

## 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 .....	05/09/2024 10:04 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	04/09/2024 20:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	BJ16 (MULTISTOREY CAR PARK) BANGKIT ROAD
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMT4486X
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	KOMOCO CAR RENTAL PTE LTD
Company Reg No .....	1XXXXX095K
Email Address .....	YUNOS@KOMOCO.COM.SG
Mobile Phone No .....	(Phone) +65-98793040
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Hyundai
Model .....	Ioniq
Variant .....	HYUNDAI IONIQ 1.6 DCT HYBRID
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? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1600
Vehicle Fuel .....	Petrol-Electric
First Registration Date .....	-
Chassis no .....	KMHC851CVLU219690
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	B400002657MCY

#### DRIVER

Name of Driver .....	HUANG MEITING
NRIC No .....	SXXXX638I
Date Of Birth .....	03/12/1986
Occupation .....	Indoor
Driving Pass Date .....	24/06/2010
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	14 YEARS AND 3 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-98793040
Alt. Phone Number .....	-
Email Address .....	YUNOS@KOMOCO.COM.SG
Address .....	APT BLK 618 WOODLANDS AVENUE 4 #05-529
Address complement .....	-
Postcode .....	730618
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 - Major/Minor Rd
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

#### 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 .....	SNL7637M
Vehicle Manufacturer .....	Toyota

Vehicle Model .....	Sienta
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	HENG KWEE PANG
NRIC No .....	SXXXX474H
Contact Number .....	(Phone) +65-93235382
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**Describe Circumstances of the Accident**

~~Defendant~~ Carpark at Bangkit Road - I was exiting the carpark along Lane 2b my car (SMT 4486x) was driving along and going down the ramp. Before the down ramp, there was a car on the right coming up the ramp who collide right into the right hand side of the vehicle (SMT 4486x).

**Declaration**

We declare the foregoing particulars are true in every respect.

**KOMOCO CAR RENTALS PTE LTD**  
253 ALEXANDRIA ROAD #01-02  
SINGAPORE 159936

Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

## 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

**KOMOCO CAR RENTALS PTE LTD**  
253 ALEXANDRA ROAD #01-02  
SINGAPORE 159936

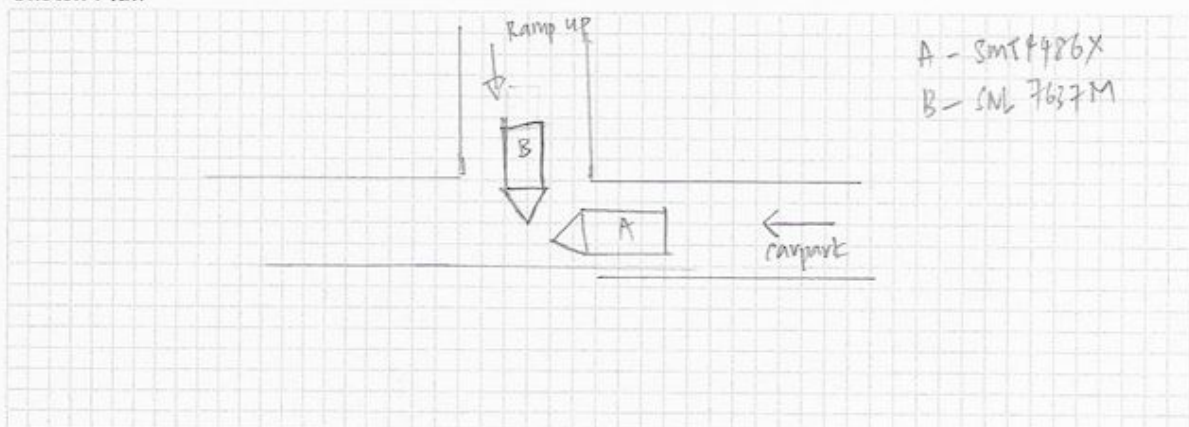
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

### Sketch Plan

















































**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SK0R24950001 Vehicle Registration No: SMT4486X

Name (as shown in NRIC): KOMOCO CAR RENTAL PTE LTD NRIC/FIN/Passport No: 1XXXXXX095K

(\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate

Address: APT BLK 618 WOODLANDS AVENUE 4 #05-529 Singapore ( )

Contact (Tel): \_\_\_\_\_ Mobile No.: +65-98793040

Email Address: YUNOS@KOMOCO.COM.SG

Date of Accident: 04/09/2024 Time of Accident: 20:30

Place of Accident: BJ16 (MULTISTOREY CAR PARK) BANGKIT ROAD

Insurance Company: MSIG Insurance (Singapore) Pte. Ltd.

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

TO AMEND VEHICLE DETAILS

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**KOMOCO CAR RENTALS PTE LTD**  
253 ALEXANDRA ROAD #01-02  
SINGAPORE 159936  
\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

  
  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: ROBYN CHIN  
NRIC/FIN No.: G28381447  
Date: