

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 Authorised 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 Report 23/01/2019 16:18
Date Of Accident 22/04/2018 01:55
Exact Location Of Accident NOT KNOWN
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJX5708P

Insured/Policyholder

Name Of Registered Owner PAYLESS AUTOFLEET RENTAL
Co Reg No 53039146E
Email Address HARRYLEE@SINGNET.COM.SG
Mobile Phone No
Alternative Phone No OFFICE-97353488

Vehicle Particulars

Manufacturer BMW
Model 320I AT ABS D/AB 2WD 2DR GAS/D
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
If No, Please state action to be taken REPORTING ONLY
Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number DMHCSN1684801600
Cover Note Number

Driver

Name of Driver JEEVAN S/O AHOORUM
NRIC No S7348530D
Date Of Birth 26/12/1973
Occupation INDOOR
Date Of Driving Pass 17/01/2011
Driving Experience 7 YEARS AND 3 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-97353488
Fax Number
Contact Number
Email Address NOEMAIL

Address	BLK 322 HOUGANG AVENUE 5#04-88
Postcode	530322
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	NO COLLISION
Weather Conditions	UNKNOWN
Road Surface	UNKNOWN

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

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

OUR COMPANY RECEIVED A LETTER FROM CHINA TAIPING INSURANCE (S) PTE LTD , INFORMED US THAT THERE WAS A THIRD PARTY CLAIM AGAINST OUR VEHICLE :SJX5708P , THE ACCIDENT WAS ON 22 APRIL 2018 AT 0155HRS , WE TRIED TO LOCATE THE DRIVER , BUT WAS UNABLE TO FIND HIM AND WE ARE NOT AWARE OF THE ACCIDENT.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC824D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, 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, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

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



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



Accident Sketch Plan

SKETCH PLAN

Not Known

DoA: 22-4-18

Insured Vehicle: SJX 5708 P

TP Vehicle: SHC 824 D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Our company received a letter from China Taiping Insurance (s) Pte Ltd, informed us that there was a third party claim against our vehicle: SJX 5708 P, the accident was on 22 April 2018 at 0155 hrs, we tried to locate the driver, but was unable to find him, and we are not aware of the accident.

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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Identification Card

HIRE / PERIOD EXPIRY
 5278171
 HIREC No. S7348530D
 Date of issue
 10-03-2014
 Address
 APT BLK 322 HOUGANG AVENUE 5
 #04-88
 SINGAPORE 530322

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	PASS DATE
Class 2B	Motorcycles <= 200cc	30 May 2009
Class 2A	Motorcycles between 201 cc and 400cc	06 Jul 2010
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	17 Jan 2011
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	07 Apr 2011

License No. S7348530D
 NP 425A

REAR

☐ Cig Lighter
☐ Jack
☐ CD/Cartridges

☐ S / Tyre
☐ Hub Caps
☐ S / RIM

vehicle for each and every
NO SMOKING, NO ILL
Hirer's Signature
Addition Driver's

conditions above, overleaf and that all information given is true & correct
 fled from driving. You may charge all amount due on the rental to my/our c

RS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LIC
GAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITH

THE HIRER OR AUTHORIZED DRIVER
 the said vehicle to the Owner immediately.
 plete and sign Form MVR 1 (Motor Accident Report Form) and do all other acts required in over
 e available when the accident is report to the Owner.
 hours from the occurrence, the following types of accidents -

If we see sm

Driving Licence

er : _____ Driving Exp : _____ D/L Type : Local/International		Auto / Manual HONDA OUT : Date 13/MAR/17 HIRE / PERIOD EXPIRY 2 CHARGES Daily 85
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REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7348530D		
	Name JEEVAN S/O AHOORUM அ ஜீவன் Race INDIAN Date of birth 26-12-1973 Country/Place of birth SINGAPORE	
	Sex M	S7348530D

NTS (S) - SCRATCHES FRONT	X E Y F Z E
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REPUBLIC OF SINGAPORE DRIVING LICENCE	
	Licence No. S7348530D Name JEEVAN S/O AHOORUM Born Date: 26 Dec 1973 Issue Date: 03 Apr 2012
	

<input type="checkbox"/> Cig Lighter <input type="checkbox"/> Jack <input type="checkbox"/> CD/Cartridges	<input type="checkbox"/> S / Tyre <input type="checkbox"/> Hub Caps <input type="checkbox"/> S / RIM	Hirer's Signature _____ Addition Driver's Sig _____
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 available when the accident is report to the Owner).

