

## 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 .....	23/10/2024 15:23 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	18/10/2024 12:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	7 GAMAS CRESENT, ARK @ GAMAS
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNM6967L
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	SG CAR CHOICE LEASING PTE LTD
Company Reg No .....	202219892N
Email Address .....	LEASINGOPS@CARCHOICE.COM.SG
Mobile Phone No .....	(Phone) +65-91999068
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Fit
Variant .....	-
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 .....	1317
Vehicle Fuel .....	-
First Registration Date .....	-
Chassis no .....	GR11106793
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMHCSNA0003412400

#### DRIVER

Name of Driver .....	NURFARHANAH BINTE ABDULLAH
NRIC No .....	S8912047J
Date Of Birth .....	05/04/1989
Occupation .....	Outdoor
Driving Pass Date .....	23/07/2024
Driving License Pass Class .....	3A
Driving License Validity .....	Valid
Driving experience .....	3 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-88643564
Alt. Phone Number .....	-
Email Address .....	LEASINGOPS@CARCHOICE.COM.SG
Address .....	785A WOODLANDS RISE #06-134
Address complement .....	-
Postcode .....	731785
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 .....	Side Swipe
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) .....	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 .....	KASHFUL AZEEZ BIN SARRIP
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

#### KINDLY REFER TO THE STATEMENT & SKETCH PLAN

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	VIDEO WITH THEIR WORKSHOP

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SGS1188C
Vehicle Manufacturer .....	BMW
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	TOH HON PENG MICHAEL
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLANIMPORTANT NOTICE

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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

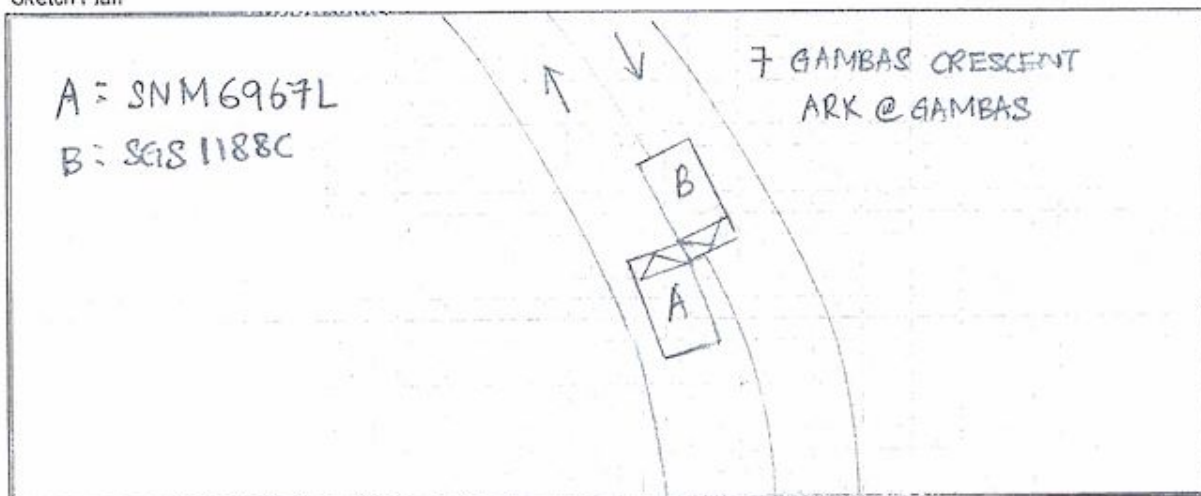
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date &amp; Time

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

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

Sketch Plan

Describe Circumstance of the Accident

Please refer to police report attached.

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 & Time

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

































## CONFIDENTIAL

Annex E

## NOTICE OF COMPLIANCE

This is to confirm that NURFARHANAH BINTE ABDULLAH, NRIC/FIN S8912047J, has reported to the Police a non-injury traffic accident which occurred at 7 Gambas ARK Wearhouse carpark, on 18/10/2024 at 1230hrs

involving the following vehicles:

- **SNM6967L**  
Name: NURARHANA BINTE ABDULLAH, S8912047J, Tel: 88643564
- **SGS1188C**  
Name: TOH HON PENG MICHAEL
- On the 18/10/2024 at about 1230hrs, at 7 Gambas ARK Wearhouse carpark, vehicle **SGS1188C** was going up the slope and I was going down the slope of the carpark. However, his vehicle had went out of his lane and hit the right side of my vehicle near the bumper. It led to some scratches on my car.

