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 witholding 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.

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 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 03/07/2024 15:18 (SGT) Reported by **Actual Driver** Date of Accident 03/07/2024 08:40 (SGT) Exact Location of Accident Singapore Additional Location Information NEE SOON CAMP DROP OFF POINT Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number

SLL935Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SYLLYS AUTO PTE LTD Company Reg No 201634359K Email Address AOGANGEL3@GMAIL.COM Mobile Phone No (Phone) +65-96985643 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Citroen Model C4 Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private hire Transmission Auto CC 1560

INSURANCE COMPANY

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

DRIVER

Name of Driver ONG MING HOCK SIMON NRIC No S7036894C Date Of Birth 31/10/1970 Occupation Outdoor

Driving Pass Date 30/08/1990 Driving experience 33 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-87555695 Alt. Phone Number Email Address PRISTINE.SIMON@GMAIL.COM Address BLK 928 HOUGANG ST 91 Address complement #10-55 Postcode 530928 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name PASSENGER 1 Gender Male **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACH ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SH7007T Vehicle Manufacturer

Vehicle Variant

Vehicle Model

Vehicle Colour	-
Vehicle Category	Private car
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)	-

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 Actual Driver.
- Information provided must be as <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy flability</u>.
- 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.
- 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.
- 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:

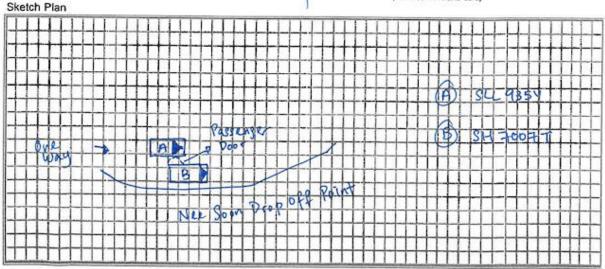
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident 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-lewsgers/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 (Name as in NRIC/ID card)



1

escribe Circumstance of the Accident	
On the stated date and time, I was	driving
vehicle A (SLL 935Y) at the Stated venue.	when I
was beside vehicle B (SH 7007T), his pass	senger
suddenly open the door and hit onto my	right side
mirror and door. Nubody was injured.	

