

ASS. REC. BY: Taujith

REF:

ALG

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

☒ OD / ☐ TP / ☐ WS / ☐ TP RES / ☐ OD RES / ☐ EVA / ☐ INV / ☐ MV

To inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: Nil

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: \$162K

IDAC Accident Report _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Alway Vehicle: IN / OUTVeh No: SNB4629 JYr Regn: 2021, AugType: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /☐ Truck / ☐ Trailer orMake: Audi A4

c.c

1984Colour: WhiteA/C: ☐ Insured / ☐ Std / ☐ NI / ☐ NASp. Reading: 12305T/Radio: ☐ Insured / ☐ Std / ☐ NI / ☐ NA

Eng/No: _____

C/No: W14U E77 F4X M4 684272Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orMod: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim orTyre Size: F: 225/50 R17R: N/ABS / DUN / EXNOVA / GY / FS / LIZA / ☒ MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.I. _____

D.O.I. 30/6/23Survey held at Premium BenorDes. of Damages: ☐ Frt / ☐ Rear / ☐ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop orR + N/S

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS \$

Photos

Others

Rep. Format: _____

Lump Sum / L.E.F. (F

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/OD/0607/2023/EQ
DATE : 30-Jun-23
WIP : 26781

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 30/6/2023

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way

#07-16 AIG Building

Singapore 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME : MR WEI XIYU
ADDRESS : 21 STIRLING ROAD
#38-07
SINGAPORE 148960
TELEPHONE : HP +65 89395319
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 7210091721
VEHICLE NO : **SNB 4629 J**
MODEL CODE : AUDI A4 2.0 TFSI S-TRONIC
MODEL YEAR : 24/8/2021
ENGINE NO : DEM 033808
CHASSIS NO : WAUZZZF4XMA084272
MILEAGE : 12,305
DATE IN : 28-Jun-23
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 27-Jun-23
PLACE OF ACCIDENT : OPHIR ROAD ABOUT TURN OFF TO REPUBLIC BLVD

55 UBI ROAD 1, SINGAPORE 408699
 TEL : 6366 2323 FAX : 6841 1183
 EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SNB 4629 J

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID.	S/N \$ 480.00	✓
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N \$ 350.00	250
3	TO REMOVE AND RENEW AIRCON CONDENSER, CHARGE AIR COOLER AND RADIATOR. CHECK ELECTRICAL FANS AND CONTROL UNIT. PRESSURISE COOLING SYSTEM.	S/N \$ 1,400.00	?
4	TO CARRY OUT VACUUM AND REGAS FOR R1234.	S/N \$ 1,200.00	?
5	TO REMOVE AND REINSTALL LHS FRONT DOOR PANEL TRIM. TO REMOVE AND REINSTALL LHS WING MIRROR ASSY TO FACILITATE RESPRAY OF LHS FRONT DOOR.	S/N \$ 280.00	X
6	TO DISMANTLE AND RENEW FRONT BUMPER, BONNET, LHS FRONT FENDER AND LHS HEADLIGHT. TO REPAIR LHS FRONT FENDER TOP SUPPORT. TO RENEW FRONT LOCK CARRIER AND ALIGN TO POSITION. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 5,000.00	1500
TOTAL LABOUR CHARGES		: \$ 8,710.00	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SNB 4629 J

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
7	TO RESPRAY FRONT BUMPER, BONNET, LHS FRONT FENDER AND LHS FRONT DOOR.	\$	3,500.00	1650.
8	TO RENEW LHS FRONT RIM. TO CARRY OUT PRE/POST WHEEL ALIGNMENT.	S/N \$	520.00	280.
9	TO RENEW LHS FRONT FENDER INNER AIRCON PIPE.	S/N \$	280.00	?
10	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$	192.00	✓
TOTAL LABOUR CHARGES		:	\$ 13,202.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SNB 4629 J

