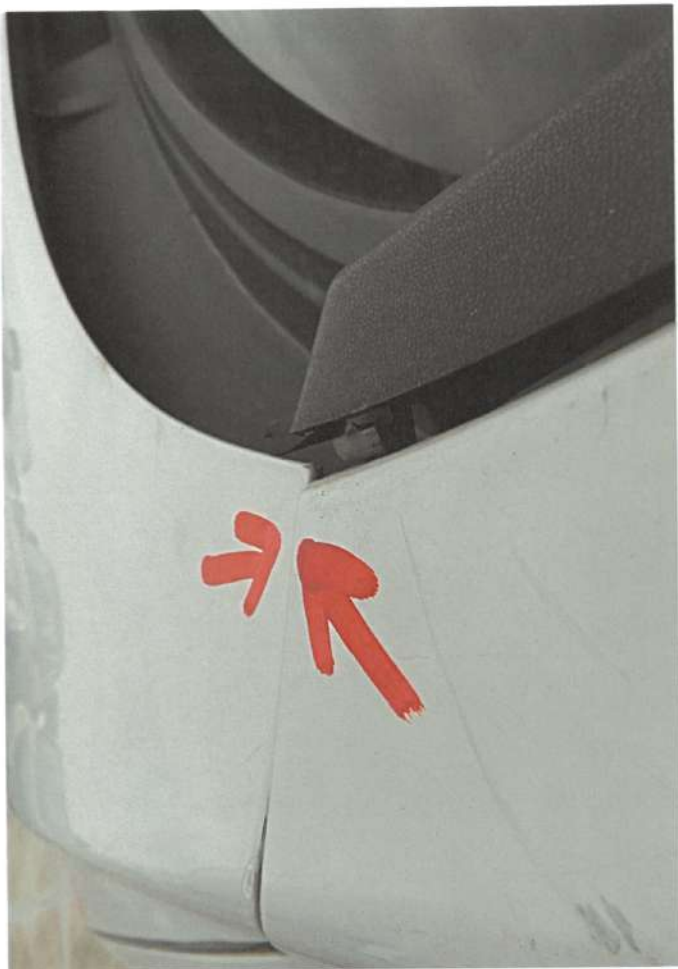






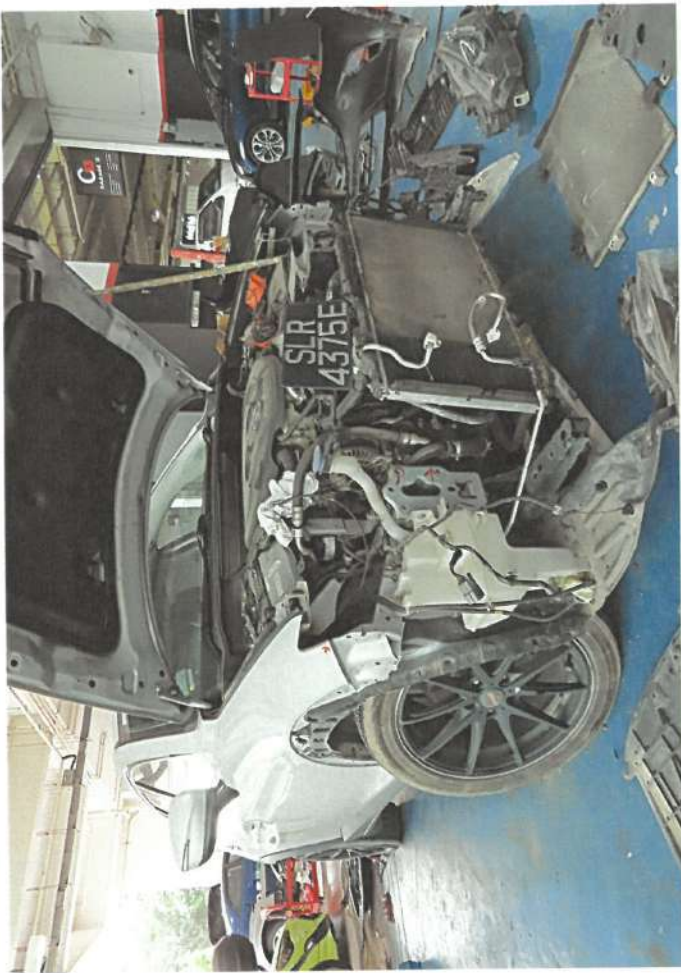
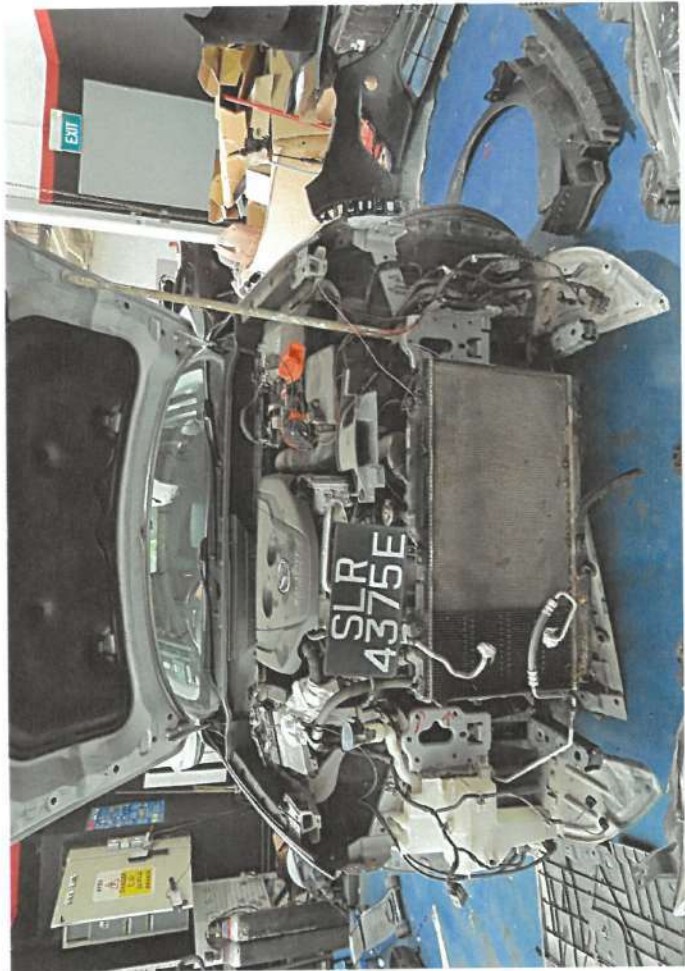




