

# 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 First Submission .....	28/08/2024 17:30 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	28/08/2024 10:20 (SGT)
Exact Location of Accident .....	Near 47 Tessensohn Rd, Singapore 217663
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMY8429J
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	GOCAR PRIVATE LIMITED
Company Reg No .....	202225542Z
Email Address .....	WILLYTWL182@GMAIL.COM
Mobile Phone No .....	(Phone) +65-97877657
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Kia
Model .....	Cerato
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private hire
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private hire
Transmission .....	Auto
CC .....	1591
Vehicle Fuel .....	Petrol
First Registration Date .....	31/07/2017
Chassis no .....	KNAFX411MH5696629
Effective Date/Time of Ownership .....	-

### INSURANCE COMPANY

Name of Insurance Company .....	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	SP2032096114

### DRIVER

Name of Driver .....	HENG CHRISTOPHER
NRIC No .....	S1807149E
Date Of Birth .....	24/08/1967
Occupation .....	Outdoor
Driving Pass Date .....	02/02/1989
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	35 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97242247
Alt. Phone Number .....	-
Email Address .....	CHRISHENG108@GMAIL.COM
Address .....	APT BLK 6 HOUGANG AVENUE 3 #03-70 S 530006
Address complement .....	-
Postcode .....	-
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	2
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 .....	SERENE
Gender .....	Female

#### 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

#### REFER TO SKETCH PLAN

#### ATTACHMENT(S)

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

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBF4194S
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	HENG CHRISTOPHER
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

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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/small 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.

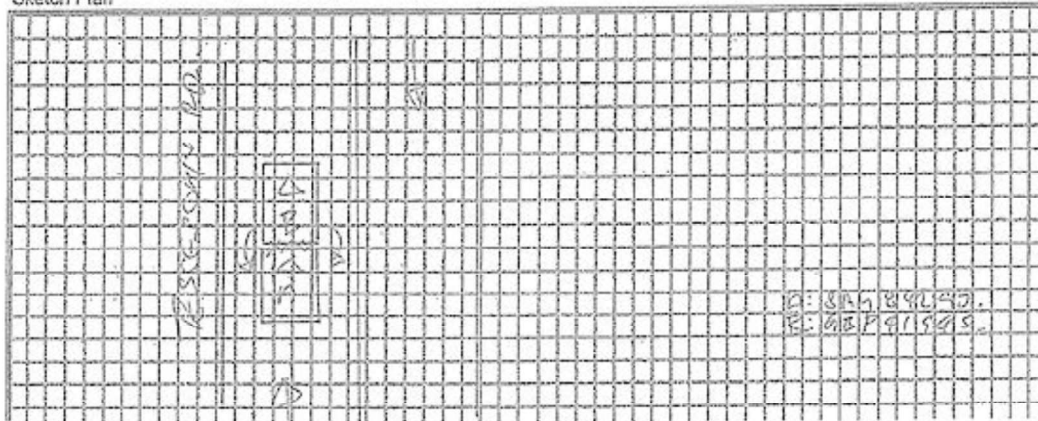


Policyholder's Signature/T Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRICID card)

Sketch Plan



Describe Circumstance of the Accident

ON THE STATED DATE AND TIME, I WAS  
 TRAVELLING STRAIGHT IN MY OWN LANE BEHIND  
 VEH B WITH A SAFETY DISTANCE MAINTAINED.  
 OUT OF NOWHERE, VEH B JAMMED HIS BRAKES  
 AND REVERSED AND HIT INTO MY VEHICLE'S  
 FRONT PORTION.