Declaration

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

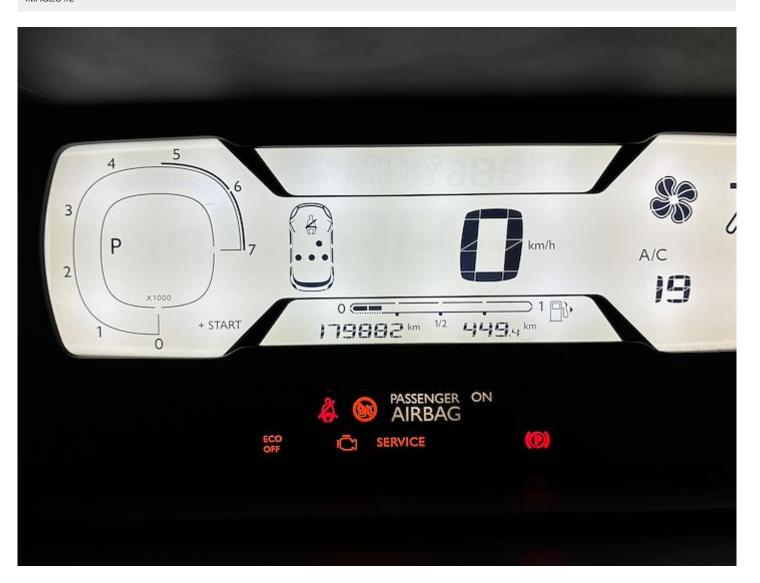
Policyholder's Signature / Date & Yime

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

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

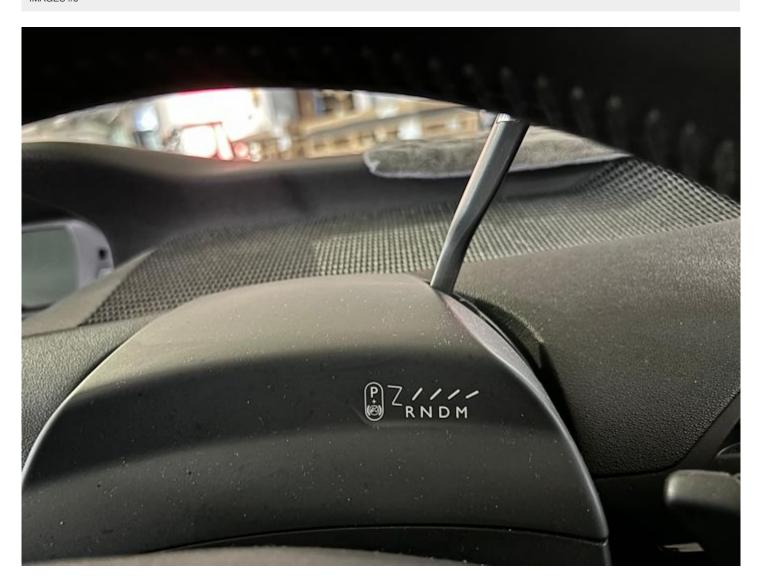
2

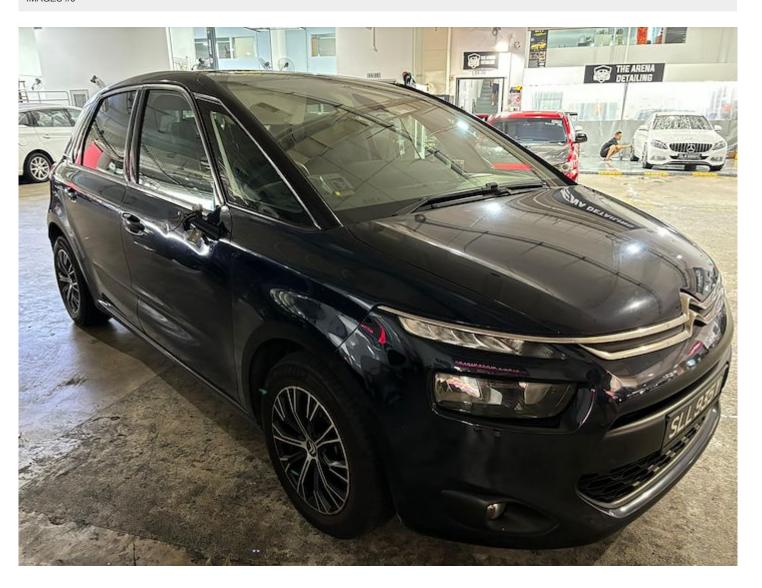






















Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTION VEHICLES CHIRD-PARTY RISKS, RULES 1999 (FEDERATION OF MALAYSIA)

MOTION VEHICLES CHIRD-PARTY RISKS AND COMPENSATION) ACT (CAPLER OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

MOTION VEHICLES CHIRD-PARTY RISKS AND COMPENSATION) RULES 1994 (REPUBLIC OF SINGAPORE)

MOTION VEHICLES CHIRD-PARTY RISKS AND COMPENSATION) RULES 1996

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOR

Certificate Number : SP2007019544 : 28 June 2024 Date of Issue

: COMPREHENSIVE - PREFERRED WORKSHOP Coverage

Policyholder : SYLLYS AUTO PTE, LTD.

Finance Company

Period of Insurance : 28 June 2024 To 30 July 2024 (both dates inclusive)

Registration Number : SLL935Y

Chassis Number of Vehicle : VF73DBHZTGJ715397

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 concelled 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.

- (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).

28 June 2024 Issue Date

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

: Section 1: Own Damage Excess 1,500.00 Section 1: Windscreen Section 2: Liabilities to Third Parties 1,500.00

Allianz Insurance Singapore Pte. Ltd. (UEN 201903913C

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