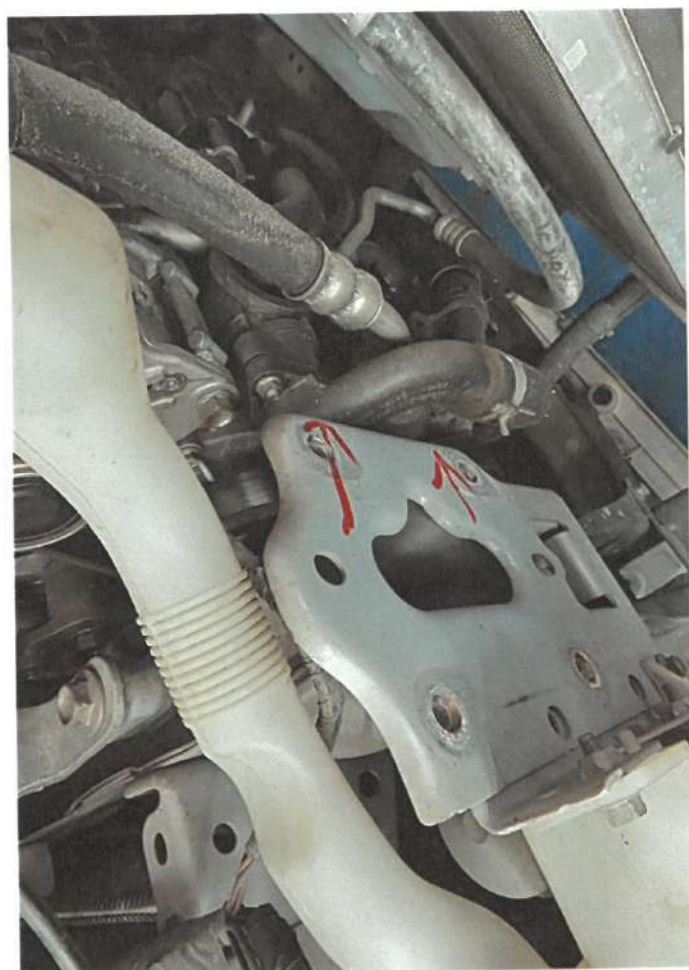




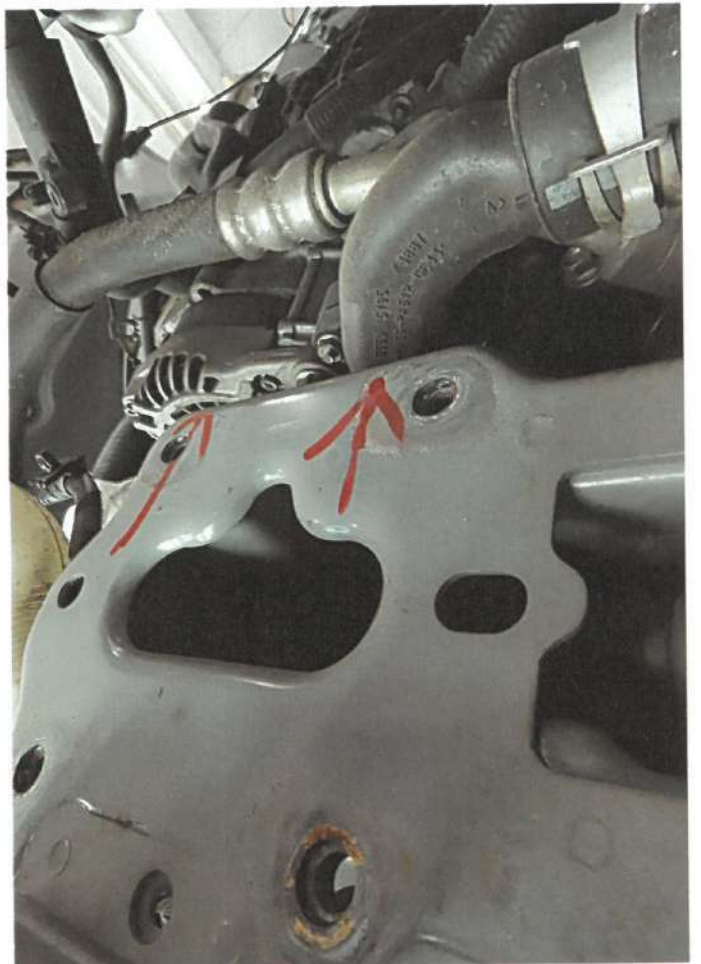
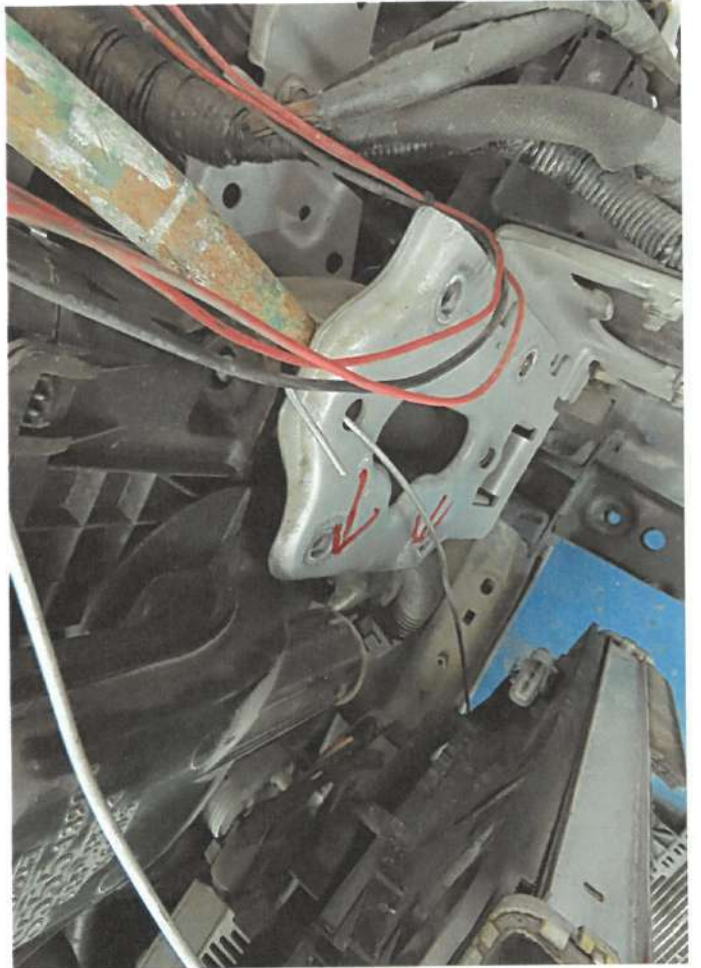




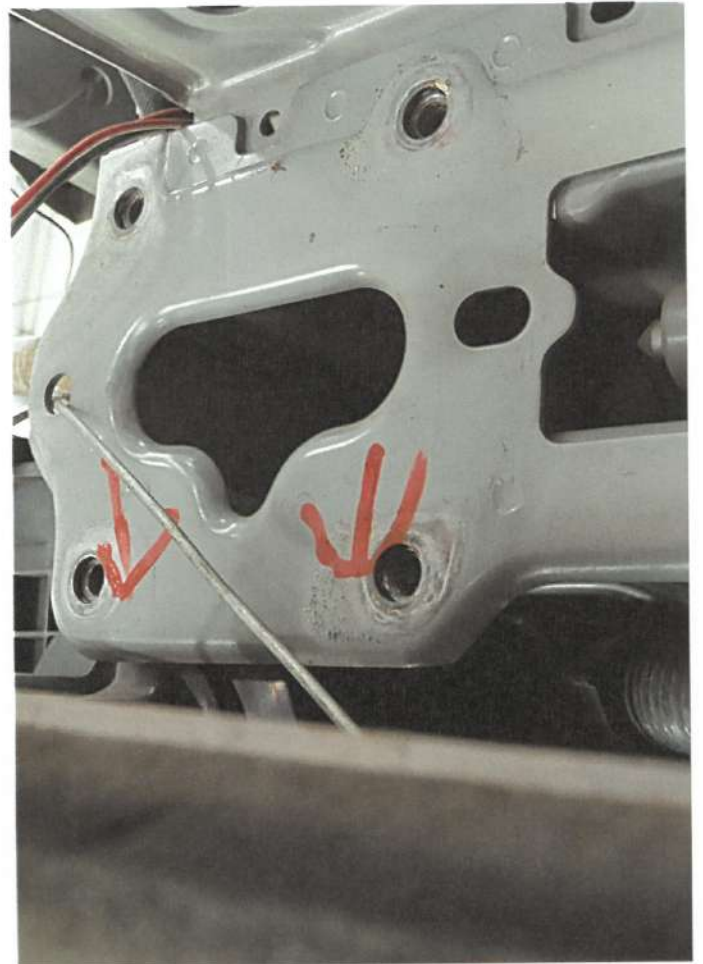
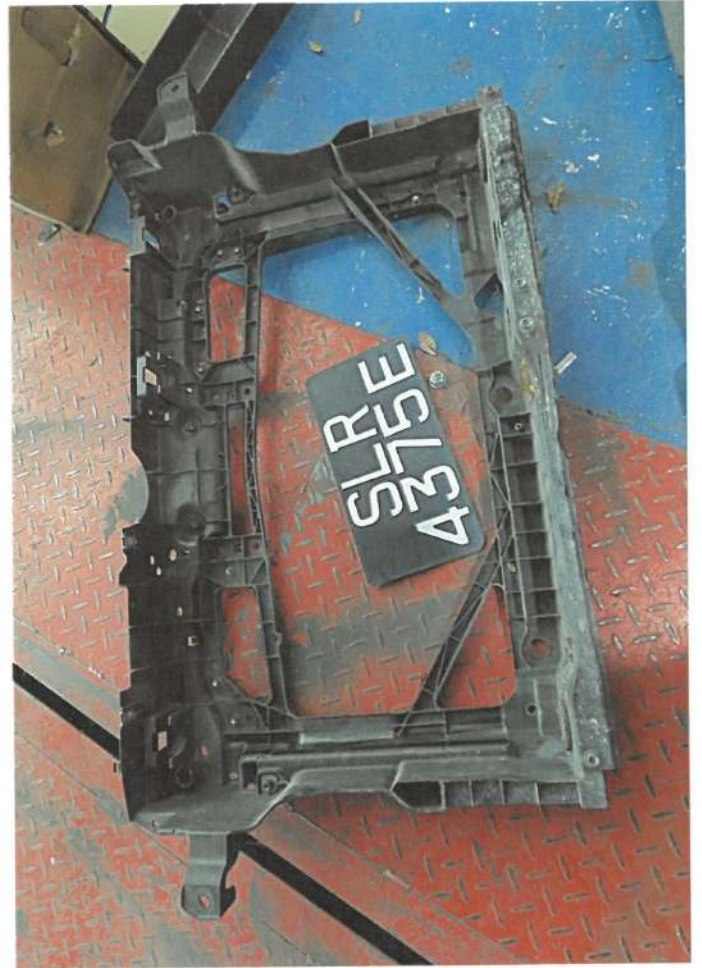
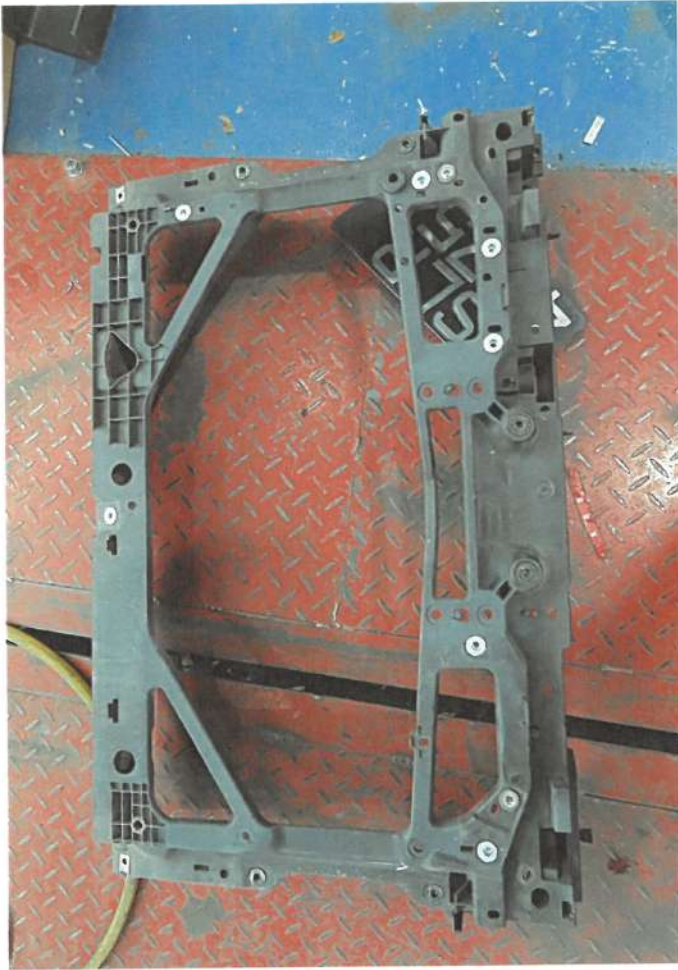




























