Declaration

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

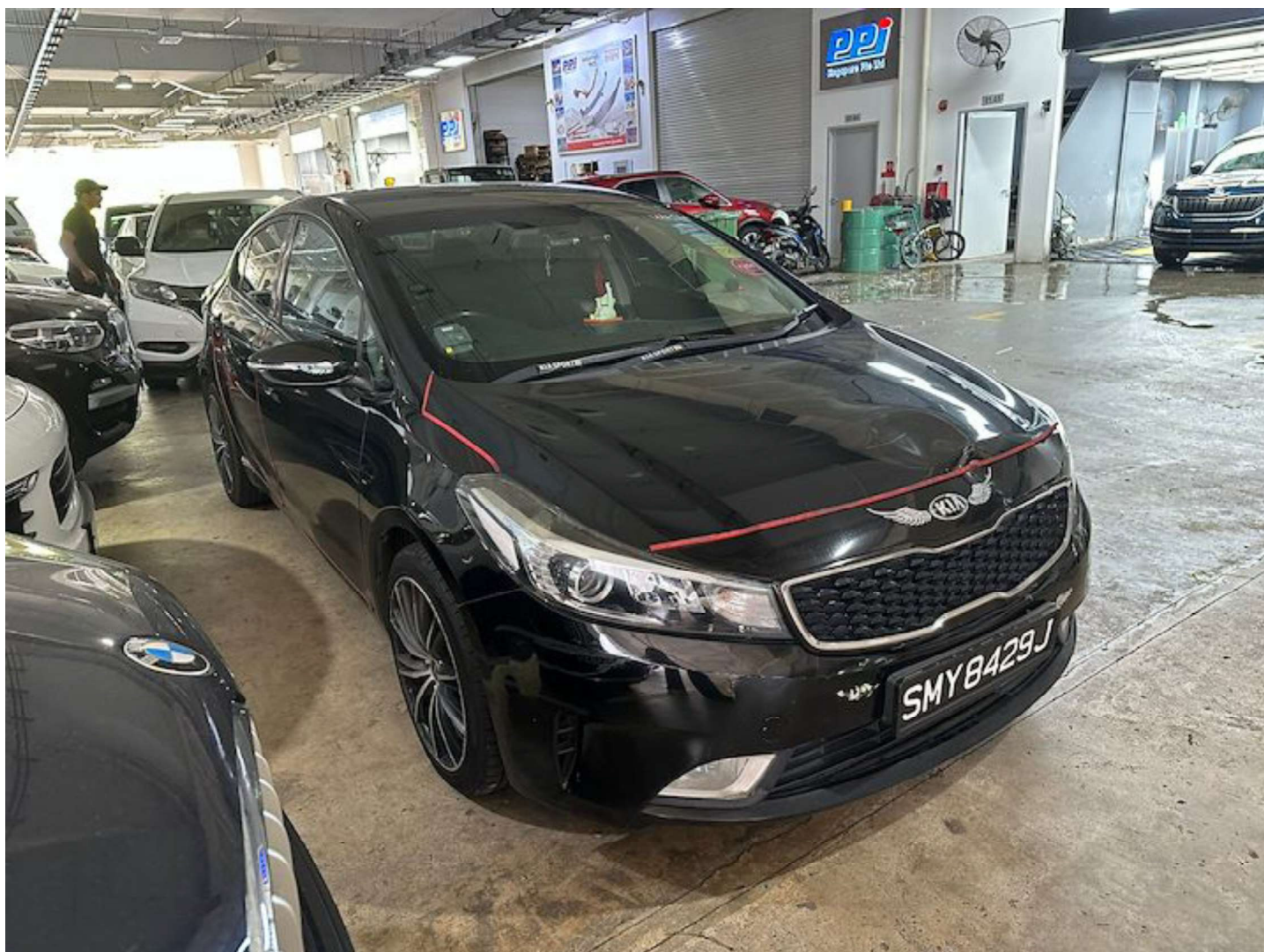
   
 Policyholder's Signature / Date & Time

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

   
 Witnessed by Reporting Centre Personnel











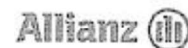












Allianz Insurance Singapore Pte. Ltd.

