### 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 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.
- 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

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15/02/2019 16:10 Date Of Report

Date Of Accident 14/02/2019 23:05/

FULLERTON ROAD TWDS CONNAUGHT DRIVE Exact Location Of Accident

SINGAPORE Country/State of Loss

### **DETAILS OF OWN VEHICLE**

SLM2514K Vehicle Registration Number

Insured/Policyholder

AUTOBAHN RENT A CAR PTE. LTD, Name Of Registered Owner

201607970Z Co Reg No NOEMAIL Email Address

(LOCAL) +65-86089649 Mobile Phone No Alternative Phone No OFFICE-86089649

Vehicle Particulars

TOYOTA Manufacturer

PRIUS HYBRID 1.8S CVT Model

Exact Purpose for which vehicle was being used at WORK

time of accident

NO

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY

If No, Please state action to be taken Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

NO Fleet Policy

5079864471-02 Policy Number

Cover Note Number

Driver

NOOR HASRIN B AHMAD Name of Driver

S7527406H NRIC No 23/09/1975 Date Of Birth OUTDOOR Occupation 04/06/1997 Date Of Driving Pass

21 YEARS AND 8 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-87427404 Mobile Number

Fax Number

OTHERS-87427404 Contact Number

NOEMAIL EMail Address

Address

5 BUANGKOK GREEN

#07-02

Postcode

539748

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - RENTAL

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 (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident? 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)

NO

soliciting/offering accident claims assistance.

1

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

PLS REFER TO THE ATTACHED 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

SHD910H/

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# SKETCH PLAN

# IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- The 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.
- 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:
  - 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:
  - 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:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

TOTAL PROPERTY OF THE

SKETCH PLAN ANDERSON BRIDGIZ SHICLE 9 - SLM 2514K TOWARD COMPACH - SHD 910H DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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## 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.:

### > Back to OneMotoring

### Enquire Transfer Fee

Vehicle Details

Vehicle No.: SLM2514K

Vehicle Type: Z10 - Private Hire (Chauffeur) Motor Car

Vehicle Attachment 1: No Attachment
Vehicle Scheme: Normal
TOYOTA

Vehicle Make: TOYOTA

Vehicle Model: PRIUS HYBRID 1.8S CVT

Chassis No.: ZVW508032976

 Propellant :
 Petrol-Electric

 Engine No. :
 22R6879132

 Motor No. :
 20A116801414

 Engine Capacity :
 1797 cc

 Power Rating:
 53.0 kW

 Maximum Power Output:
 90.0 kW (120 bhp)

 Maximum Laden Weight:
 1635 kg

 Unladen Weight:
 1360 kg

 Year Of Manufacture:
 2016

 Original Registration Date:
 24 Mar 2017

Lifespan Expiry Date:

COE Category: B - Car above 1600cc or 97kW (130bhp)

\$53,001.00 Quota Premium: 23 Mar 2027 COE Expiry Date: 23 Sep 2019 Road Tax Expiry Date: PARF Eligibility Expiry Date: 23 Mar 2027 23 Mar 2020 Inspection Due Date : Intended Transfer Date 03 Jan 2019 82.00 (g/km) CO2 Emission: CEV/VES Rebate Utilised Amount: \$25,792.00

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.

Amount Payable

Amount Before GST GST Amount After GST (S\$) (S\$)

Transfer Fee: 25.00 25.00

Total Amount Payable: 25.00

You may print this page for reference.