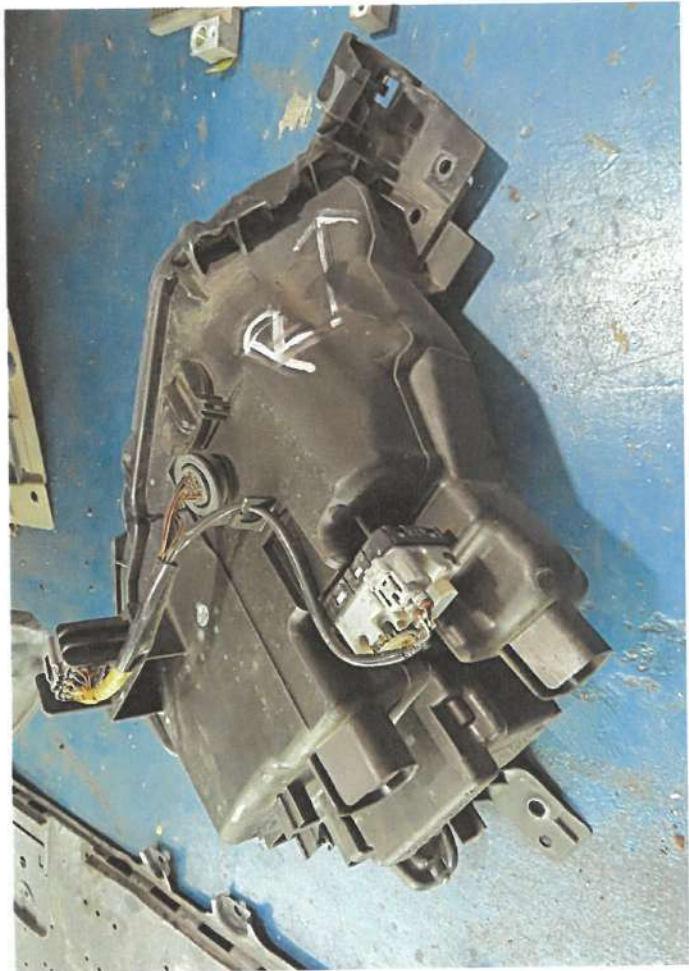












































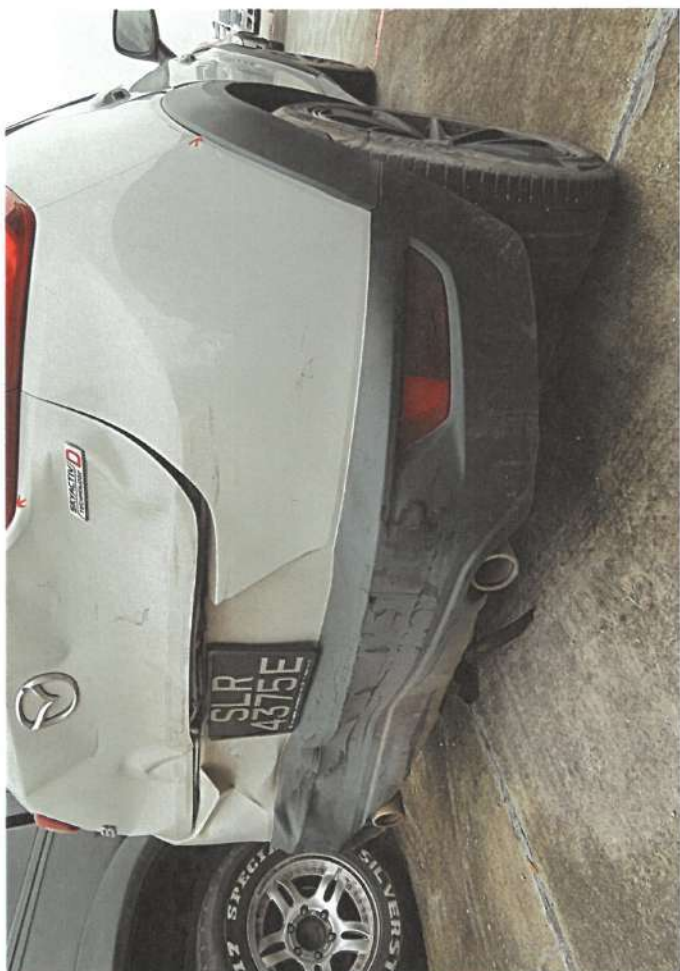








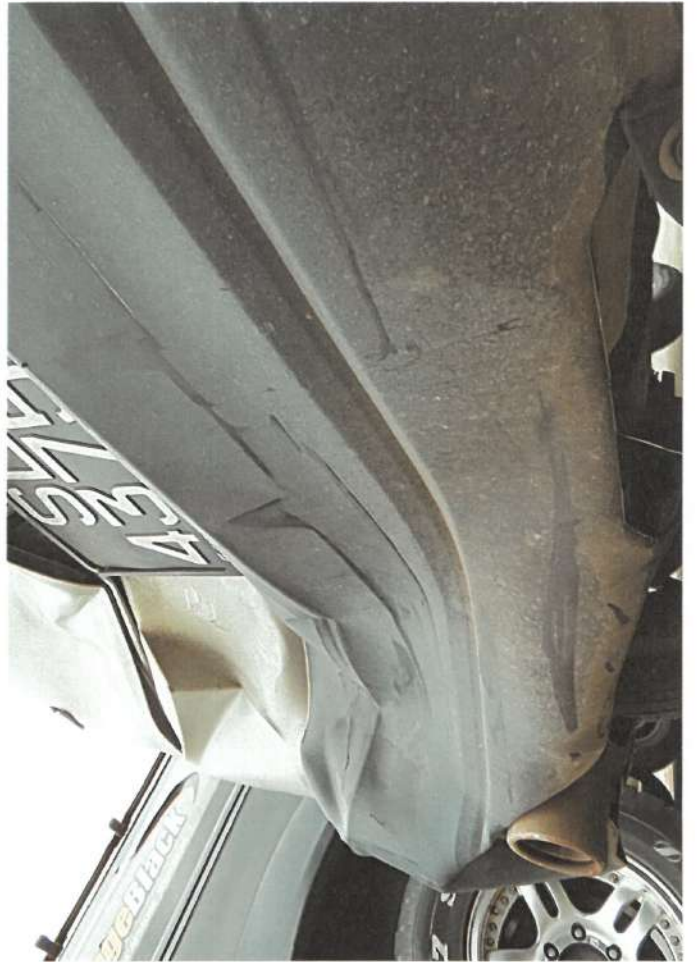