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	FRONT BUMPER	1	\$ 2,515.00	m✓
2	FRONT BUMPER FIXING PARTS	1	\$ 416.00	?
3	FRONT BUMPER SECURING STRIP	1	\$ 42.00	de✓
4	FRONT BUMPER GRILLE - CENTER	1	\$ 231.00	?
5	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE	1	\$ 310.00	?
6	FRONT BUMPER AIR GUIDE - LH	1	\$ 83.00	de✓
7	FRONT BUMPER CLOSING ELEMENT - UPPER CENTRE	1	\$ 310.00	?
8	FRONT BUMPER AIR GUIDE GRILLE - LH	1	\$ 159.00	mis✓
9	FRONT BUMPER OUTER GRILLE HOLE COVER - LH	1	\$ 57.00	?
10	RADIATOR GRILLE	1	\$ 1,861.00	?
11	FRONT BUMPER FOAM FILLER PIECE	1	\$ 224.00	?
12	FRONT BUMPER REINFORCEMENT BEAM	1	\$ 953.00	?
13	FRONT BUMPER GUIDE SECTION - LH	1	\$ 43.00	ang✓
14	FRONT BUMPER BRACKET - LH	1	\$ 269.00	?
15	FRONT BUMPER TOP COVER	1	\$ 151.00	de✓
16	OIL COMPLY WITH VW STANDARD STICKER	1	\$ 14.00	X
17	CAUTION SIGN STICKER	1	\$ 17.00	nee✓
18	AIR CONDITIONER STICKER	1	\$ 9.00	nee✓
19	FRONT BUMPER BRACKET	1	\$ 163.00	ang✓
20	FRONT BUMPER SUPPORT - LH / RH	2	\$ 68.00	?
SUB TOTAL SPARE PARTS		:	\$ 7,895.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT,

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			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	FRONT PARKING AID SENSOR - INNER / OUTER ^X ?	2	\$ 544.00	
22	FRONT PARKING AID SEAL RING	4	\$ 11.00	ng ✓
23	FRONT BUMPER WIRING SET	1	\$ 648.00	?
24	HORN HIGH TONE - LH	1	\$ 142.00	?
25	HORN BRACKET - LH	1	\$ 35.00	?
26	FRONT FENDER - LH	1	\$ 1,299.00	bt ✓
27	FRONT FENDER ATTACHMENT PARTS	1	\$ 238.00	?
28	FRONT FENDER CLOSING ELEMENT - LH	1	\$ 86.00	ng ✓
29	FRONT FENDER BRACKET - LH FRONT	1	\$ 44.00	bt ✓
30	FRONT FENDER RIVET	7	\$ 28.00	bt / nec
31	FRONT FENDER BRACE - LH	1	\$ 140.00	?
32	FRONT FENDER DEFORMATION ELEMENT BRACKET - LH	1	\$ 59.00	?
33	FRONT FENDER BRACKET - LH REAR	1	\$ 50.00	X
34	FRONT WHEEL HOUSING LINER	1	\$ 283.00	ty ✓
35	FRONT WHEEL HOUSING LINER ATTACHMENT PARTS	1	\$ 158.00	ng ✓
36	FRONT WHEEL SPOILER	1	\$ 87.00	eng ✓
37	FRONT WHEEL SPOILER END PLATE - LH	1	\$ 42.00	X
38	FRONT FENDER LEDGE COVER - LH OUTER	1	\$ 37.00	ty ✓ ?
39	HEADLAMPS COVER - LH	1	\$ 52.00	ty ✓
40	FRONT FENDER LEDGE COVER - LH INNER	1	\$ 73.00	?
SUB TOTAL SPARE PARTS		:	\$ 4,056.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SNB 4629 J

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
41	BONNET	1	\$	3,489.00	hl ✓
42	BONNET ATTACHMENT PARTS	1	\$	455.00	X
43	BONNET IMPACT PROTECTION - CENTER / LH / RH	3	\$	101.00	we ✓
44	BONNET STRIKER - LH	1	\$	60.00	?
45	BONNET LOCK	1	\$	241.00	?
46	BONNET BOWDEN CABLE	1	\$	67.00	?
47	BONNET RELEASE LEVER	1	\$	16.00	?
48	BONNET RELEASE CABLE COVER	1	\$	12.00	?
49	HEADLIGHT - LH	1	\$	8,666.00	over ✓
50	HEADLIGHT HOSE	1	\$	43.00	?
51	HEADLIGHT COMPENSATING PIECE	1	\$	47.00	?
52	HEADLIGHT COMPENSATING PIECE	1	\$	48.00	?
53	HEADLIGHT COMPENSATING PIECE	1	\$	48.00	?
54	LIFT CYLINDER - LH	1	\$	244.00	?
55	LIFT CYLINDER BRACKET	1	\$	8.00	?
56	LIFT CYLINDER CORRUGATED PIPE	1	\$	111.00	?
57	LOCK CARRIER	1	\$	1,569.00	?
58	LOCK CARRIER SUPPORT	1	\$	45.00	?
59	OUTSIDE TEMPERATURE SENSOR BRACKET	1	\$	22.00	?
60	A/C REFRIGERANT LINE	1	\$	197.00	?
SUB TOTAL SPARE PARTS		:	\$	15,489.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SNB 4629 J