OK Prin

| ehicle No.                    | SLM 251419 Model/Make Toward PRIMS                   |
|-------------------------------|--|
| ate of Accident               | 14/02/2019   |
| ime of Accident               | 2305 HRS   |
| ocation of Accident           | FULLERTON ROAD TOWARD CONNAMENT DR                   |
| xact purpose use during accid | dent womann Hour                                     |
| lame of Owner                 | ANTOBAHN RENT A CAR PTE LTD                          |
| elephone No.                  | H/P: 86089649 Home: Office:                          |
| IRIC                          | 2016079170 2   |
| Address                       | 6001 BEACH ROAD # 64-06 GOLDEN MILE TOWER S(1995     |
| Claim type                    | OD THIRD PARTY REPORTING ONLY                        |
| nsurance Company              | NTMC   |
| ype of Coverage               | Comprehensive Third Party Third Party / Fire / Theft |
| Policy No.                    | 5079764471-02  |
| Name of Driver                | As Above If No NOOR HASRIN B AHMAD                   |
| VRIC                          | S7527+06H Any Passengers: DIC                        |
| Date of birth                 | 23 SEP 1975  |
| Occupation                    | Outdoor / Indoor                                     |
| Driving License Pass Date     | 04 Jun 1997  |
| Gender                        | Male / Female  |
| Contact No.                   | H/P: 8742 7404 Home: Office:                         |
| Address                       | 5 BUANGKOK GREEN #07-02 S( 539748)                   |
| Driver have any own vehicle   | No, If yes, Reg No.                                  |
| Relationship                  | Employee, If no, state REMAL / LEASING               |
| Weather condition             | Clear Raining Other                                  |
| Road Surface                  | Dry Wet Other  |
| Any Injuries                  | No, If Yes, Who?                                     |
| Name And Contact No.          |  |
| Name And Contact No.          |  |
| Police Report                 | No. If Yes, Where?                                   |
| Vehicle B No.                 | SHD 910 H Any Passengers:                            |
| Name of Driver                | Contact No.:   |
| Vehicle C No.                 | Any Passengers :                                     |
| Vehicle D No.                 | Any Passengers :                                     |
| Vehicle E no.                 | Any Passengers :                                     |
| Vehicle F No.                 | Any Passengers :                                     |
| Vehicle G No.                 | Any Passengers :                                     |
| Witness Name                  | Witness Contact :                                    |
| Accident Portion              | RIGHT FRONT PURTION                                  |
| Camera Recorder               | Yes (No) 50 caro DAMANO                              |
| Email Address                 |  |
| Email Address                 |  |
| PARTICULAR WORKSHOP           | TWINCAR AUTOMOTIVE PTR LTD                           |
| CONTACT NO.                   | 6842 0051 / 6744 0510                                |
| CONTACT PERSON                | IAN  |
| FAX NO                        | 6741 0510  |

# REPUBLIC OF SINGAPORE



¢

Name

NOOR HASRIN B AHMAD



SINGAPORE

Sex M





Please visit www.lta.gov.sg to check the status of this vocational licence



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

EFFECTIVE DATE

Class 2B Motorcy Class 2A Motorcy Class 3 Motor ca

Motorcycles =< 200 cc Motorcycles between 201 cc and 400 cc Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

27 Dec 1996 28 Apr 1998 04 Jun 1997

NP 428A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

Description

PRIVATE HIRE CAR VL

Issue Date

14/08/2018



| <b>eBao</b> Tech       |                        |                   |                       |                                     | ES                   |                        |                  |                | G                 | eneralCl         | aim            |
|------------------------|------------------------|-------------------|-----------------------|-------------------------------------|----------------------|------------------------|------------------|----------------|-------------------|------------------|----------------|
| Hello, NAC_PAYA_UBI_80 | 00601                  |                   |                       |                                     |                      | - make the             | · Change La      | inguage        | • Change Pa       | ssword           | Log Out        |
| My Desktop             | Polic                  | y Query           |                       |                                     |                      |                        |                  |                |                   |                  | ,              |
| Notice of Loss         | Policy N               | 0.                |                       |                                     |                      | Date of Accident 14/02 |                  |                |                   | 2/2019 23:05     |                |
|                        | Vehicle No.(For Motor) |                   | SLM2514K              |                                     |                      | Certificate Number     |                  |                |                   |                  |                |
|                        |                        |                   |                       |                                     | S                    | earch                  |                  |                |                   |                  |                |
|                        | Select                 | Policy No.        | Certificate<br>Number | Policyholder<br>Name                | Policyholder<br>NRIC | Product                | Cover Type       | Vehicle<br>No. | Insured<br>Object | Commence<br>Date | Expiry<br>Date |
|                        | ٥                      | 5079864471-<br>02 |                       | AUTOBAHN<br>RENT A CAR<br>PTE, LTD. | 201607970Z           | GFT                    | drivo<br>CLASSIC | SLM2514K       | SLM2514K          | 28/12/2018       |                |
|                        |                        |                   |                       |                                     | Co                   | ontinue                |                  |                |                   | 521              |                |