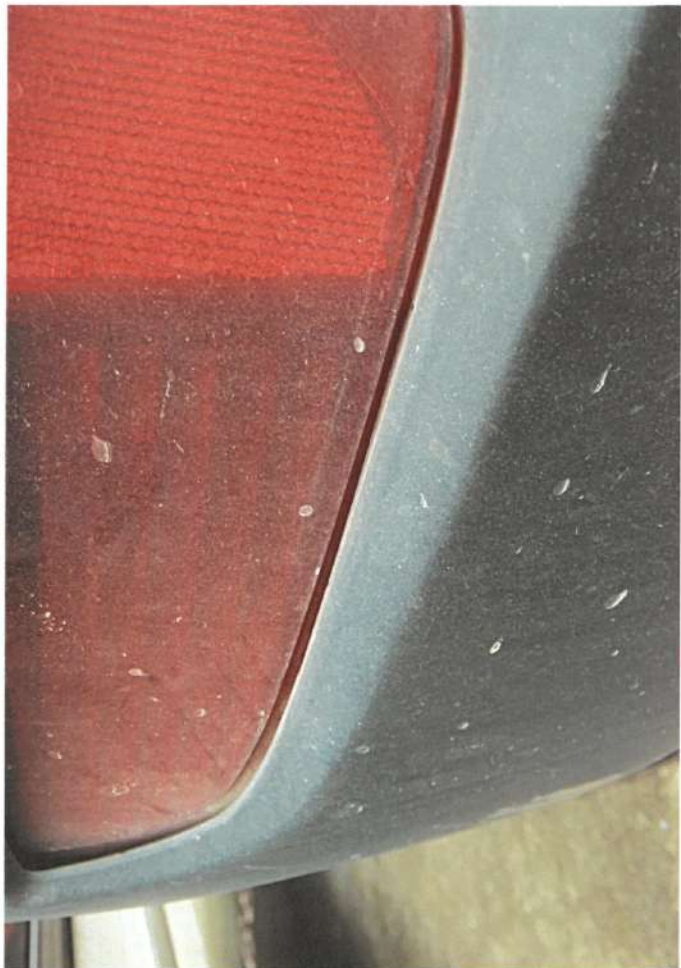




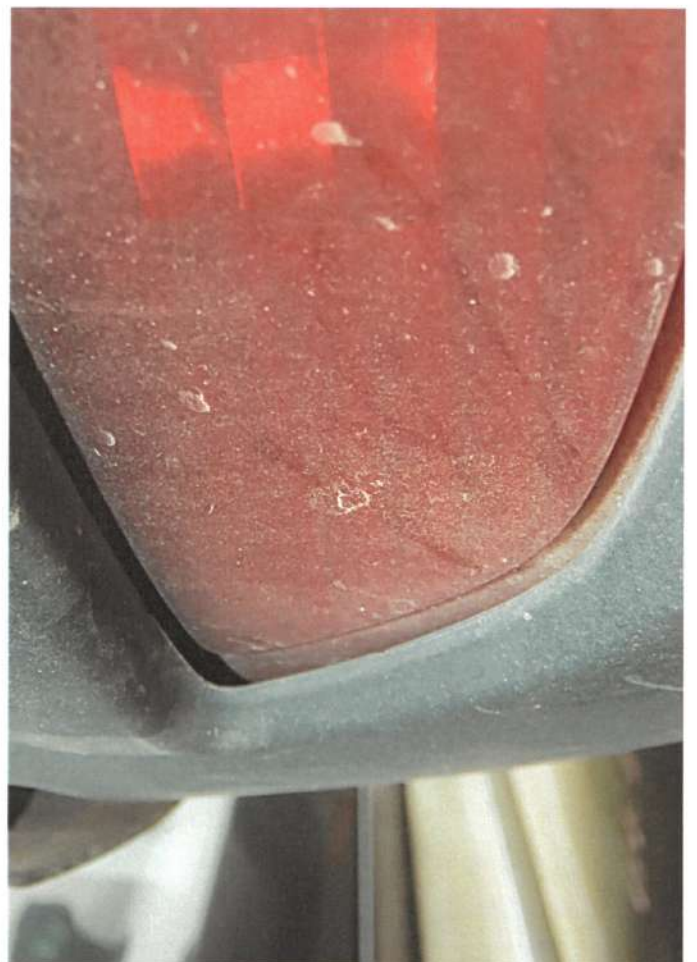








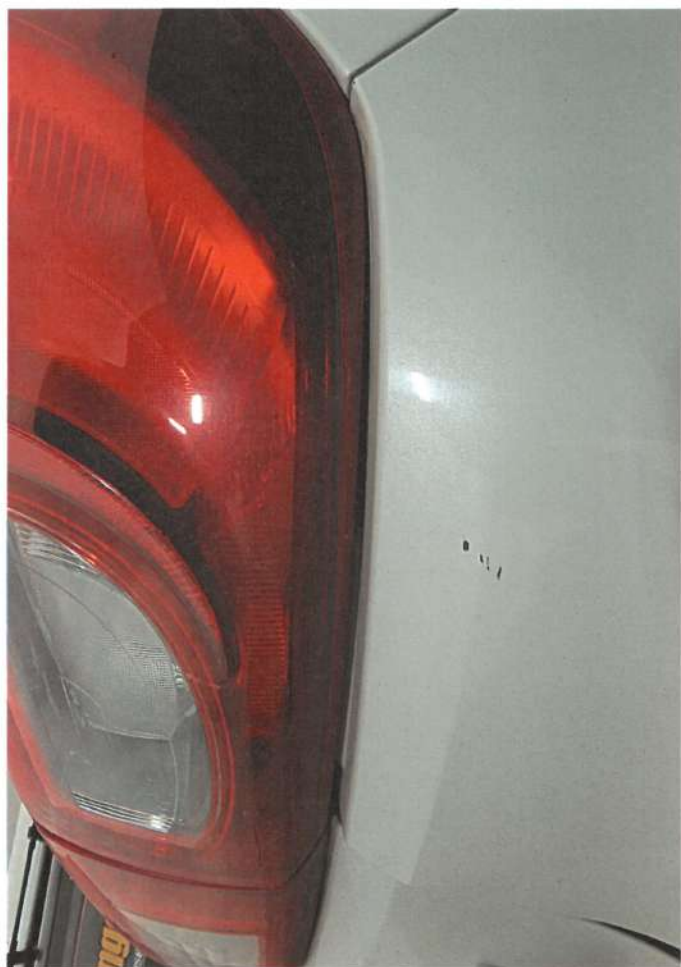




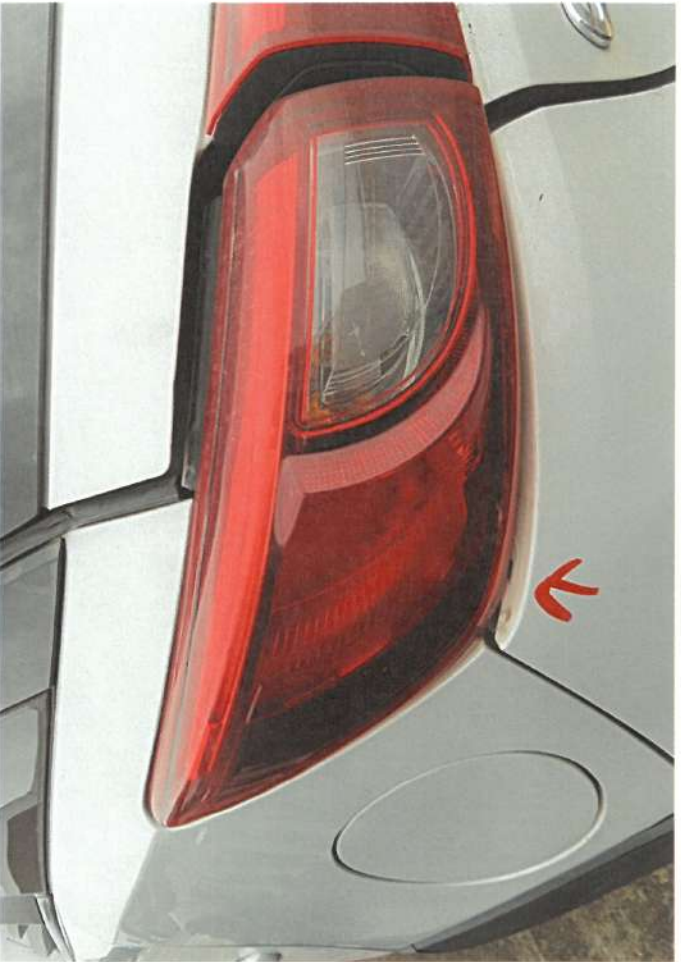
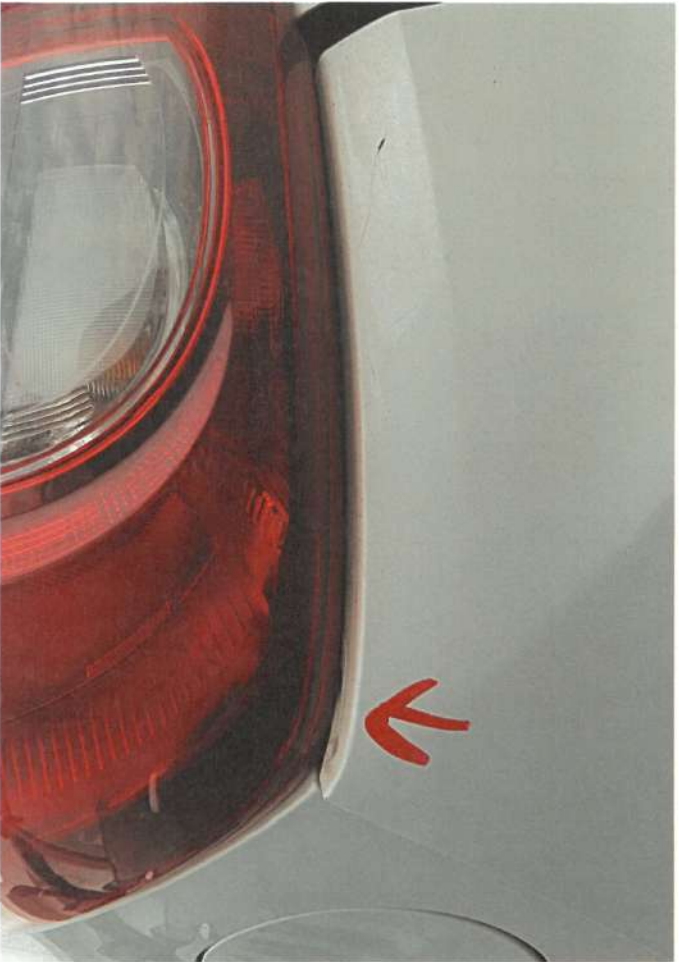
