

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	23/10/2018 15:26
Date Of Accident	22/10/2018 12:45
Exact Location Of Accident	MARINE PARADE RD JUNCTION STILL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG9154B
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	INSURANCE@LIONCITYRENTALS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-92244124

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE HYBRID-1.5 (A)
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	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SLG9154B
Cover Note Number	

Driver

Name of Driver	OMNATHAN S/O ADIMULAM
NRIC No	S1418715D
Date Of Birth	14/01/1960
Occupation	OUTDOOR
Date Of Driving Pass	13/10/2015
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92244124
Fax Number	
Contact Number	
Email Address	OMNATHAN@GMAIL.COM

Address	BLK 846, WOODLANDS AVE 4 #02-622
Postcode	730846
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	COLLISION - HEAD TO REAR
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?	YES
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)	4
Passenger 1	NAME: : IVAN (81888901) GENDER: : MALE
Passenger 2	NAME: : PASSENGER GENDER: : FEMALE
Passenger 3	NAME: : PASSENGER GENDER: : FEMALE

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

REFER TO STATEMENT

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	SDY1211Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GEORGE WEE TEE PENG
NRIC/Passport Number	S0563780E
Contact Number	96964298

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name
Approximate Age
Injuries Sustain
Injured person in which vehicle? SLG9154B
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

Sketch Plan Pg. 1

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.

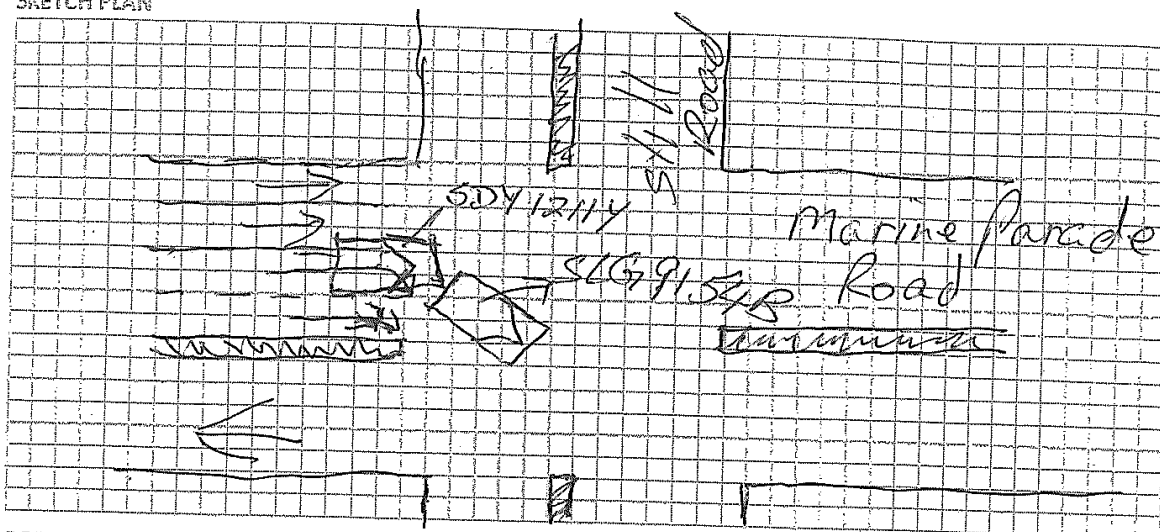


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 22/10/2018 at about 1245hrs, I was travelling along Marine Parade Road on the 2nd right lane heading towards Still Road at the junction. I was waiting for traffic to clear before I proceed to turn right into Still Road towards ECP Changi, when suddenly I heard a loud bang from behind that a car SDY 1211Y had hit onto my rear. I then got out of the vehicle to talk with the other driver before we decided to move our vehicle to the rear along Still Road as we were obstructing traffic. We then proceed to exchange our particulars before we head off on our own ways. I then proceed to send my passengers back to their destinations and upon reaching one male passenger in my vehicle that he felt slightly injured from the accident and so I reported and made a police report of the accident. That's all.