**Claim Handling** 

| The premium on this policy has n<br>Accident MT/1032352 | ot been collected.                     |                                |                   |  |                      |             |
|---|--|--------------------------------|-------------------|--|----------------------|-------------|
| Policy No.  | 5079864471-02                          | Vehicle No.                    | SLM2514K          |  | GST Regi             | stration N  |
| Certificate No.   |  |                                |                   |  |                      |             |
| Policyholder Name                                       | AUTOBAHN RENT A CAR PTE. LTD.          |                                |                   |  | Policyholo           | der NRIC    |
| Product Code  | FLEET INSURANCE                        | Cover Type                     | drivo CLASSIC     |  | Loading              |             |
| Contact No.(Mobile)                                     | 86089649                               | Contact No.(Office)            | 0                 |  | Contact N            | vo.(Home)   |
| Email Address   |  | Special Remark                 |                   |  | eCode                |             |
| KFK   | - No Yes                               | TCA                            | No Yes            |  | eCode Re             | ason        |
| NCD Protection  | No                                     | NCD Entitlement(%)             | 0                 |  | Private H            | ire         |
| Accident Details  |  |                                |                   |  |                      |             |
| Report Date   | 18/02/2019 09:55                       | Accident Report Within 24 hrs  | Yes               |  | Accident 1           | Tyne        |
| Date of Accident  | 14/02/2019                             | Time of Accident hhomm         | 23:05             |  |                      | Williams    |
| Reporting Centre  | 11/01/1012                             | Orange Force                   | 23:05             |  |                      | of Accident |
| Accident Location                                       | FULLERTON ROAD TWDS CONNAUGHT DRIVE    | Crange Force                   |                   |  | ICM No.              |             |
| T Excess  | POLICENTON KOND TWDS COMMADDITI DRIVE  |                                |                   |  |                      |             |
| Own damage Excess                                       | *****                                  |                                |                   |  |                      |             |
| Unnamed Driver Excess                                   | 3,500,00                               | Additional Excess              | 0                 |  | Windscree            | en Excess   |
|   |  | Outside Singapore OD Excess    |                   | 3,500.00   |                      |             |
| Third Party Excess                                      | 3,000.00                               | Outside Singapore TP Excess    |                   | 3,000.00   |                      |             |
| ▼ Benefits  | in.                                    |                                |                   |  |                      |             |
| ✓ GST Registered Informat GST Pagistered                |  |                                | 0222119450        | 45 - No.00149 (1-801   |                      |             |
| GST Registered<br>GST Registration No.                  | No.                                    |                                |                   | stration Date  |                      |             |
| Modification History                                    |  |                                | GST State         | as Verified  |                      | Yes         |
|   |  |                                |                   |  |                      |             |
| <ul> <li>Policyholder Mailing Add</li> </ul>            | ress                                   | CHARLES                        |                   |  |                      |             |
| Address 1   | 6001 BEACH ROAD                        | Address 2                      | #08-06 GOLDEN N   | ILE TOWER  | Address 3            | 3           |
| Address 4   |  | Address Type                   | Singapore address |  | Post Code            |             |
| Unit No.  | LOT3B                                  | Related Policy Number          | 5079864471-02     |  |                      |             |
| ♥ OI Driver Info  | southern are an area and a second      |                                | 7                 |  |                      |             |
| Driver Name   | Unnamed Driver                         | Driver Type                    | Unnamed Driver    |  |                      |             |
| Unnamed driver Name                                     | NOOR HASRIN B AHMAD                    | Driver NRIC                    | S7527406H         |  | Driver DO            | В           |
| Register Date of Driver License                         | 04/06/1997                             | Driver Age                     | 43                |  | Driving Ex           | xperience.  |
| Contact No.(Mobile)                                     | 87427404                               | Contact No.(Office)            | 0                 |  | Contact N            | lo.(Home)   |
| Address 1   | 5 BUANGKOK GREEN                       | Address 2                      | # HOUGANG GREE    | N .  | Address 3            |             |
| Address 4   |  | Address Type                   | Singapore address |  | Post Code            |             |
| Unit No.  |  |                                |                   |  |                      |             |
| Does he own a Singapore<br>Registered car?              | Yes * No                               | Driver Vehicle No.             |                   |  | Driver Ins           | urer Com    |
| Declaration   |  |                                |                   |  |                      |             |
| Breathalyser or Blood Test<br>Reading?                  | 0 mg                                   | Any injury?                    | Yes No            |  |                      |             |
| Modification History                                    |  |                                |                   |  |                      |             |
| Claim 001 OD-MX New                                     |  |                                |                   |  |                      |             |
|   | */                                     |                                |                   |  |                      |             |
| Claim Type •  |  |                                |                   | OD-MX  | Insured Name         | AUTOB/      |
| Contact No.(Mobile)                                     |  |                                |                   | 88380101   | No.<br>(Home)        |             |
| Email Address   |  |                                |                   | INSURANCEHAMILTONAU  | OI<br>TOHUE Vehicle  | SLM251      |
| Claim Description                                       |  |                                |                   | SLM2514K / SH ON 14 Fe   | Number<br>b 2019     |             |
| Preferred   |  |                                |                   |  |                      |             |
| Workshop  | Insured Liability Partially at Fau     |                                |                   | 8  |                      |             |
| Sentilet No.<br>Finalisation Yes                        | Repair Preferred Workshop, Name Option | e unknown  GIA report Received |                   |  | Chaire               |             |
| Date Registered   | - September 1                          | 110017057007                   |                   | 18/02/2019 10:54   | Claim                |             |
|   |  |                                |                   | COLUMN TO THE PARTY OF THE PART | Date                 |             |
| Report Taken By   |  |                                |                   |  | Workshop<br>Repairer |             |