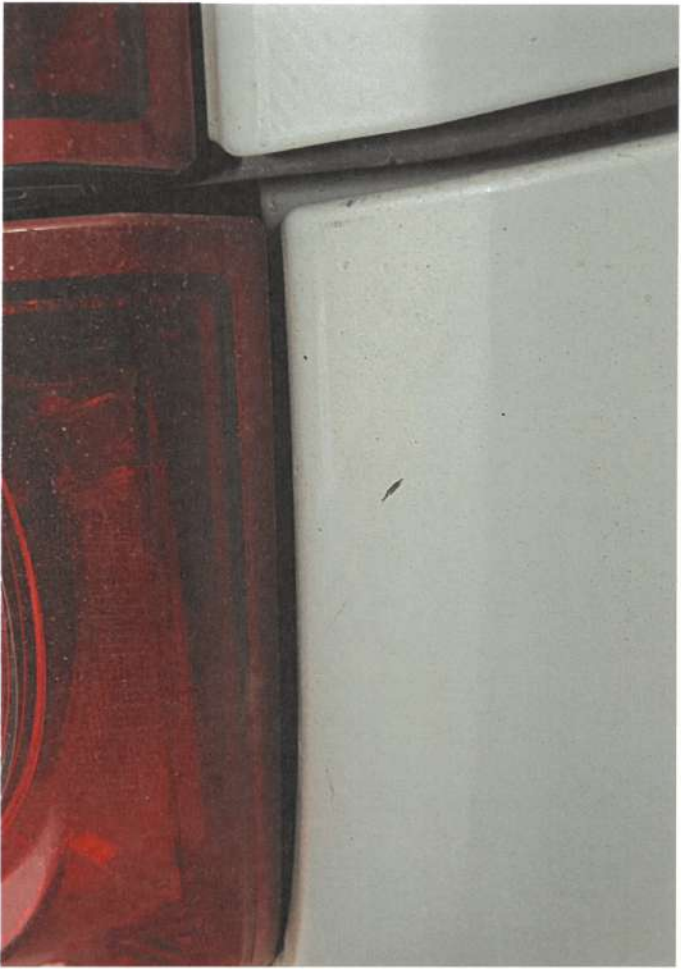
















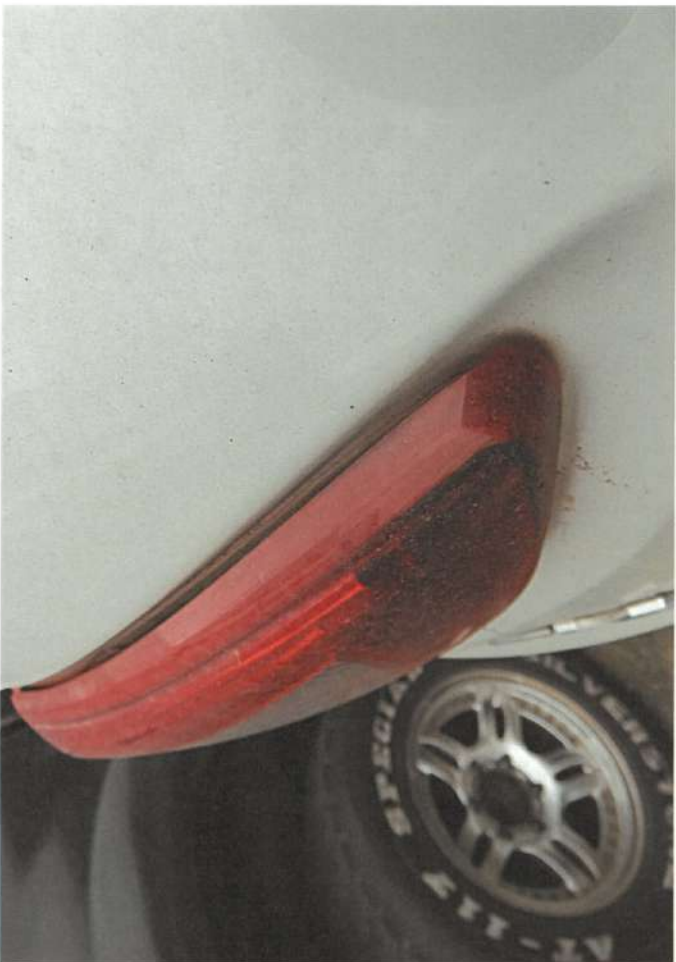




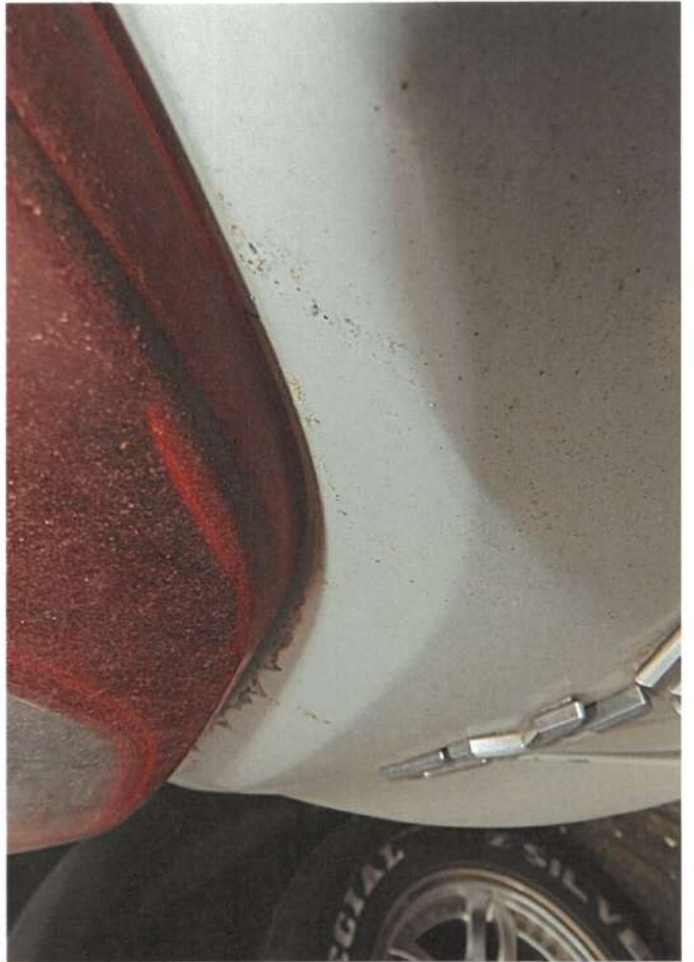
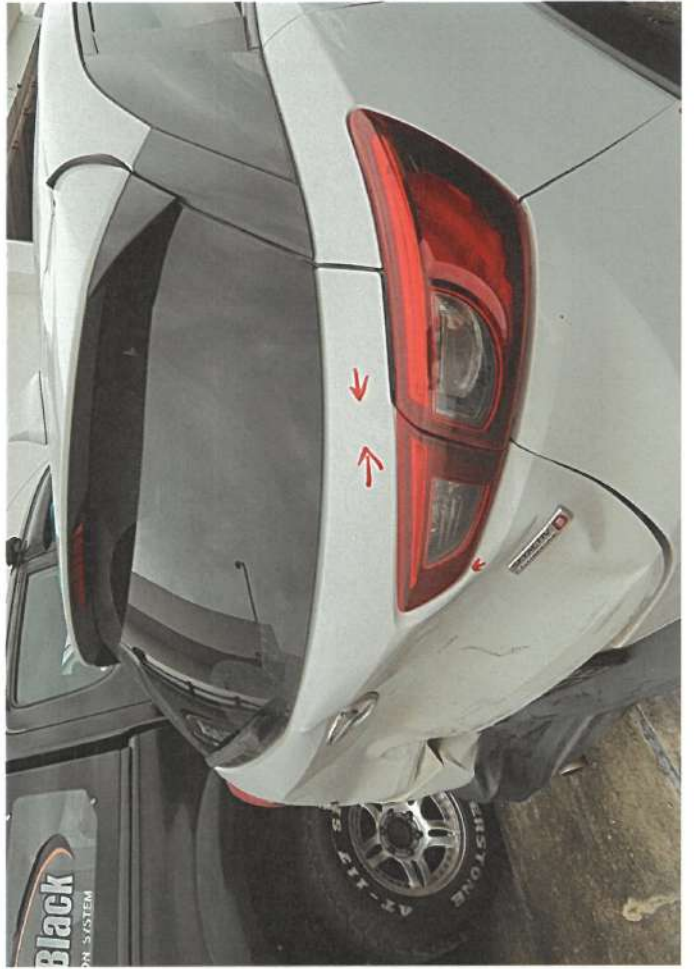




