

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy flability.

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
 15/03/2021 10:25 (SGT)

 Date of Accident
 13/03/2021 11:35 (SGT)

 Exact Location of Accident
 PIE, Singapore

ditional Location Information PIE - CHANGI (BEFORE TAMPINES AVE 5)

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB4179C

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner PERFECT TAXIS PTE LTD

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Ioniq
Variant Taxi
Ansmission Auto
CC 1600

INSURANCE COMPANY

Name of Insurance Company
Type of Coverage
Fleet Policy

NTUC Income Insurance Co-operative Ltd
ThirdParty
Yes

No

Policy Number 5108038273-01

Cover Note Number

DRIVER

 Name of Driver
 WEE JUN CHENG

 NRIC No
 \$0321607J

 Address
 BLK 731 #04-84

 Address complement
 TAMPINES ST 43

 Postcode
 591731

Does Driver Own Other Vehicles?

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Chain Collision Weather Conditions Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Was anybody injured in the Accident? Yes Was any other material or property damaged? Yes Number of Passengers (Including Driver) 1

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACH

ALL VEHICLES - NO PAX

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No s there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJN2602X Vehicle Manufacturer Toyota Vehicle Model Vios Vehicle Variant Vehicle Colour Vehicle Category Private car

Name of Driver MS JERLYN CHIA

Insurance Company Name

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGR9825J Vehicle Manufacturer Toyota Vehicle Model Corolla ` hicle Variant Aicle Colour Red Vehicle Category Private car Name of Driver Insurance Company Name

INJURED PERSONS DETAILS

INJURED 1

Name of injured person WEE JUN CHENG - DRIVER OF VEH. A Injured person in which vehicle? SHB4179C