

## 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	15/05/2019 14:03
Date Of Accident	01/10/2018 12:50
Exact Location Of Accident	ALONG SCOTTS ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE9463M
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#### Insured/Policyholder

Name Of Registered Owner	MULTI COLOUR ENTERORISE PTE LTD
Co Reg No	199201527C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92369174

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	TOYOTA HIACE VAN TURBO 5 DR MANUAL
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	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA342942
Cover Note Number	

#### Driver

Name of Driver	ALFIAN BIN SAHIDOEN
NRIC No	S7939437H
Date Of Birth	16/12/1979
Occupation	OUTDOOR
Date Of Driving Pass	15/01/2007
Driving Experience	11 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92369174
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	462C YISHUN AVE 6 #02-1103 SINGAPORE 763462
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 32 YISHUN ST 81 , <b>POSTCODE:</b> 768456 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8522999 - <b>FAX NO:</b> 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT/ SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO



redefining / insurance

AYA Insurance (The Ltd)  
 1200 680 8188 (Within Singapore)  
 (65) 6340 8888 (International)  
 FIC 2338 4199  
 Registered Company No. 21  
 www.aya.com.sg

Date  
 10/04/2016

Policy number  
 CV1 / GA342492

# Certificate of Insurance

This policy is issued under Part 233A and 233B of the Commercial Vehicles (Third Party Risks and Compensation) Rules, 1967 (Road Transport Act) and Part 233A and 233B of the Commercial Vehicles (Third Party Risks and Compensation) Rules, 1967 (Road Transport Act)

## Policy details

Policyholder name	COLON PLAY ENTERPRISE PTE LTD	Certificate number	GA342492 / 1
Cover	Comprehensive	RCD	0%
Legal motorist	1K02614412	Chassis number	JPH102P000199415
Vehicle Registration number	GRE9461M		
Period of insurance	from 09/05/2018 to 05/05/2019 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Lease Company	Nil		

## Persons or classes of persons entitled to drive

Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has otherwise 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.

## Limitations as to use\*

- (a) Use in connection with the Policyholder's business.
- (b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (c) Use for social, domestic and pleasure purposes.

The Policy does not cover:

- (a) Use for the hire or reward or for racing, pace-making, reliability trial or speed testing.
- (b) Use whilst towing a trailer except the towing of anyone disabled mechanically propelled vehicle.

\* Exclusions provided inoperative by Section 6 of the Commercial Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Malaysia) are not to be included under Special Readings.

## Excess

Excess 1	SGD700.00
Excess 2	SGD140.00

All conditions in respect of an excess:  
 Additional own Damage Excess of S\$1,000 is applicable for any named/unnamed drivers who:  
 (a) are 21 years old to 24 years old and/or  
 (b) are 60 years old to 70 years old and/or  
 (c) with driving experience of 1 year to less than 2 years on the relevant classes of driving licence.  
 Additional All Claims excess of S\$1,000.00 is applicable for any named/unnamed drivers who:  
 (a) are 21 years old to 24 years old and/or  
 (b) are 60 years old and above and/or  
 (c) with driving experience of less than 1 year on the relevant classes of driving licence.

## Additional clauses & endorsements to your policy



**POLICYHOLDER ACKNOWLEDGEMENT FORM**

14/05/2019

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

To: Owner of Vehicle Number: GRS 9463M.

The following has been advised to you via your workshop, ETHOZ PROTECT PTE LTD through their staff, HARULAN H.

Please tick the applicable box if you had been advised on any of the following:

- You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.
  - You had been advised by the workshop on the liability and merits of the case accordingly.
  - You had been advised by the workshop on the claims procedure for the type of claim that you will be making due to this accident.
  - There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas.
  - There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the claim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts.
  - The estimated waiting time for the spare parts to arrive is \_\_\_\_\_ The estimated arrival time does not include the repair period.
  - You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy.
  - For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle.
- For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using **any combination** of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts.
- You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident.
  - For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim.
  - Others \_\_\_\_\_

Signed and acknowledged by:

MJ 15/5/19

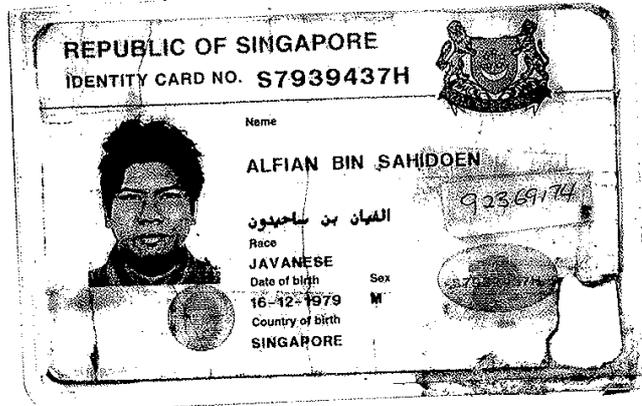
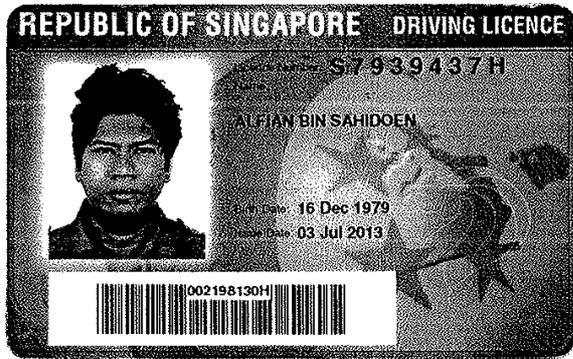
Name and signature of policyholder/ authorized driver\* and company stamp (where applicable)

\*authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle.

[Signature]

Name and signature of workshop personnel including company stamp





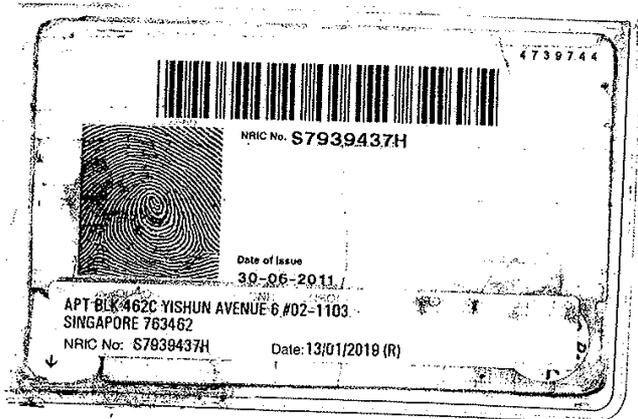
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	06 Feb 2003
Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg	15 Jan 2007

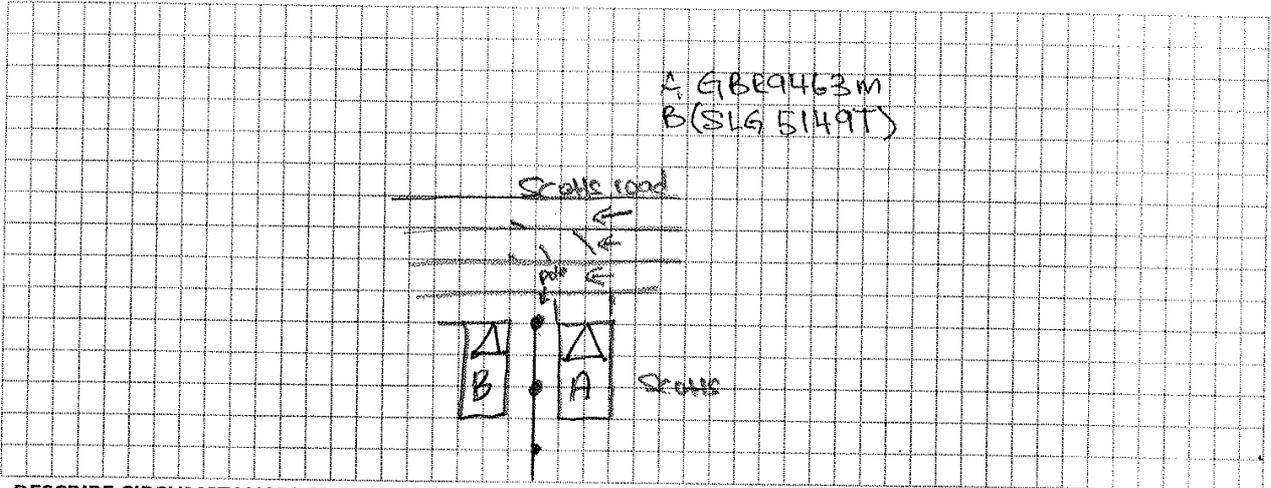
COLOUR COPY



NP 428A



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

Empty lined area for describing the accident circumstances.

<p><b>Important:</b> You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a <b>FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE</b> within the stipulated time frame from the day of the occurrence.</p>	✓	- Reporting Only
		- Claim OD
		- Claim TP
		- Claim OD/ TP at other workshop

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

**COLOR PLAY ENTERPRISE PTE LTD**  
220 TAGORE LANE  
#03-13 LIBERTY WAREHOUSE  
SINGAPORE 787600  
TEL: 6453 4955 FAX: 6453 9455

*MJ* 15/5/19

*[Signature]*  
Reporting Centre Personnel's Signature  
Name:  
Nric/Fin No.

Policyholder's signature  
Date & Time

Driver's Signature  
(if driver not the policyholder)  
Date & Time

**SKETCH PLAN**

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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.

**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.

**COLOR PLAY ENTERPRISE PTE LTD**

220 TAGORE LANE  
#03-13 LIBERTY WAREHOUSE  
SINGAPORE 787600

TEL: 6453 4955 FAX: 6453 9455

Policyholder's Signature  
Date & Time:

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

Reporting and Personnel's Signature  
Name:  
NIC/IN No.:

*mwj* 15/5/19

Color Play Enterprise



**SINGAPORE  
POLICE FORCE**



T/20181015/2069

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

1 of 3

Report No. T/20181015/2069

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/10/2018 13:33		Vide Report No.:		Station Diary No.: 49	
<b>Informant's Particulars</b>					
Name of Informant: ALFIAN BIN SAHIDDOEN			Address: APT BLK 108 YISHUN RING ROAD #04-281 SINGAPORE 760108		
ID Type / ID No.: NRIC NO / S7939437H			Contact No.:		Mobile: 92369174
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 38	Date of Birth: 16/12/1979	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 01/10/2018 12:50	Type of Location: Straight Road
Location: Along Road 1 SCOTT'S ROAD				
Weather:		Road Surface:		Road Speed Limit:
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
GBE9463M	Van	TOYOTA		White	No Damage	0
SLG5149T						0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20181015/2069

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

2 of 3

Report No. T/20181015/2069

CONTINUATION OF REPORT

Driver			
Name	ALFIAN BIN SAHIDOEN		ID No. S7939437H
Related Vehicle	GBE9463M (Van)		Contact No. 92369174
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 12/10/2018, I received a letter from Traffic police regarding an alleged hit-and-run accident involving my van (GBE9463M, white Toyota). The reference number of the letter is TP/IP/57239/2018. the investigation officer is Esther Chong.

I could only remember that on 01/10/2018 at about 1300hr, I was driving my van out from Scotts Square carpark towards Scotts road. While I was turning to Scotts Road, I realized that there is another car on my left side turning left into Scotts road together with my van. While turning left into Scotts Road, I saw a rim cover rolling from the left side of my van to the right side. I then slowed down and drove off as I am unsure if the rim cover belongs to me. At about 15 minutes later, I discovered that my rear left rim cover was missing.

I am unsure if the accident happened while I was turning into Scotts road as there is no sound or impact to my van. There is also no damage to my van.

0



**SINGAPORE  
POLICE FORCE**



T/20181015/2069

Police Station Of Origin:  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

3 of 3

Report No. T/20181015/2069

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:  
F /  
Sgt 2 ISAAC LEE YU JIN 

Signature Of Informant:  


Signature Of Interpreter:  
Not applicable

Date/Time:  
15/10/2018 13:33

Officer In Charge Of Case:  
TP / HRT /  
Sr Staff Sgt ESTHER CHONG  
Contact No.: 65476368

Classification Of Case:

Authentication Stamp  
NP168  SN 085  
Signature:   
Singapore Police Force



> Back to OneMotoring

**Enquire Transfer Fee**

Vehicle Details			
Vehicle No. :	GBE9463M		
Vehicle Type :	A50 - Goods (Closed) Van/Van Panel (Delivery)		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	TOYOTA		
Vehicle Model :	TOYOTA HIACE VAN TURBO 5 DR MANUAL		
Chassis No. :	JTFHT02P900195835		
Propellant :	Diesel		
Engine No. :	1KD2610412		
Engine Capacity :	2982 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	2800 kg		
Unladen Weight :	1740 kg		
Year Of Manufacture :	2016		
Original Registration Date :	09 May 2016		
Lifespan Expiry Date :	08 May 2036		
COE Category :	C - Goods Vehicle & Bus		
Quota Premium :	\$45,001.00		
COE Expiry Date :	08 May 2026		
Road Tax Expiry Date :	08 Nov 2019		
Inspection Due Date :	08 May 2020		
Intended Transfer Date :	15 May 2019		
CO2 Emission :	216.00 (g/km)		
CEV/VES Rebate Utilised Amount :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
<b>Amount Payable</b>			
	<b>Amount Before GST (S\$)</b>	<b>GST Amount (S\$)</b>	<b>Amount After GST (S\$)</b>
Transfer Fee :	25.00	-	25.00
<b>Total Amount Payable :</b>			<b>25.00</b>

You may print this page for reference.