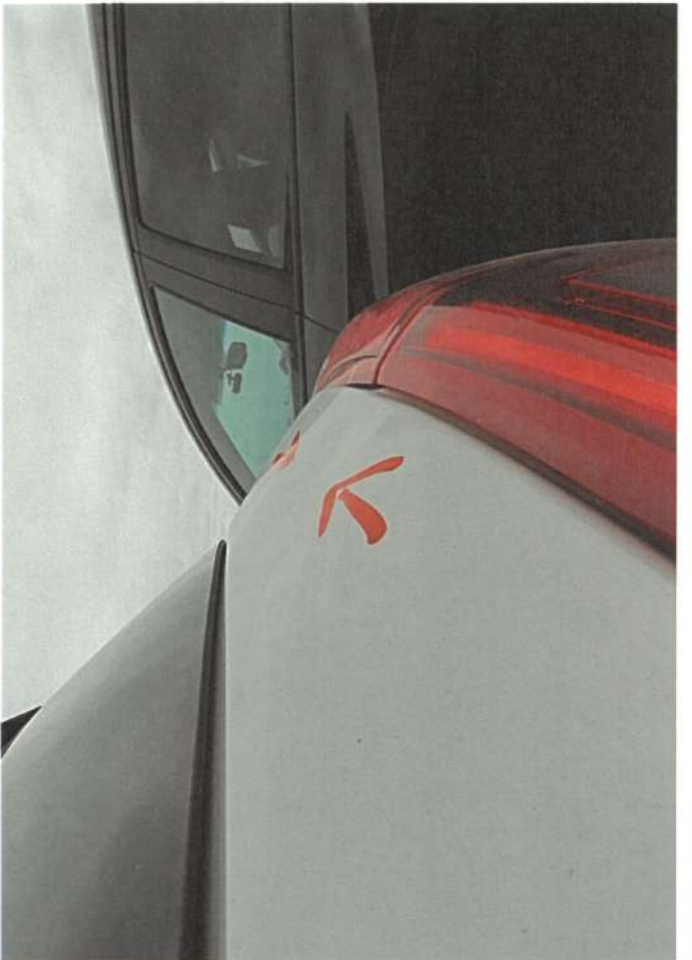












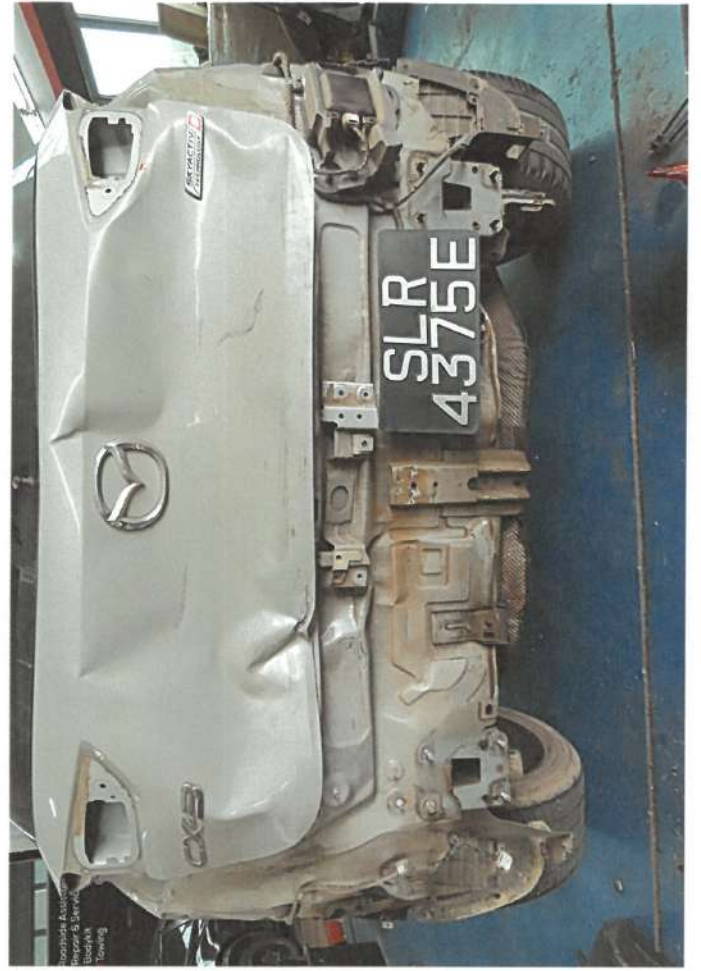
















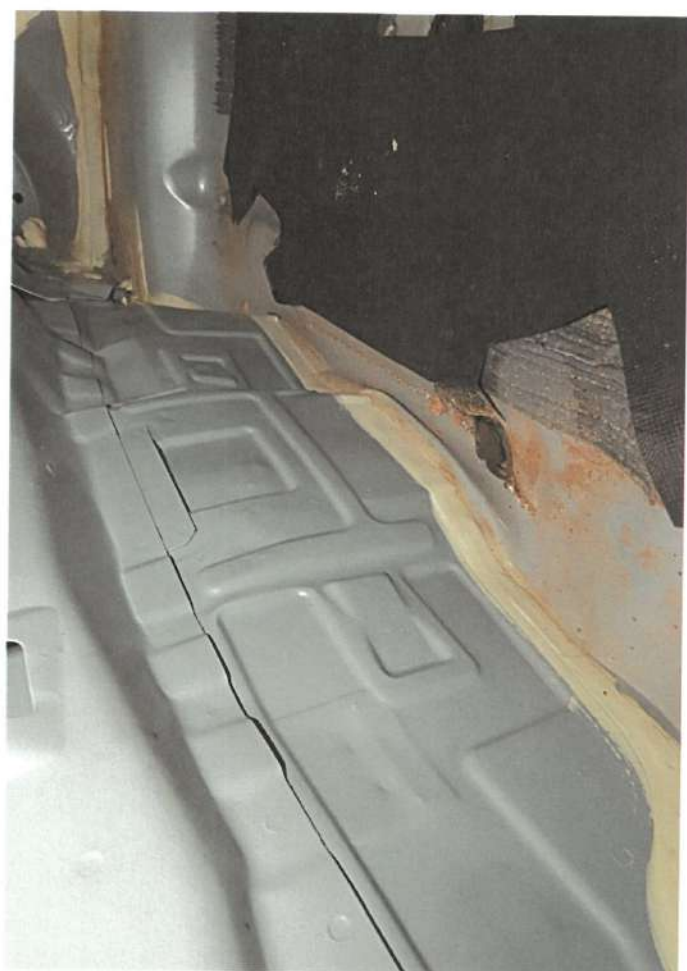
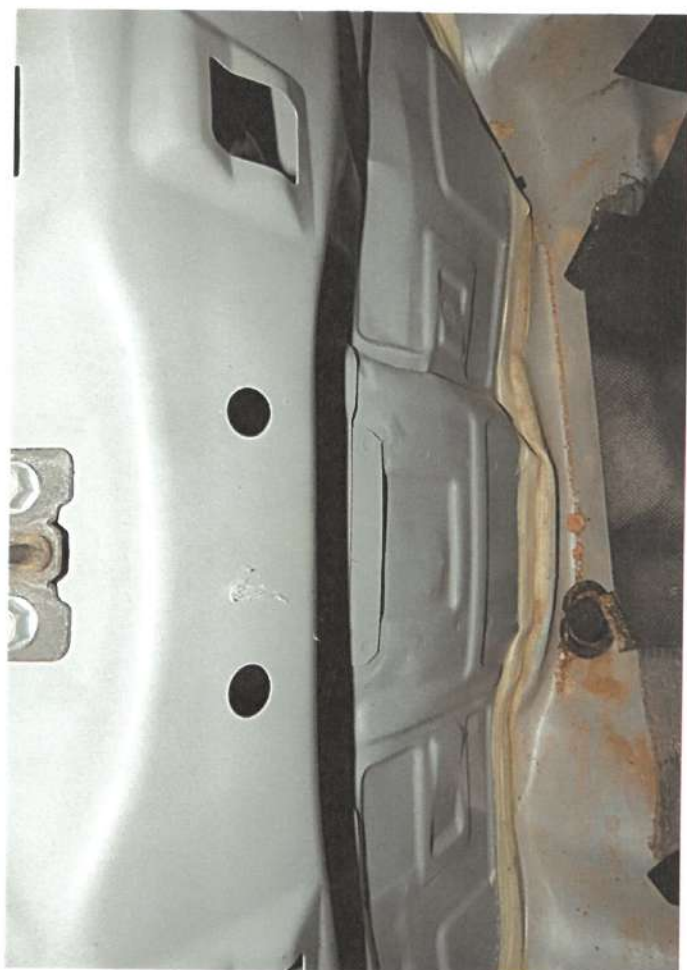
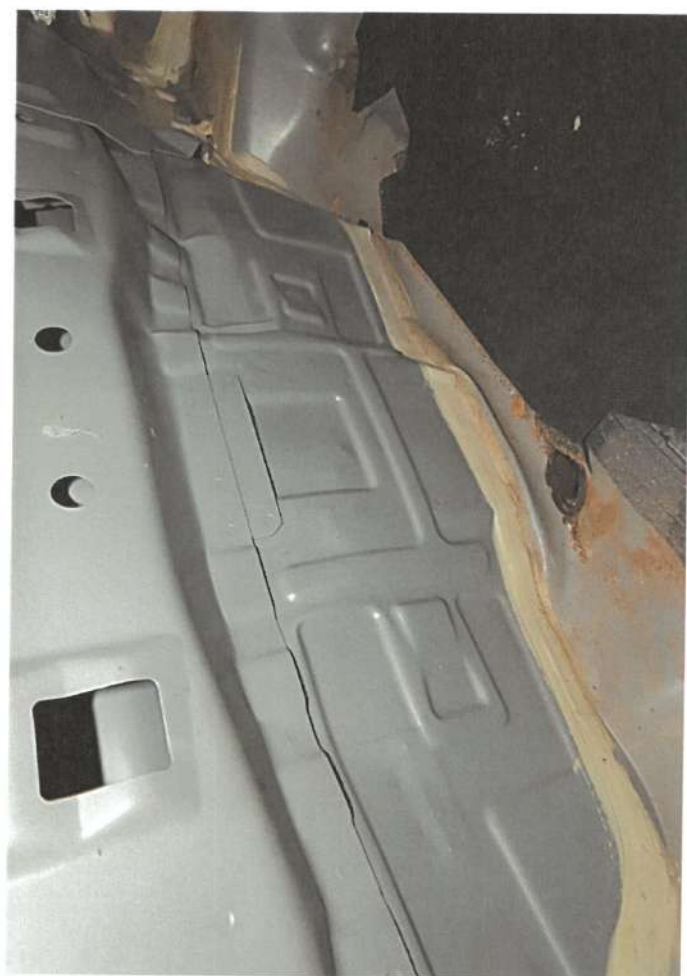