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.:

23/10/2018
14.48 hrs



**SINGAPORE
POLICE FORCE**



T/20181022/2112

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

1 of 3

Report No. T/20181022/2112

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/10/2018 16:43		Vide Report No.:		Station Diary No.: 21	
Informant's Particulars					
Name of Informant: OMNATHAN S/O ADIMULAM			Address: APT BLK 846 WOODLANDS AVENUE 4 #02-622 SINGAPORE 730846		
ID Type / ID No.: NRIC NO / S1418715D			Contact No.: Home/Office: 92244124 Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 58	Date of Birth: 14/01/1960	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Grab Driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/10/2018 12:45	Type of Location:
Location: Along Road 1 MARINE PARADE ROAD				
Junction of Still Road.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SDY1211Y	Car			Grey	Slightly Damaged	0
SLG9154B	Car			Red	Slightly Damaged	3

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



**SINGAPORE
POLICE FORCE**



T/20181022/2112

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

2 of 3

Report No. T/20181022/2112

CONTINUATION OF REPORT

Driver			
Name	George Wee Tee Peng		ID No. S0563780E
Related Vehicle	SDY1211Y (Car)		Contact No. 96964298
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	NIL	Degree of Injury	NIL
Driver			
Name	OMNATHAN S/O ADIMULAM		ID No. S1418715D
Related Vehicle	SLG9154B (Car)		Contact No. 92244124
Hospital/Clinic	Millenium Medical Group		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	22/10/2018	Date Discharge	22/10/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the 22/10/2018 at about 1245hrs, I was travelling along Marine Parade Road on the 2nd right lane heading towards Still Road at the junction. I was waiting for the traffic to clear before I proceed to turn right into Still Road when suddenly I heard a loud bang from behind that had hit onto my rear. I then got out of my vehicle to talk with the other driver before we decided to move our vehicle to the rear along Still Road as we were obstructing traffic. We then proceeded to exchange our particulars before we head off on our own ways. I then proceeded to send my passengers back to their destination and upon reaching, he mentioned that he felt slightly injured from the accident and I had consulted my Grab Office who then told me to lodge a police report regarding it. I also then proceeded to see a doctor as I felt pain on my neck and shoulder area. I would like to state that there was no ambulance nor traffic police at scene. I only have one of my passenger's name and contact which is Ivan HP: 81888901 who had witnessed the incident. I would also like to state that my vehicle had in-car camera which shows the front only.



**SINGAPORE
POLICE FORCE**



T/20181022/2112

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

3 of 3

Report No. T/20181022/2112

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:
J /
Sgt 2 CHOONG JIA LE, DION

Signature Of Informant

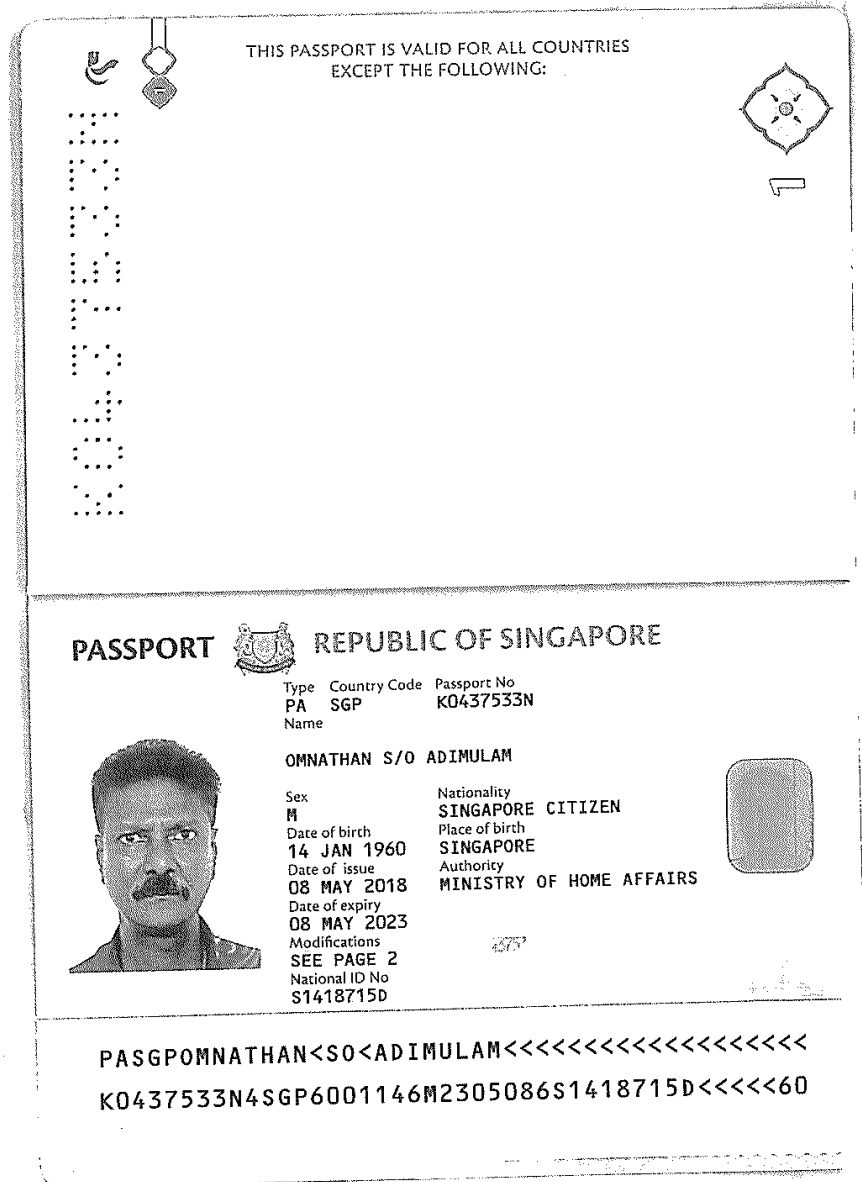
Signature Of Interpreter:
Not applicable