Rental Invoice

Payless Autofleet Rental
Finance +(65) 6348 3500 / Sales +(65) 6348 0500
Singapore 428769
Singapore

PAID



Jeevan S/O Ahoorum
Blk 322 Hougang Ave 5 #04-88
530322

Invoice # 0002656
Invoice Date April 30, 2018
Balance Due (SGD) \$0.00

Item	Description	Unit Cost	Quantity	Line Total
SJX5708P	24 Apr 2018 to 01 May 2018	128.00	7	896.00
SJX5708P	01 May 2018 to 07 May 2018	128.00	6	768.00
Total				1,664.00
Amount Paid				-1,664.00
Balance Due (SGD)				\$0.00

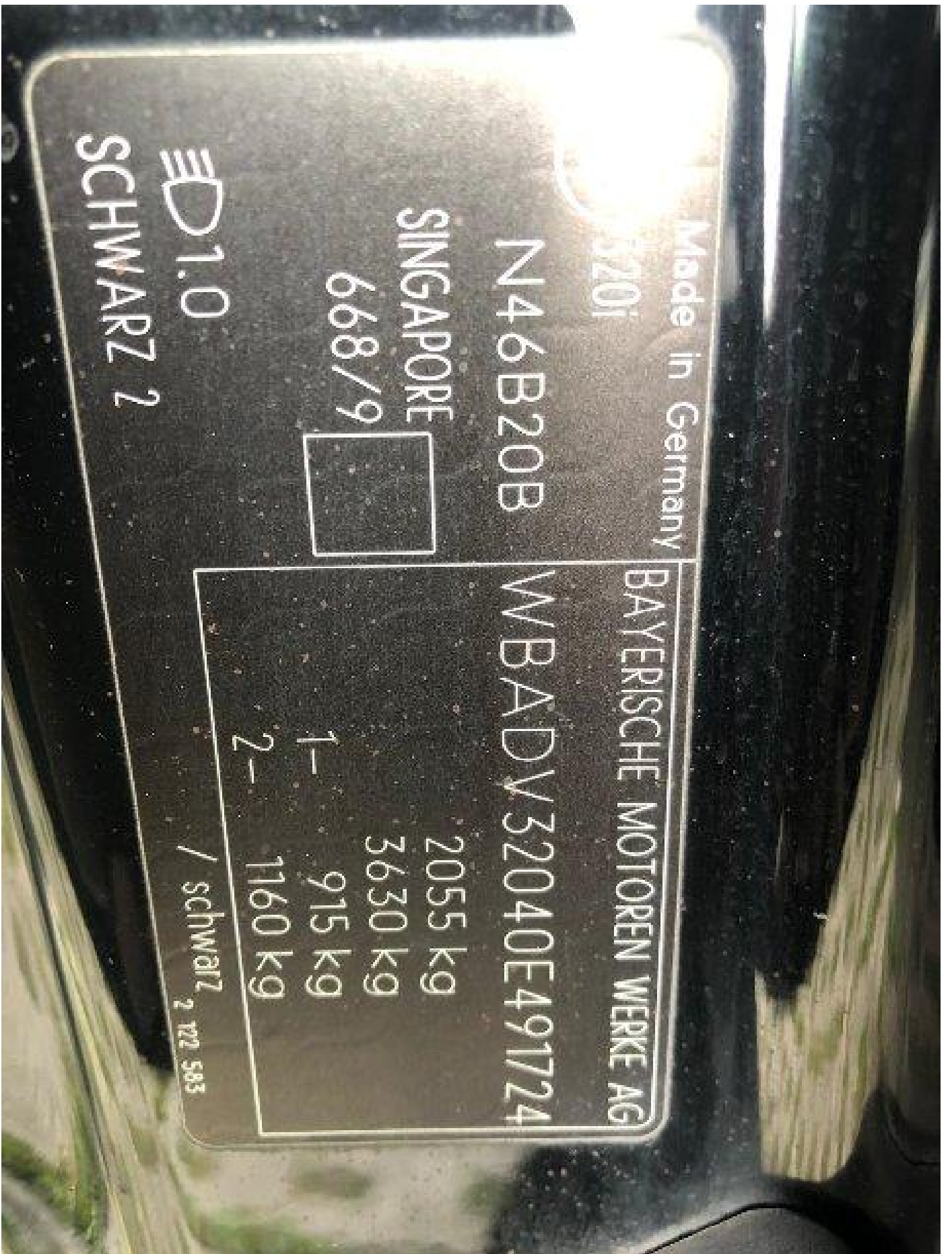
Terms

Account Holder : Payless Autofleet Rental

DBS Account No:003-942462-0
Bank Code:7171 Branch Code:003
Branch: Marina Bay Financial Centre Branch
DBS Swift Code: DBSSSGSG

Please make full payment before due date to avoid \$350.00 late fee & A 5% penalty will be imposed or recovery action taken if rental is overdue.

This invoice was sent using **FRESHBOOKS**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo