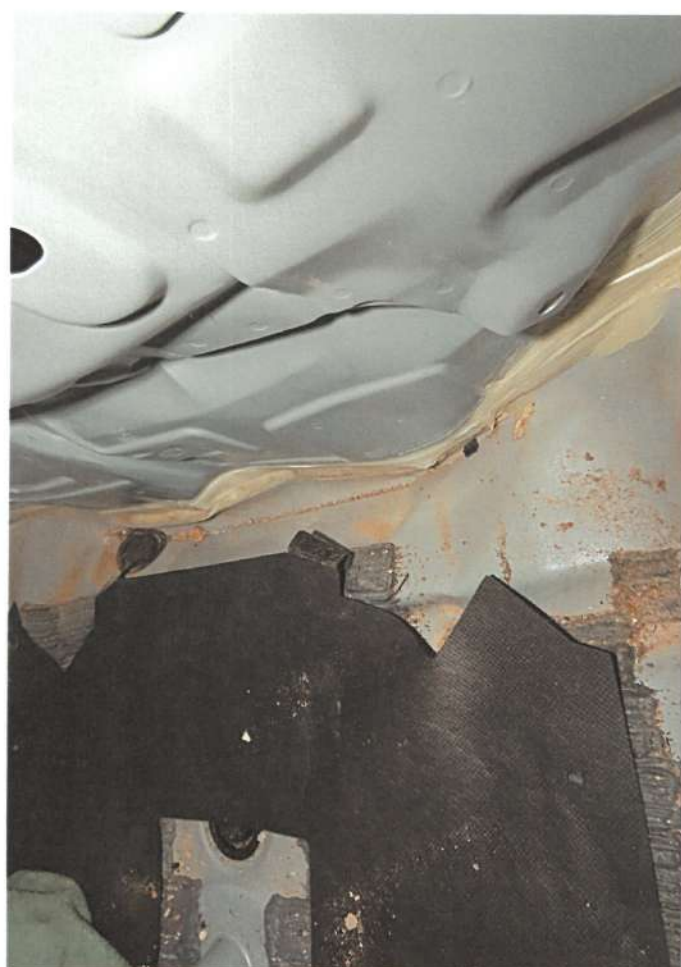
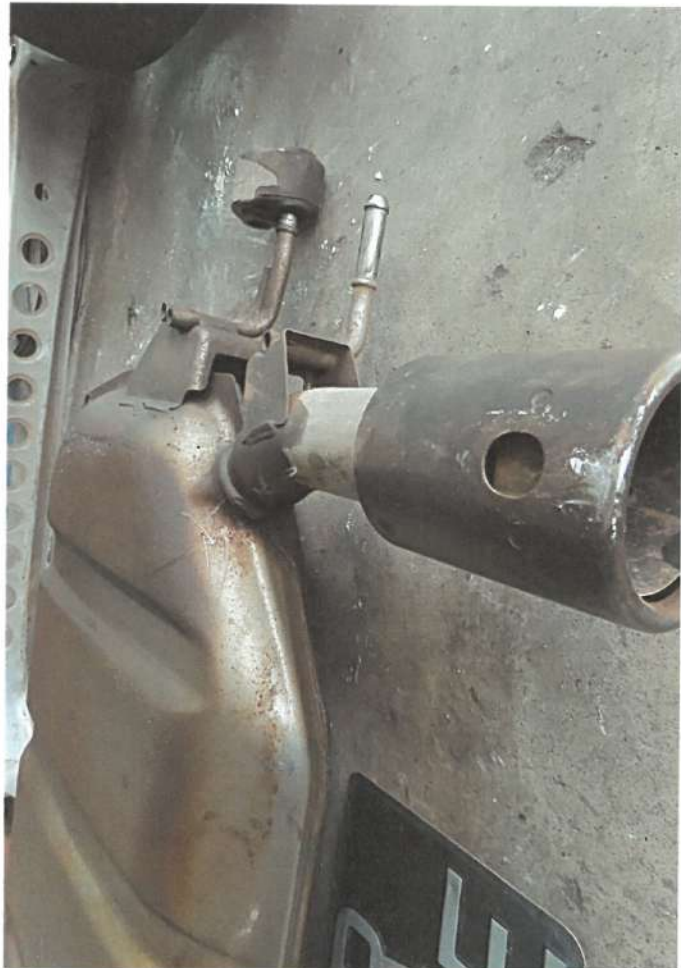
























