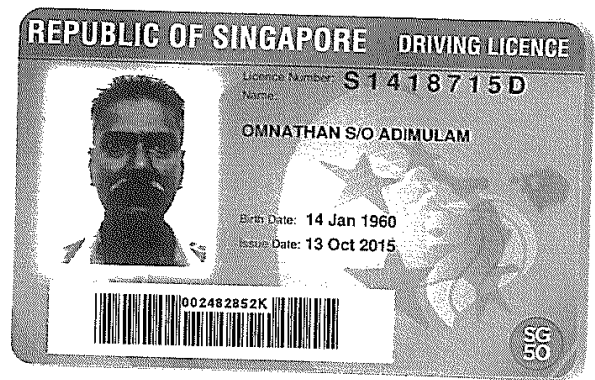
Date/Time:
22/10/2018 16:43

Officer In Charge Of Case:
TP / AEIT /
SSI 2 JUREMAH BINTE AHMAD
Contact No.: 65472076

Classification Of Case:

Authentication Stamp
NP168

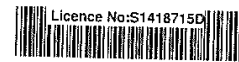




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	13 Oct 2015

NP 428A





HOTLINE TEL: (65) 6419-3000
FAX: (65) 6415-3723

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)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR		(The below excess is subject to GST)	
CERTIFICATE NO.	SLG9154B	ALL CLAIMS EXCESS	S\$2000.00
		WINDSCREEN EXCESS	S\$100.00
		SUM INSURED	Market Value
		INSURING WITH COE/PARF	Yes
1) VEHICLE REGISTRATION NO.		SLG9154B	
2) NAME OF INSURED		LCRF Pte Ltd	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		25 February 2018	
4) DATE OF EXPIRY OF INSURANCE		24 February 2019	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*	Any person who is driving on the Insured's order or with their permission.		
	If You or Your Authorised Driver is below the age of 21 years old and/or has less than 1 year driving experience, the excess is S\$3,500(All Claims).		
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.			
6) LIMITATION AS TO USE*	1) Use for social, domestic, pleasure purposes and business purposes of Insured 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired. The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.		
LOSS OF USE	Not Included		
HIRE PURCHASE COMPANY	Refer to Policy Terms and Conditions		
*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).

Issued in Singapore 13 Feb 2018

AIG Asia Pacific Insurance Pte. Ltd.