If this accident was reported to the Police within 24 hours of its occurrence,  
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer SGT1 T231701 JOHN M SINGH

Date: 19/10/2024 Time: 1156HRS

S/D Ref: 14

Police Post/Unit: Sembawang NPC

Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

SEBBAWANG NPC  
4 Sembawang Crescent  
Singapore 757633  
Tel: 1800-5549999  
Fax: 68522499

CONFIDENTIAL





## LEASE AGREEMENT

LNL NO: 01886

DATE: 29/7/24

ROC: 202219892N

SG Car Choice Leasing Pte Ltd, 3 Ang Mo Kio St 62 #01-14 Link @ AMK, 569139. Tel: 6397 4080 Fax: 6397 4090

## HIRER'S PARTICULARS

Mr/Mrs/Ms/Mdm/Dt/Co: MURF AKHANNI BINIE ABDULLAH		
NRIC/Passport/ROC: 38912047J	Date of Birth: 05/04/1989	Tel No: 8264 3564
Licence No: 38912047J	Licence Issue Date: 22/7/24	IDP:
Address: 785 A KKKODIANUS RISE #06-134 (S) 731785		
Email: HANNAHAFIZ14@GMAIL.COM		
Occupation:	Nature of Industry: PSN.	

## ADDITIONAL DRIVER'S PARTICULARS (if any)

Mr/Mrs/Ms/Mdm/Dt/Co.:		
NRIC/Passport/ROC:	Date of Birth:	Tel No:
Licence No:	Licence Issue Date:	IDP:
Address:		
Email:		
Occupation:	Nature of Industry:	

## LEASE DETAILS


Vehicle Make & Model: HONDA FIT 1.3		
Vehicle Reg. No: 9NM9597C 3NM0667C	Body Colour: WHITE.	
Chassis No.	Engine No.	
Lease Tenure (Days/Months): 6	VITAS:	
Estimated Delivery Date: 29/7/24	Commencement Date: 29/7/24	End date: 28/8/25
Counter signed for commence and end date		
Daily / Weekly / Monthly Rate: \$165.50	CDW: \$ -	GST: \$14.50
Total Rate: \$1750.00		


## REMARKS

VEHICLE TO BE RETURNED IN CLEAN & CONDITION AS PER DELIVERY AND ACCEPTANCE FORM  
 LATE PAYMENT CHARGE (\$ 20.00 ) PER DAY, TOWING FEE PAYABLE BY HIRER.  
 E GIRO FAILED COLLECTION FEE \$10

I/We the Hirer have read and understood the **CONDITIONS OF LEASE** printed overleaf, all of which form part of this Agreement.

Signed for and on behalf of  
 SG Car Choice Leasing Pte Ltd

Hirer's Signature:  Date:

Authorised Signature: 





中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MZ406L/B

N SN

AN0587B

Cov. Type: C

CERTIFICATE No.	DMHCSNA0003412400	Engine No.: L13B1608760 Cha. No.: GR11106793
1. Index Mark and Registration Number of Vehicle	SNM6967L	AUTOSAFE *****
2. Name of Policy Holder	SG CAR CHOICE LEASING PTE. LTD.	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	13/03/2024 (00:00:00)	Excess Sect. I . \$S2,000.00 Excess Sect. I (Outside Singapore) \$S4,000.00 Excess Sect. II \$S1,500.00 Excess Sect. II (Outside Singapore) \$S3,000.00 EX ON WINDSCREEN . \$S100.00
4. Date of Expiry of Insurance	12/03/2025	
5. Persons or Classes of Persons entitled to drive*	As per Named Driver(s) stated below. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.	
6. Limitations as to use.*	(1) Use for the carriage of passengers or goods in connection with the Policyholder's business. (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.  The Policy does not cover (1) Use for racing, pace-making, reliability trial or speed-testing. (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.	
HIRE PURCHASE CO. : DBS BANK LTD * Limitations rendered inoperative by Section 8 of the 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.		

**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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Hong Jia Ling Agnes  
Authorised Officer

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

LETTER OF ACKNOWLEDGEMENT

Date: \_\_\_\_\_

ACCIDENT INVOLVING SNM6967L & SGS1188C ON 18.10.24  
ALONG 7 GAMBAS CRESCENT, ARK@GAMBAS

To Whom It May Concern:

I, SG CAR CHOICE LEASING PTE LTD (NRIC UEN: 202219892N) am the policy holder of  
SNM6967L

I acknowledged that I am aware of the accident stated above, due to unforeseen circumstances, I am unable to be presence  
for the accident report personally.

Hence, I would like to authorise the driver of the vehicle during the said accident to lodge the accident report.

For any enquires regarding this matter, you may contact me at:

Contact Number: 91999068

Email Address: leasingops@carchoice.com.sg

Thank You & Warmest Regards.



Policy Holder's Signature