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**CERTIFICATE OF INSURANCE**


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ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2032096114  
 Date of Issue : 06 August 2024  
 Coverage : THIRD PARTY ONLY  
 Policyholder : GOCAR PRIVATE LIMITED  
 Finance Company : -  
 Period of Insurance : 08 August 2024 To 07 August 2025 (both dates inclusive)  
 Registration Number : SMY8429J  
 Chassis Number of Vehicle : KNAFX411MH5696629

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**Persons or Classes of Persons Entitled to Drive\*:**

- (a) The Policyholder.  
 (b) Any other person who is driving on the Policyholder's order or with his/her permission or to whom the vehicle is hired.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

**Limitation as to Use\*:**

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.  
 (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.  
 (c) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by any person to whom the vehicle is hired and for use within Singapore only.


\* Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**Policy does not cover:**

- (a) Use for racing, pace-making, reliability trials or speed-testing.  
 (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

06 August 2024  
 Issue Date

  
 Hicham Raissi  
 Chief Executive Officer  
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code	: 0000053 INFINITUM FINANCIAL ADVISORY PTE LTD		
Excess	: Section 2: Liabilities to Third Parties Within Singapore	S\$	2,000.00
	: Section 2: Liabilities to Third Parties Outside Singapore	S\$	4,000.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C  
 79 Robinson Road #09-01 | Singapore 068997 | Tel: +65 6714 3369 | Website: www.allianz.sg



# Gocar Pte Ltd

18 Sing Ming Lane #06-31 Midview City S573960 Tel: 64817731 UEN: 2022255422

Model: Kia K3 Reg No: SMY 8429J

Hirer's Name on NRIC: <u>Heng Christopher</u>	NRIC No: <u>S1807149E</u>
Date of Birth: <u>24.08.1967</u> Age (Min 30; Max 70): <u>57</u>	> 2 Year S'pore Driving license: <u>(Yes)</u> / No
HP No: <u>9734 2247</u> Go-Jek HP no: _____	Next of Kin: _____ NOK HP No: _____
Email Address: <u>chrcheng108@gmail.com</u>	Marital Status: _____
Residence Address: <u>Blk 116 Jurong East St 13 #05-392</u>	Postal: <u>600116</u>
Undischarged Bankrupt?: Yes / No Any Outstanding Debt with other Car Rental Firm?: Yes / No	
In the event if there is any untruthful declaration for these 2 questions, Company reserves the right to tow back the car (Rental Agreement will consider void and there will be no refund of Deposit or unused rental) or increase the deposit to \$1,500 & collect of weekly upfront car rental.	

## Vehicle Rental Agreement

Vehicle Handover & Rental start date: 8/8/2024 Time: 7 am

Driver commits to drive until 31/12/2024 Time: 11 pm

\*The contract will be automatically renewed.

\*A notice period of 7 days needs to be given by either party for contract termination or adjustment of rental rate.

Damaged Decal Charge: There is a cost of \$200 for the replacement of Damged Decals.

Top-up Petrol Charge: Hirer has to top-up 95 Grade Petrol to the recorded petrol level when returning car as there is an Admin fee of \$50 plus the cost of petrol will be chargeable if the petrol level is lower than the recorded level.

Cleaning Fee Charge: Gocar Pte Ltd has the right to charge a cleaning fee of up to \$300 if the car is returned with dirty condition and/or with cigarette smell.

Late Servicing & Road Tax Charge: Gocar Pte Ltd has the right to charge a one-time fee of \$200 (mileage > 1,000 km) if user didn't send our car for every 10,000 km servicing. Hirer will be responsible for any penalty incurred if hirer didn't send the car for car inspection on time by authority.

Breaking of minimum Contract Charge: Refer to T&C point no. 5 for details.

CDW Option: Singapore CDW (N/A) or Malaysia & Singapore CDW (N/A) (Refer to T&C)

Vehicle Rental: \$ 1700 per week month

Add: CDW \$ — per week

Total Rental: \$ 1700 per week month Deposit: \$ 500

By signing the below, you have fully understood and agreed to the Terms and Conditions.

Signature & Date: Heng Christopher 8/8/24

Signature & Date: Willie / Jane / Michelle / Jonathan 8/8/24

Name: Heng Christopher

Name: \*Willie / Jane / Michelle / Jonathan

Remarks: \_\_\_\_\_ Version 08/08/2024