030080-000
Aon Singapore Pte Ltd
2 Shenton Way
#26-01 SGX Centre 1
SINGAPORE 068804

Marib

ORIGINAL

AUTHORISED REPRESENTATIVE

SSPAHN

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



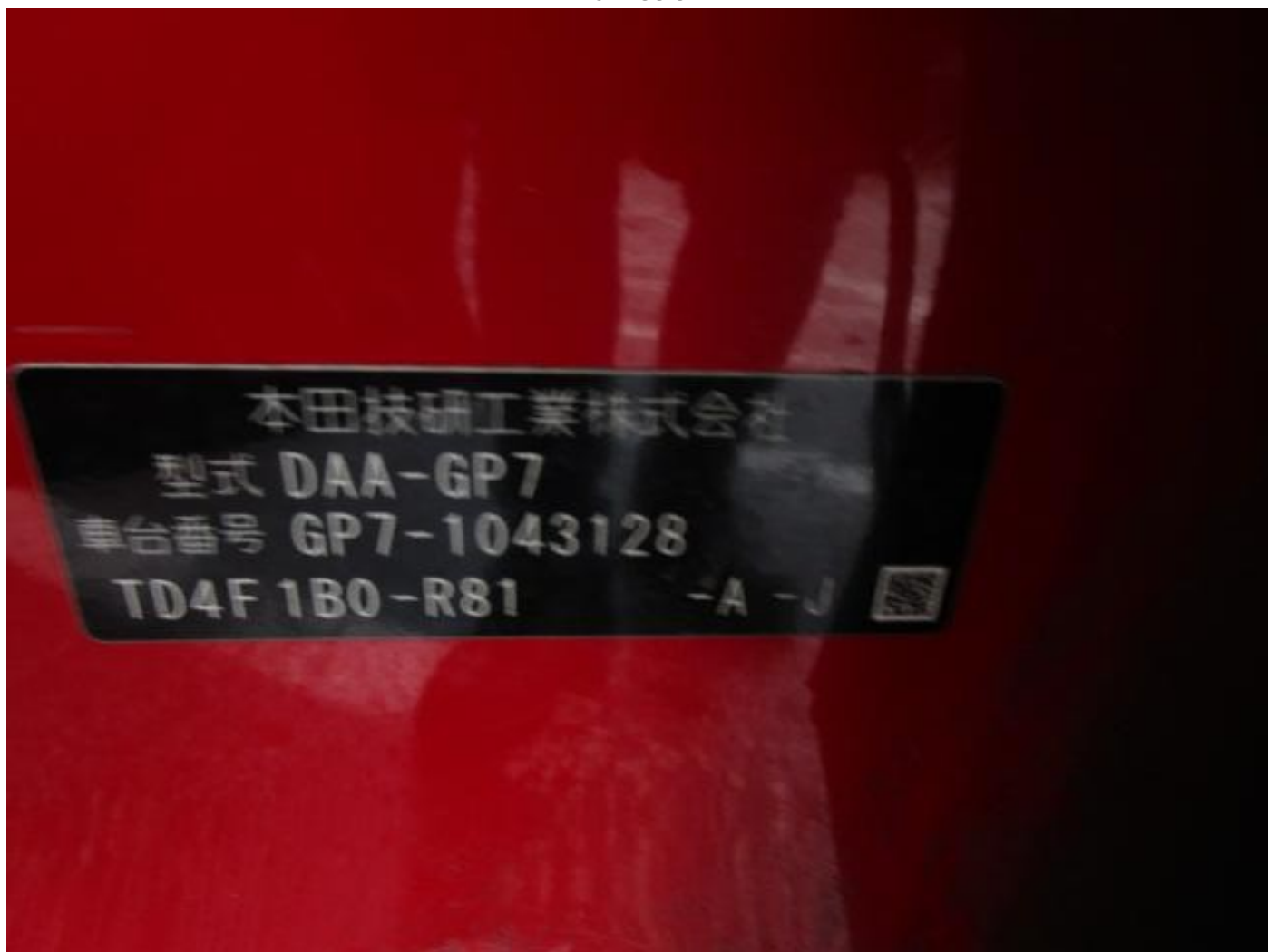
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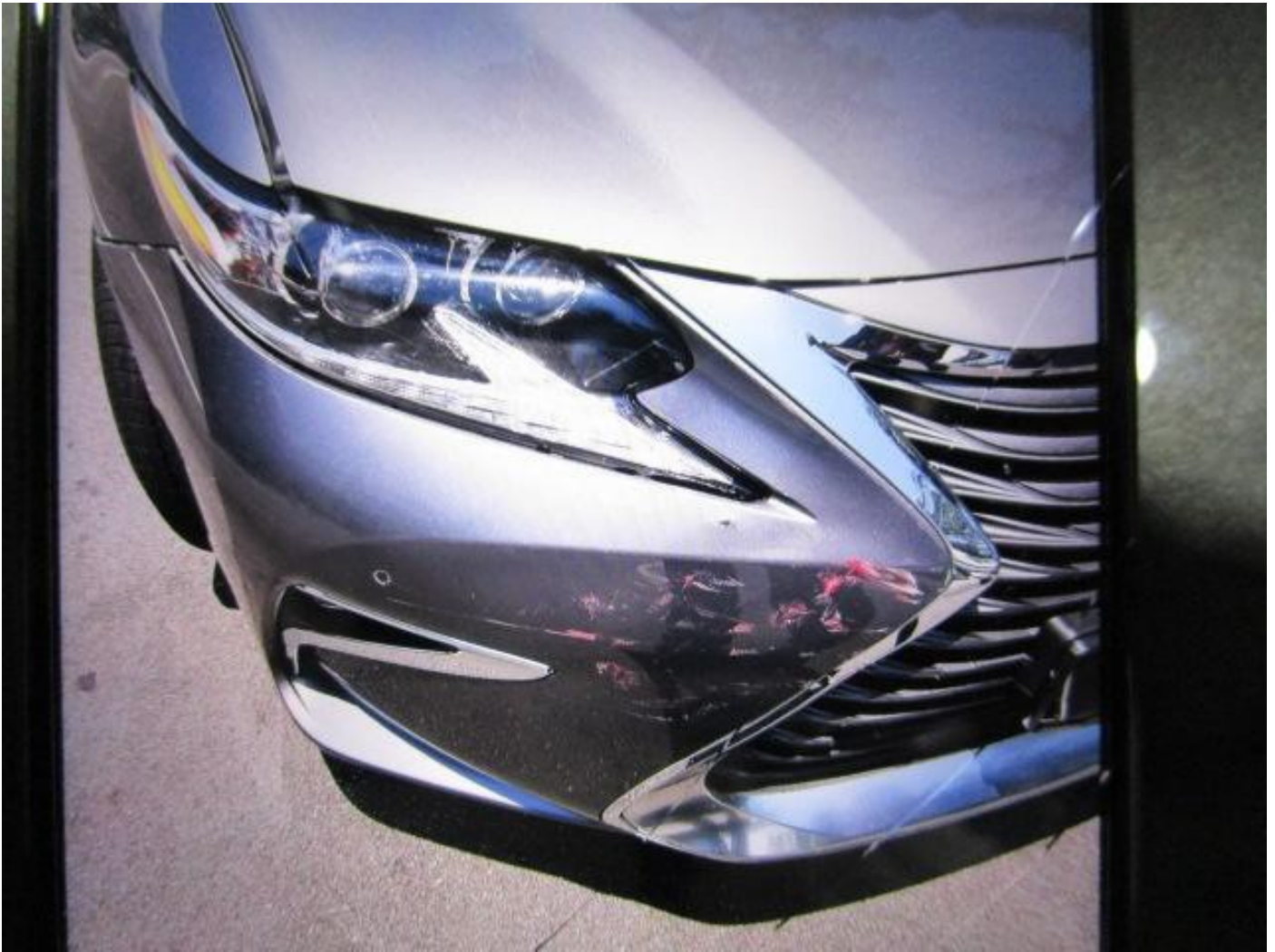
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Accident Photo



