

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	06/07/2024 11:12 (SGT)
Reported by	Actual Driver
Date of Accident	02/07/2024 15:15 (SGT)
Exact Location of Accident	761 Yishun Street 72, Singapore 760761
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP8746P
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LQW Leasing
Company Reg No	53395044M
Email Address	derrick21tan@hotmail.com
Mobile Phone No	(Phone) +65-98334443
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Touran
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	1598

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2030249880

DRIVER

Name of Driver	Abdul Rashid Bin Jaffardik
NRIC No	S8508886F
Date Of Birth	21/03/1985
Occupation	Outdoor

Driving Pass Date	18/12/2008
Driving experience	15 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86792952
Alt. Phone Number	-
Email Address	abdrj1985@gmail.com
Address	Blk 749 Yishun Street 72
Address complement	#02-132 Singapore
Postcode	760749
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to police report. Report No: T/20240703/7089.

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	CB7431Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Bus
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	Abdul Rashid Bin Jaffardik
Gender	Male
Phone No	(Phone) +65-86792952
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKP8746P
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

IMPORTANT NOTICE

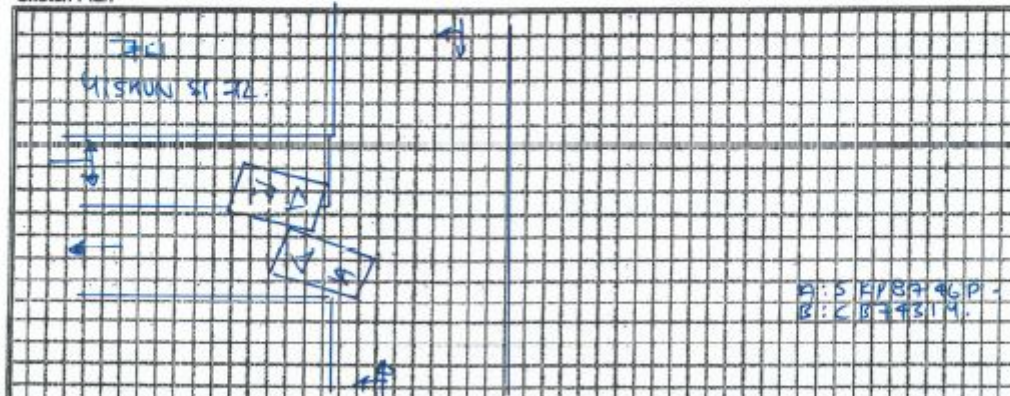
1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and submission of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting 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/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.

OW LEASING
53355044M
Policyholder's Signature / Date & Time

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

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

Sketch Plan



Describe Circumstance of the Accident

POLICE REPORT.

Declaration

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



Policyholder's Signature / Date & Time

Are

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

inting

Witnessed by Reporting Centre Personnel

























**SINGAPORE
POLICE FORCE**



T/20240703/7089

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20240703/7089

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/07/2024 16:27		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ABDUL RASHID BIN JAFFARDIK			Address: 749 YISHUN STREET 72 #02-132 SINGAPORE 760749		
ID Type / ID No.: NRIC NO / S8508886F			Contact No.: Home/Office: Mobile: 86792952		
Nationality: SINGAPORE CITIZEN			Email: ABDRJ1985@GMAIL.COM		
Sex: Male	Age: 39	Date of Birth: 21/03/1985	Type of Informant: Driver		
Race: Malay			Language: English		
Occupation: Private Hirer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 02/07/2024 15:15	Type of Location:
Location: YISHUN STREET 72				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.:	Type	Make	Model	Color	Condition	No of Passenger
SKP8/46P	Motor car				Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20240703/7089

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

2 of 3

Report No. T/20240703/7089

CONTINUATION OF REPORT

Driver			
Name	ABDUL RASHID BIN JAFFARDIK	ID No.	S8508886F
Related Vehicle	SKP8746P (Motor car)	Contact No.	86792952
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Serious

Brief Details.

On the stated date and time, i was driving my vehicle SKP8746P along yishun street 72 open space carpark around my place area. I was wearing my seatbelt.

I was travelling towards the exit of the carpark.

As i was making a left turn, i noticed a minibus travelling towards me on the opposite direction. There was a stop line on his side.

Suddenly, the minibus abruptly drove into my lane, colliding onto my vehicle front right portion. The impact was huge which caused my left knee to knock against the dashboard. My right arm also knocked against my driver side door. My right leg was also in pain due to the huge impact as i was stepping onto the brake during the impact. I was shocked by what happened.

Upon alighting, i realised Minibus CB7431Y had moved into my lane and collided onto my vehicle front right portion. his vehicle front right portion was badly damaged. My vehicle front right portion was also badly damaged. The driver of CB7431Y apologized to me and admitted to me that it was his fault. He told me he could not see my car and so he moved into my lane as he was about to turn right.

I took some photos and left the scene shortly.

The following morning, i woke up feeling pain on my neck and lower back area. The pain on my left knee, right arm and right leg also got worse. I had to limp while walking as my right leg was in so much pain. I decided to seek medical treatment at Healthway Medical(Yishun) near my place.

I was given 3 days MC for injuries caused by the accident.

I will be seeking follow up treatment if the pain persists.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20240703/7089

3 of 3

Report No. T/20240703/7089

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

NP168

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
03/07/2024 16:27

Classification Of Case:



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

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	: SP2030249880
Date of Issue	: 27 March 2024
Coverage	: COMPREHENSIVE - EXCLUSIVE AUTHORISED WORKSHOP
Policyholder	: LQW LEASING
Finance Company	: -
Period of Insurance	: 30 March 2024 To 29 March 2025 (both dates inclusive)
Registration Number	: SKP8746P
Chassis Number of Vehicle	: WVGZZZ1TZFW008625

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).

27 March 2024

Issue Date

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

Intermediary Code	: 0000156 GENRIVER FINANCIAL PTE LTD		
Excess	: Section 1: Own Damage	S\$	2,000.00
	Section 2: Windscreen	S\$	100.00
	Section 2: Liabilities to Third Parties	S\$	1,500.00
	Comprehensive - Exclusive Workshop Per Policy Schedule		


Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C
 79 Robinson Road #09-01 | Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

LOW LEASING

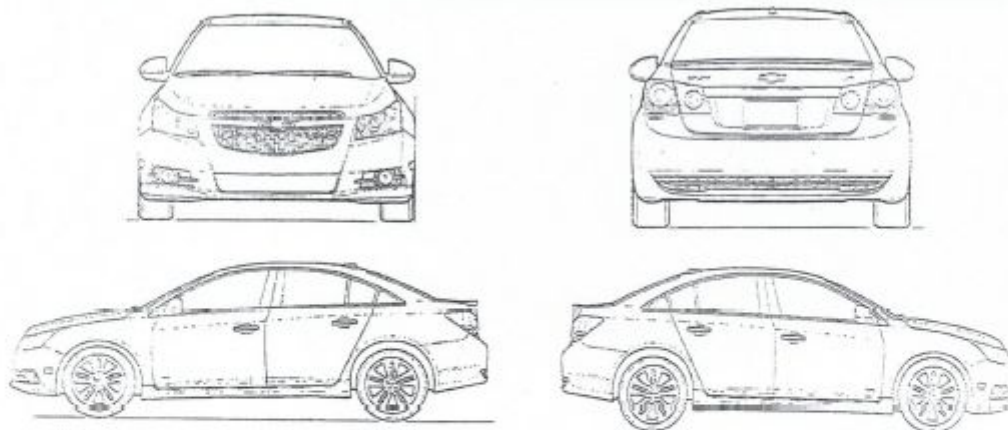
22A Jalan Selamat Singapore 418545 UEN:53395044M

PAYNOW: 53377055J Aden Garage Leasing / TRANSFER: Maybank 04141092789

Rental Agreement Form

Renter Information													
Full Name: Abdul Rashid Bin Saffardik		NRIC: S850888612											
Age:		Gender: <input checked="" type="radio"/> Male / <input type="radio"/> Female											
Cell No: 8679 2952	Home:	Date Of Birth: 21/03/1985											
Address (Stated in NRIC): 749 Vishnu St #02-132		Singapore: 760749											
Correspondence address:		Singapore:											
Driving License Pass date: 18/12/2002													
Employment Information													
Company:													
Company address:		Singapore:											
Office Phone:	Fax:	Current position:											
Emergency Contact of Next of Kin / Guarantor													
Name: FAUZAN AZIMA		Relationship: WIFE											
NRIC: S864210E	Mobile No: 97774905	Home:											
Address (Stated in NRIC):		Singapore:											
Vehicle Details													
Vehicle Registration No.: (eg SBA1234L) SKP 8746P													
Make / Model: (eg Honda CIVIC 1.8A White) Volkswagen Tatan 1.6 D													
Transmission:	Manual / <input checked="" type="radio"/> Automatic / <input type="radio"/> Semi-auto												
Lease Details													
From: 10/06/2024		To: 09/11/2024											
Agreed sum of lease: \$488/week \$3000 Deposit		Terms of payment: Daily / <input checked="" type="radio"/> Weekly / <input type="radio"/> Monthly											
Collection Date & Time: 10/06/2024 @ 1300hrs		Return Date & Time:											
This agreement is valid for 6 months, the contract will be automatically renewed if the driver does not give notice to return. In any occurrence of change of vehicle, a new agreement will be written.													
Vehicle Details													
Mileage upon lease:		Fuel upon collection:											
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E	1/4	1/2	3/4	F									
													
Other Remark:													

Form 2 Condition: Please mark damaged / scratched area upon collection



Terms & Conditions:

	<p>The "Applicant" will abide by the following rules upon lease of the vehicle:</p> <ul style="list-style-type: none"> (a) All regulations and laws governed by the Singapore Police Force. (b) Insurance coverage solely to "Applicant" only, any other(s) charges will be borne by the "Applicant" in an event of an accident or similar occurrence. (c) Diligence to operate the vehicle in a proper manner, in any occurrence of negligence, charges would be borne by "Applicant". (d) Not to use the vehicle to: <ul style="list-style-type: none"> (i) push or tow another vehicle. (ii) participate in any race or competition (e) Any violation of laws or traffic rules, charges will be borne by "Applicant". (f) "Applicant" is hereby responsible to check and pay any violation occurred during the period of lease, in an event of occurrence in which the violation is outstanding and to be enclosed by "LQW LEASING", additional charges applies per furnishing. (g) Inform correspondence <u>7 days in advance</u> upon return of vehicle. If "Applicant" chooses to emit this line, <u>charge of 7 days rental would be imposed on "Applicant"</u>
2	<p>"For "Applicant" whom lease the vehicle for Private Hire purposes</p> <ul style="list-style-type: none"> • Daily/ Weekly/ Monthly rental will be deducted from the Private Hire reimbursement weekly. • Payment must make by every Monday or latest by Tuesday 2359hrs *Approval based on correspondence of LQW LEASING. • 12% of late charge will be imposed if payment transaction was not completed. • In the event if the driver is unable to fulfill the payment of the vehicle in 2 days of demand by correspondence, LQW LEASING reserves the rights to repossess the lease vehicle and recover the payment from the "Applicant" Next-of-Kin/guarantor through legal / court proceedings. Additional or Miscellaneous Charges will be borne by Applicant
3	<p>"Applicant" is required to return LQW LEASING for weekly periodic maintenance to ensure that the lease vehicle is as per lease condition. "Applicant" will bear all repair / damage / modification done on the lease vehicle to return as per previous condition if this line is ignored.</p>
4	<p>Vehicle is only to be used and driven in Singapore. Only the "Applicant" is allowed to drive the vehicle at all times. Any additional drivers must sign a sub-agreement form with LQW LEASING. In any occurrence that the "Applicant" is to use the vehicle out of Singapore, all cost will be borne by "Applicant". "Applicant" is liable to pay the market value of the vehicle at point of loss and inclusive of all damages and demands of losses to LQW LEASING upon the occurrence of a lost vehicle reported.</p>
5	<p>Third Party claim Excess shall be S\$4,000.00, Windscreen Excess shall be S\$250.00, Self Claim Excess shall be S\$3000.00 for Applicants age 22 years old and above with valid license of 2 years. If an Accident occurs and the Driver is at fault, he/she has to pay For All Repair, Rental And Excess Fee. Alternatively, the Driver can choose to pay a Double Excess of S\$10,000.00 and not be liable for Rental and Repair payments.</p>
6	<p>If we acknowledge that my/our personal data may/will be disclosed by LQW LEASING to its third party service providers or agents (including its lawyers / law firms / authority of Singapore), which may be sited outside of Singapore, for one or more of the Purposes, as such third party service providers or agents.</p>

I hereby, the "Applicant" have fully read and agreed to the terms of LQW LEASING.

Aue 10/6/24 12:57pm
Applicant Signature / DATE & TIME


Representative of LQW LEASING Signature