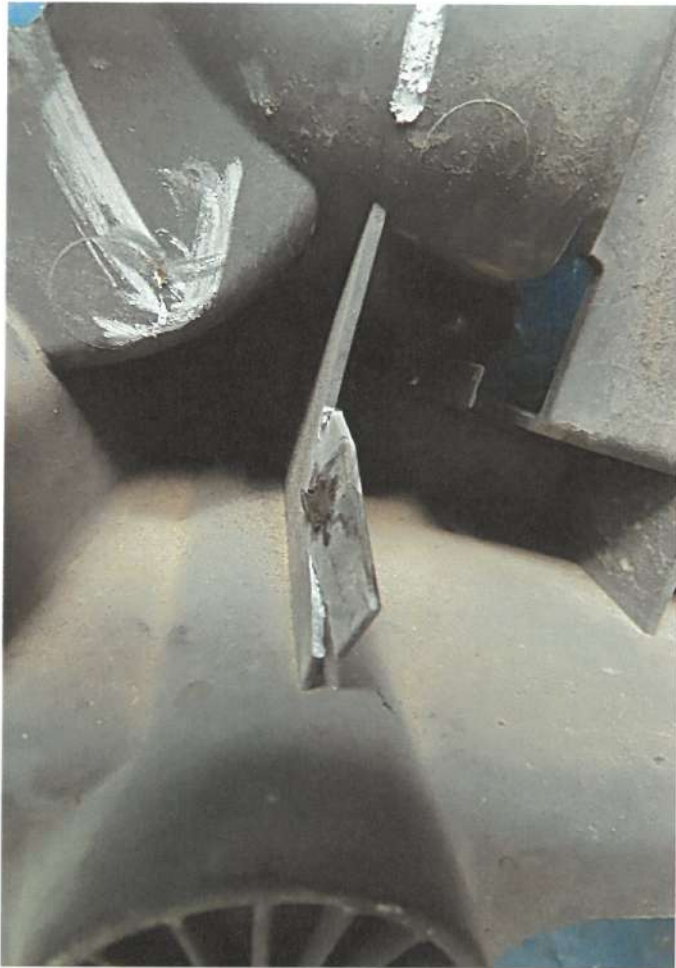




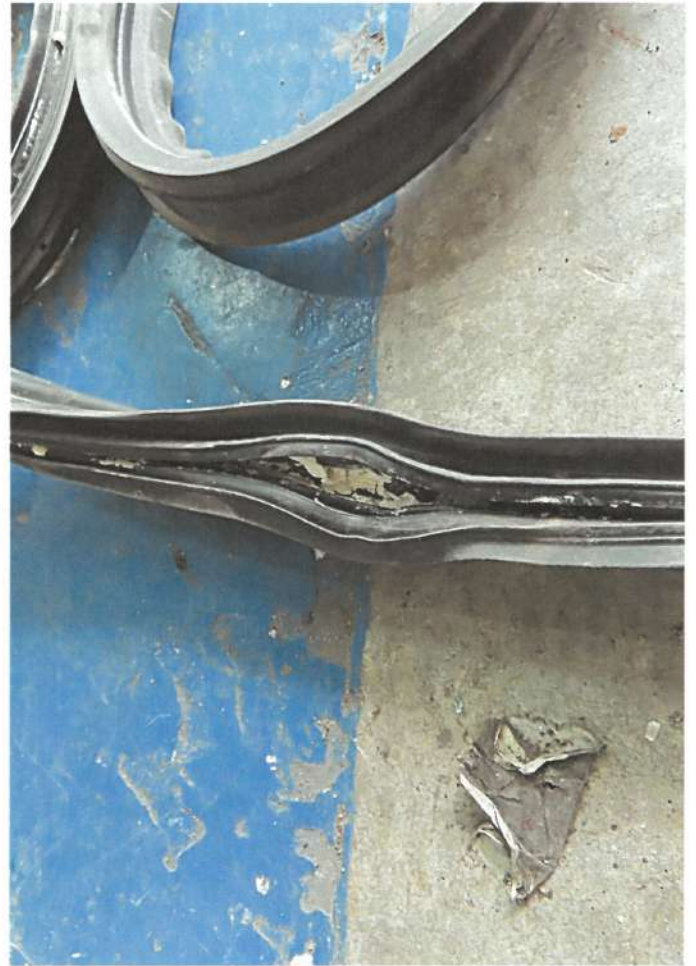








































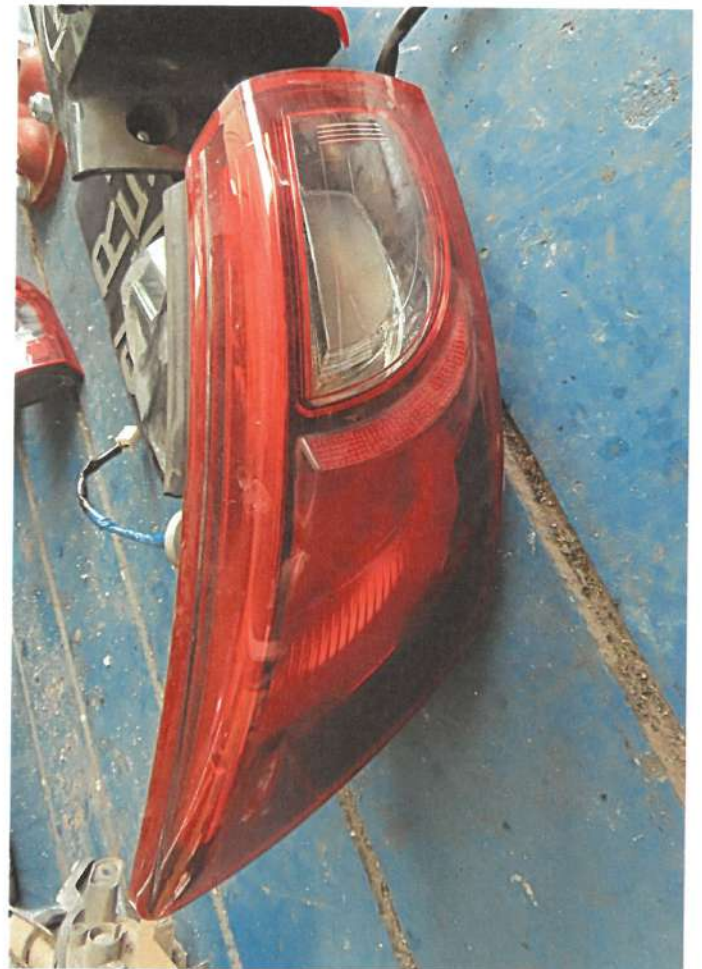












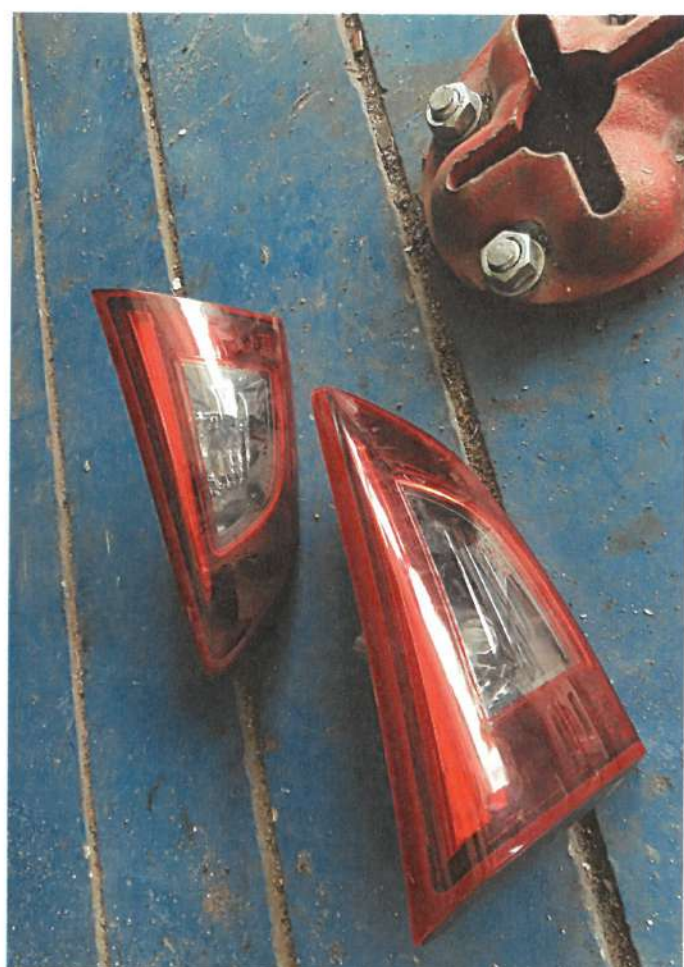






















## SINGAPORE ACCIDENT STATEMENT

### 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 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. 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	29/06/2022 17:28 (SGT)
Reported by	Both
Date of Accident	28/06/2022 09:05 (SGT)
Exact Location of Accident	KJE, Singapore
Additional Location Information	BEFORE PIE CHANGI EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR4375E
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	YONGSHENG E&C PTE LTD
Company Reg No	201717299D
Email Address	jerryxu5858@gmail.com
Mobile Phone No	(Phone) +65-97585858
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Mazda
Model	Cx-3
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 car
Transmission	Auto
CC	2000

#### INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ21-005674

#### DRIVER

Name of Driver	XU YONGJIAN
Passport No/FIN	G0767321W
Date Of Birth	01/09/1988
Occupation	Outdoor



Date Of Driving Pass .....	08/02/2018
Driving experience .....	4 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98151666
Alt. Phone Number .....	-
Email Address .....	jerryxu5858@gmail.com
Address .....	BLK 108C CANBERRA WALK #11-23
Address complement .....	-
Postcode .....	753108
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	4
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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

I WAS STATIONARY WAITING AS THERE'S A JAM AHEAD. SUDDENLY, I FELT A HUGE IMPACT FROM THE REAR AND THE IMPACT CAUSED MY CAR TO HIT ONTO THE FRONT CAR.

#### 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 .....	SME9251C
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-



Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	VEHICLE B
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SMT1091X
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	VEHICLE C
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	SLT4378L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	VEHICLE D
No. Of Passenger (Including Driver) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	UNKNOWN
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	-
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	-



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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan

A: SLR4375E  
B: SME9251C  
C: SMT1091X  
D: SLT4378L




Describe Circumstance of the Accident

I was stationary waiting as there's jam ahead.  
Suddenly, I felt a huge impact from the rear  
and the impact caused my car to hit onto the  
front car.

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

Witnessed by Reporting Centre Personnel