Accident Photo



Accident Photo



Identification Card

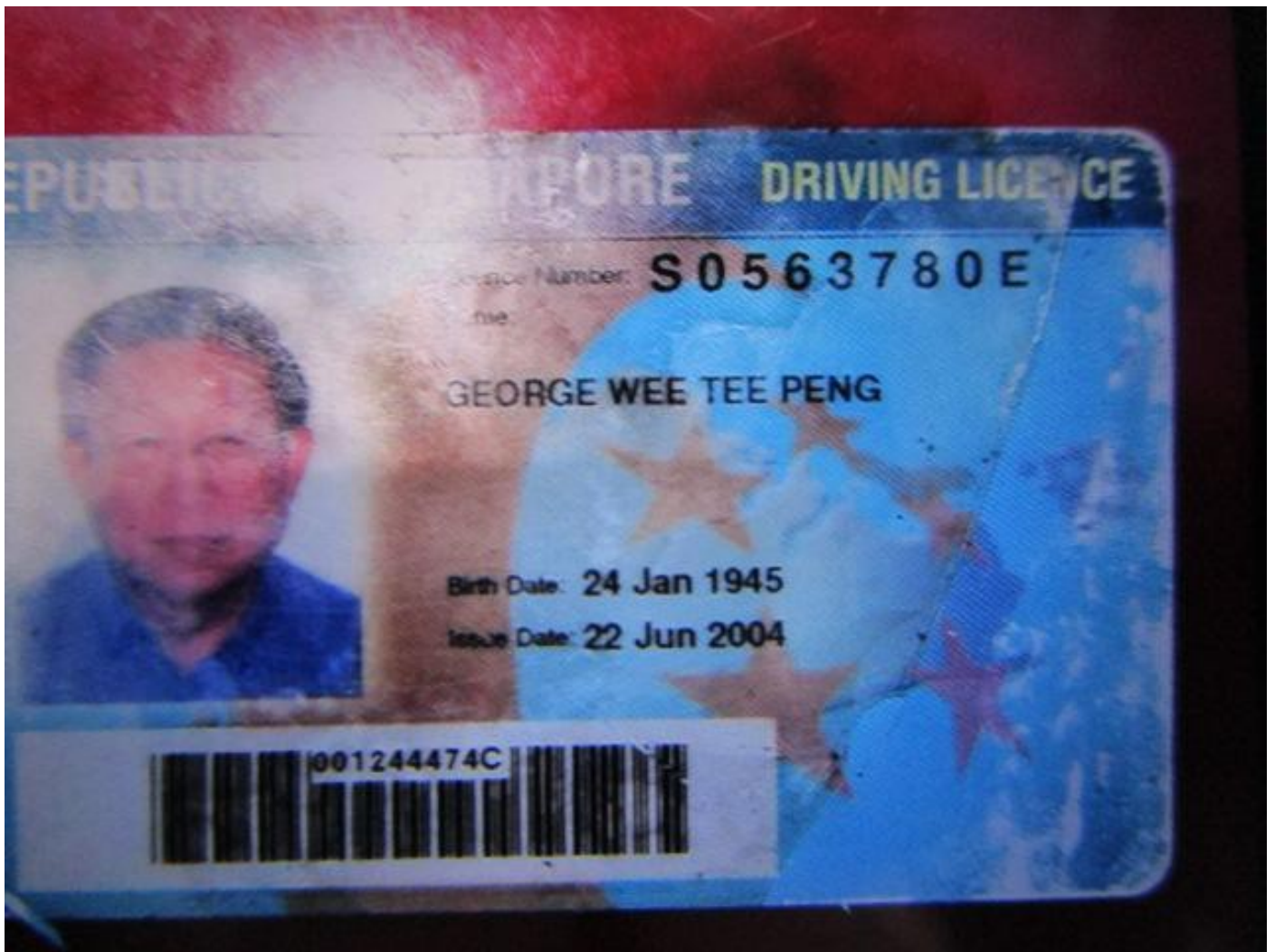
REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Service Number: **S0563780E**
five

GEORGE WEE TEE PENG

Birth Date: **24 Jan 1945**
Issue Date: **22 Jun 2004**

001244474C

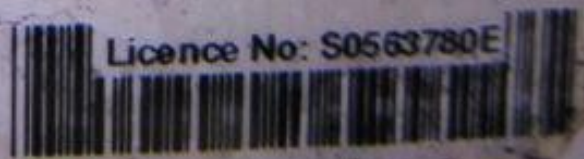


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

PASS DATE

Class 3 **Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg**

28 Jan 196



IF 428A