OK      Print

Accident Photo



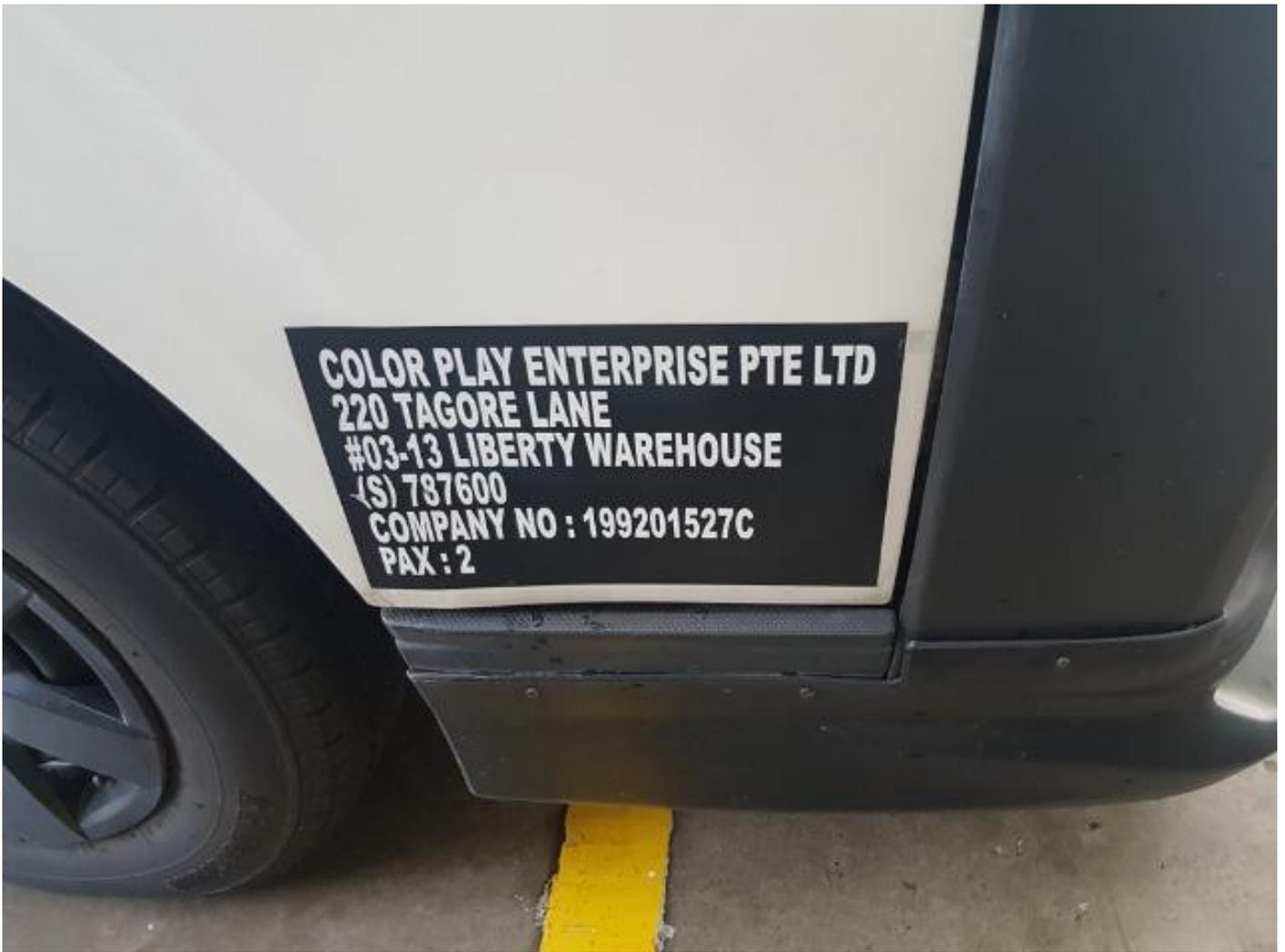
Accident Photo



Accident Photo



Accident Photo



Accident Photo



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**Accident Photo**



Accident Photo



Accident Photo

