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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised 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 ability.
- 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.
- 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.

	ACCIDENT STATEMENT
Date Of Report	06/04/2018 17:34
Date Of Accident	05/04/2018 21:00
Exact Location Of Accident	ALONG JURONG EAST AVENUE 1
Country/State of Loss	SINGAPORE
建设工作的	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC6956M
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOELYAP96@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-94562126
Alternative Phone No	OFFICE-94562126
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	OFF WORK FETCHING FRIEND BACK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00032/VCZ/R03
Cover Note Number	
Fleet Policy Policy Number	NO

Driver	
Name of Driver	NOEL PARRISON YAP JUN HAO
NRIC No	S9628616C
Date Of Birth	14/08/1996
Occupation	INDOOR
Date Of Driving Pass	15/03/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94562126

Fax Number

OTHERS-94562126

Contact Number NOELYAP96@HOTMAIL.COM EMail Address

Address

BLK 431 JURONG WEST AVENUE 1

#11-308

Postcode

640431

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FX7434M

Vehicle Make/Model/Colour

YAMAHA

Details Of Properties

Vehicle Category

MOTORCYCLE

Name of Driver

OTHUMAN ANIS BIN MAIDEEN PILLAY

NRIC/Passport Number

S9520267E

Contact Number

90061229

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Picase 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 Authorised Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful marepresentation 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 The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singaporii (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties
- 7. By the lodgment 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.
- E 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 actident (all insurer(s) who have insured vehicle(s) involved in this occident shall be collectively referred to as the "Insurers"), the Injurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(ii) 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) corrying out and/or dealing with my instruction; 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/as dealing with my claims (collectively the "Purposes")
- (b) all incurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law forms, may/are primitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and
- (c) my Porsonal Information may/can be discussed 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.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detector. investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, invostigating, controlling or managing fraud. regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (in for complying with requirements under any regulations, laws or court orders.)

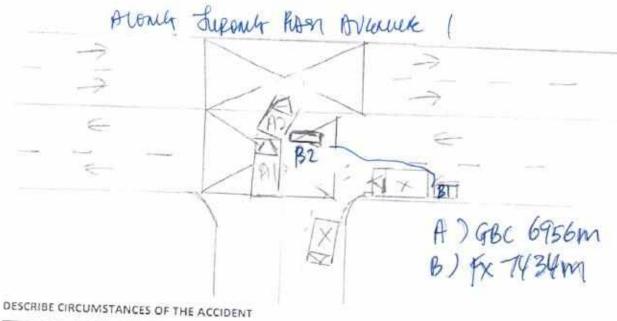
Policynalder's Signatu Date & Time:

Oricer's Signature

If oriver is not the polycyholder.

Date & Time 6/84/2010

GOOGLES SENSTERS



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ECLARATION	CLARATION

I/We doclare the foregoing particulars are true in every respect

RENTA

Policyto der's Signa Date & Time

Driver's Signature lif driver is not the policyholder; Date & Time 4/6/19

Name
NRICHIN NO COST

AGCIDENT STATEMENT DICES

ACCIDENT DATE: 5 / 04 / 2018 (OD/MM/YYY), TIME: 9 06 1 [HH:MM]	E 397
LOCATION: Jurong east not !	
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B)INSURANCE COMPANYI	3
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DIVEHICLE CATEGORY: [PRIVATE / COMMERCIAL / MOTORCYCLE) TO PURPOSE OF USING AT ACCIDENT TIME: Off work, fetching colors & CK	
IE NO. PLEASE STATE (THIRD PART) COARTY RELIGIOUS	
2. INSURED / POLICY HOLDER PRINTER MALE / FEMALE)	
b) NRIO/FIN/PASSPORTI	
O ADDRESS!	
CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER	
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(Including diriver) DINRIC/FIN/PASSPORTI 19629660 CONTACT 40362128 (Including diriver) DINRIC/FIN/PASSPORTI 19629660 CIADDRESSI Parang with Am 1 BIK 431 FII-309	317
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(Including delver) 1) HRIC/SIM/PASSPORTI	Œ
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Sax =

VIED

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$9628616C





NOEL PATRISON YAP JUN HAO

CHINESE

Daile of birth 14-08-1996 Country of both SINGAPORE

4666716

°59628616C



11-01-2011

APT BLK 431 JURONG WEST AVENUE 1 #11-308 SINGAPORE 640431



TRAFFIC POLICE DEPARTMENT SINGAPORE POLICE FORCE 10, UBI AVENUE 3 SINGAPORE 408865

Private & Confidential

NOEL PATRISON YAP JUN HAO

APT BLK 431 JURONG WEST AVENUE 1 #11-308 SINGAPORE 640431

You will receive your photocard licence by registered mail within 1 month from date of application unless you made a special request to collect at Traffic Police Department at time of application.

S9628616C (3)

2001347327

\$50/-

YOU CAN DRIVE WHILE AWAITING THE DELIVERY OF YOUR PHOTOCARD

15/03/2018

(Please do not detach) DRIVING LICENCE.





Liberty Insurance Pte Ltd

Registration no 199002791D 51 Club Street 57 Cub Steel #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Fax: (65) 6225 6890

Website: http://www.libertyinsurance.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No	SD18V00032 /VCZ /R03
Form Date Of Issue	MZ407 26-DEC-2017
1.Index Mark and Registration No. of Vehicle:	GBC6956M
2.Chassis number of Vehicle:	JTFHT02P500118640
3.Name of Policyholder:	GOLDBELL CAR RENTAL PTE LTD
4.Effective date of Commencement of Insurance for the purpose of the Act:	01-JAN-2018 00:00 AM
5.Date of Expiry of Insurance:	31-DEC-2018 23:59 PM
and the contract of the first of the contract of the contract of	

6.Persons or Classes of Persons

entitled to drive*:

Any person who is driving an the Policyholder's order or with their permission or to whom the vehicle is hired.

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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

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

8.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.

C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

*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).

For and on behalf of

LIBERTY INSURANCE PTE LTD Approved Insurers

Authorised Signature

For Information only:

COVERAGE .

Comprehensive, Unlimited Windscreen, Personal Accident Benefit, Airside Of Singapore Changi

Airport.Geographical Area: Singapore only

SUM INSURED:

MARKET VALUE AT THE TIME OF LOSS

EXCESS:

Section I S\$1250,Additional Excess for Young & Inexperienced Drivers S\$3000,Windscreen Excess

5\$100

FINANCE COMPANY:

PRODUCER NAME:

ACORN INTERNATIONAL NETWORK PTE LTD

PLAS/-/27-DEC-17

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27-DEC-17