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
61	A/C REFRIGERANT LINE	1 \$	405.00	?
62	A/C REFRIGERANT LINE	1 \$	293.00	?
63	A/C REFRIGERANT PIPE	1 \$	621.00	?
64	A/C LINE BRACKET	1 \$	9.00	?
65	CHARGE AIR COOLER	1 \$	692.00	?
66	CHARGE AIR COOLER PRESSURE PIPE - LH	1 \$	495.00	?
67	READY-MIX COOLANT	6 \$	326.00	?
68	RADIATOR AIR GUIDE - LH INNER	1 \$	38.00	?
69	RADIATOR AIR GUIDE - LH / RH OUTER	2 \$	50.00	?
70	RADIATOR AIR GUIDE - UPPER	1 \$	25.00	?
71	RADIATOR AIR GUIDE - LOWER	1 \$	38.00	?
72	FRONT ALUMINIUM RIM - LH	1 \$	1,411.00	dd
73	FRONT ALUMINIUM RIM RUBBER VALVE	1 \$	4.00	ua
74	FRONT NOISE INSULATION	1 \$	683.00	?
75	FRONT NUMBER PLATE	S/N \$	60.00	?
76	SUNDRIES	\$	600.00	?
TOTAL SPARE PARTS		:	\$	33,190.00
TOTAL LABOUR CHARGES		:	\$	13,202.00
GRAND TOTAL		:	\$	46,392.00

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EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME :
SURVEYED DATE :
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS :

Taufik 97495749 / 67563561
Not Authorise Ex: to be advise.
30/6/13 @ 3pm
7 days
Resurvey before paint
taufik@lkkauto.com

PLEASE NOTE :

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

LKK Auto Consultants hereby notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary part(s) must be resurveyed **and** is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT



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	28/06/2023 15:46 (SGT)
Reported by	Actual Driver
Date of Accident	27/06/2023 16:48 (SGT)
Exact Location of Accident	Ophir Rd, Singapore
Additional Location Information	OPHIR ROAD ABOUT TURN OFF TO REPUBLIC BLVD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB4629J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	WEI XIYU
NRIC No	SXXXX016F
Email Address	WXYBESTONE@GMAIL.COM
Mobile Phone No	(Phone) +65-89395319
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	2.0 TFSI S-TRONIC
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210091721

DRIVER

Name of Driver	ZHANG FAN
NRIC No	SXXXX553D
Date Of Birth	04/09/1992
Occupation	Indoor

Date Of Driving Pass	15/08/2016
Driving experience	6 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-81439389
Alt. Phone Number	-
Email Address	VIVIAN.FZ.2011@GMAIL.COM
Address	21 STIRLING ROAD
Address complement	#38-07
Postcode	148960
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Change/cross lane
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 JUN 27 04:48 PM ON OPHIR ROAD, WHEN I CHANGE TO THE LEFT LANE AND WENT INTO REPUBLIC BLVD ROAD ON MY LEFT SIDE, I SIGNALLED THE LEFT LANE CHANGE WITH THE LEFT SIGNAL LIGHT AND CHECKED THE BLIND SPOT. DURING THE LANE CHANGE, A LORI SUDDENLY APPEARED IN THE LEFT LANE AND I DID NOT HAVE ENOUGH TIME TO AVOID. LORI'S RIGHT SIDE AND MY CAR'S LEFT FRONT CORNER COLLIDED WITH EACH OTHER.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY:

Vehicle Registration Number	GBD5221B
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	MAO ZHEN LIN
Contact Number	(Phone) +65-83177246
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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.



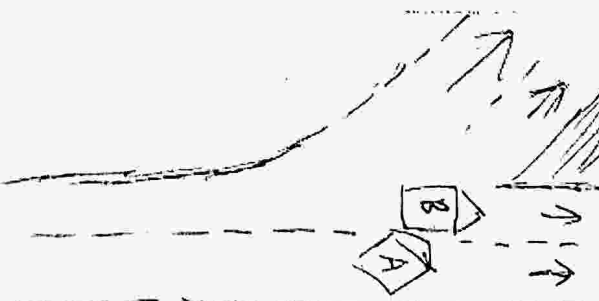
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A: SNB 46295
B: GBD52218



Describe Circumstances of the Accident

At Jun 27 04:48 PM on Ophire Road, when I change to left lane and want to
Depublic Blvd road on my left side, I signalled the left lane change with left signal
light and checked blind spot. During the lane change, a car suddenly appeared in
the left lane and I did not have enough time to avoid. Car's right side and my car's
left front corner collide each other.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

1/2/22 2023. June 28 11:40
Driver's Signature (If driver is not the policyholder) / Date
& Time

Witnessed by Reporting Centre
Personnel