

## 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	25/02/2019 20:38
Date Of Accident	25/02/2019 14:20
Exact Location Of Accident	PLAYFAIR RD B/F MACTAGGART RD/BURN RD JUNCTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN7180B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	-
Email Address	ERIC.FOO29@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96233433
Alternative Phone No	OFFICE-96233433

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29114756 MKF
Cover Note Number	

### Driver

Name of Driver	FOO CHIN JIN
NRIC No	S1665304G
Date Of Birth	29/04/1964
Occupation	OUTDOOR
Date Of Driving Pass	22/04/1982
Driving Experience	36 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96233433
Fax Number	
Contact Number	OTHERS-96233433
Email Address	ERIC.FOO29@GMAIL.COM

Address	BLK 560 CHOA CHU KANG NORTH 6 #08-74
Postcode	680560
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	COLLIDED INTO PEDESTRIAN
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	CHOA CHU KANG NPC
Police Station Address	<b>ROAD:</b> 20 CHOA CHU KANG ST 52 #01-02 , <b>POSTCODE:</b> 689286 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20190225/2200

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE
Was there any audio recorded?	NO

## Accident Sketch Plan

### 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.

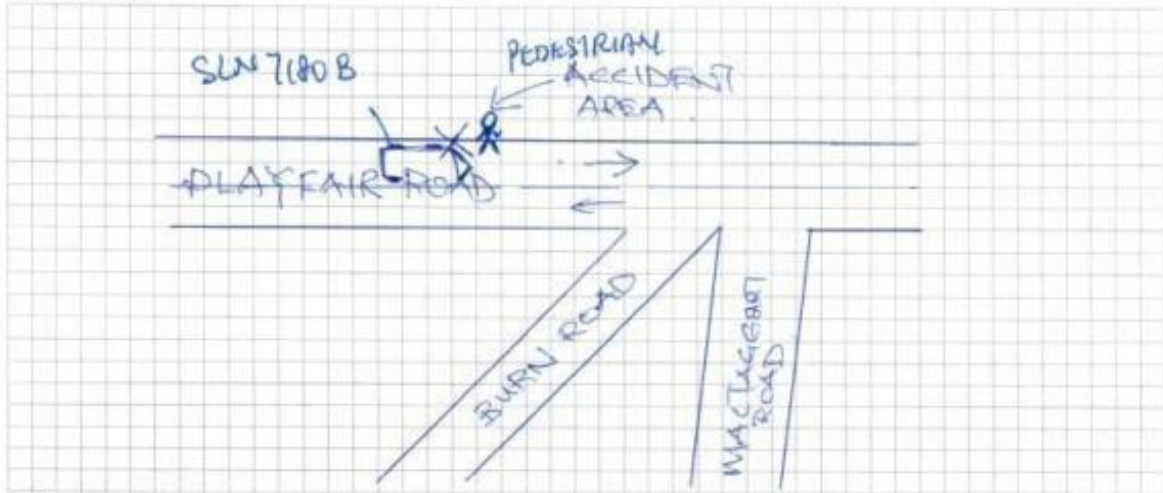
Policyholder's Signature  
Date & Time:

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

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

## Accident Sketch Plan

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident happened along playfair road before  
Burn Road and MacTaggart Road.

Pedestrian suddenly crossed the road, I immediately stepped on the brakes and swerved unfortunately I couldn't avoid the pedestrian in time.

As the traffic was heavy, my speed at that time was below 25 km/hr

I called for the ambulance and assigned the paramedics / police. Pedestrian was conscious at the point in time.

Российский Репорт Т/20190325/2200

## 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: Rashid Ali  
NRIC/FIN No.:



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190225/2200

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

1 of 3

Report No. T/20190225/2200

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2019 20:35		Vide Report No.:		Station Diary No.: 170
<b>Informant's Particulars</b>				
Name of Informant: FOO CHIN JIN		Address: APT BLK 560 CHOA CHU KANG NORTH 6 #08-74 SINGAPORE 680560		
ID Type / ID No.: NRIC NO / S1665304G		Contact No.: Home/Office: Mobile: 96233433		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 54	Date of Birth: 29/04/1964	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: GRAB DRIVER		Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 25/02/2019 14:20	Type of Location: Straight Road
Location: Along Road 1 PLAYFAIR ROAD MACTAGGART ROAD Along playfair road before mactaggart road, burn road junction				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Moving Vehicle Against - Pedestrian			Anyone conveyed by ambulance: Yes	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLN7180B	Car				Slightly Damaged	0

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190225/2200

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

2 of 3

Report No. T/20190225/2200

### CONTINUATION OF REPORT

#### Brief Details.

On 25/02/2019 at about 1420hrs i was driving along Playfair road before Mactaggart road and burn road junction 01 pedestrian suddenly crossed the road. I immediately stepped on my brakes and swerved my vehicle however i wasn't able to stop in time and couldn't avoid the pedestrian. During that time the traffic was very heavy and i was travelling below 25km/hr. Subsequently i get out from my vehicle and called for ambulance. Shortly after Police and paramedics arrived at scene and the pedestrian was conveyed to hospital and my in-car camera SD card was handed over to the Traffic police at scene. I was later handed over a case card vide E/20190225/0084. I suffered damage to my front left bumper.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190225/2200

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

3 of 3

Report No. T/20190225/2200

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:

J7

Sgt. 2 OH DING FENG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65472076

Signature Of Informant:

Date/Time:

25/02/2019 20:35

Classification Of Case:

Authentication Stamp

NP168

# RENTAL AGREEMENT

## CONFIDENTIAL SCHEDULE TO VEHICLE RENTAL AGREEMENT

Date:	01/22/2019	Vehicle Rental Agreement No.	12592
<b>Renter Details</b>		<b>Additional Driver (if any)</b>	
<input checked="" type="checkbox"/> Name	Chin Jin Foo	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Address	Blk 560 Choa Chu Kang North 6 #08-74	<input checked="" type="checkbox"/> Address	
<input checked="" type="checkbox"/> Date of Birth	04/29/1964	<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> NRIC/Passport No.	S1665304G	<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Driving License No.	S1665304G	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> Telephone No.	6596233433	<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Mobile No.	6596233433	<input checked="" type="checkbox"/> Mobile No.	
<b>Vehicle Description</b>		<b>Additional Driver (if any)</b>	
<input checked="" type="checkbox"/> Vehicle No	SLN7180B	<input checked="" type="checkbox"/> Name	
<input checked="" type="checkbox"/> Make/Model	TOYOTA Prius	<input checked="" type="checkbox"/> Address	
<b>Rental Period</b>		<input checked="" type="checkbox"/> Date of Birth	
<input checked="" type="checkbox"/> Minimum Rental Period	221	<input checked="" type="checkbox"/> NRIC No.	
<input checked="" type="checkbox"/> Date/Time Checked Out	01/22/2019	<input checked="" type="checkbox"/> Driving License No.	
<input checked="" type="checkbox"/> No. of Days		<input checked="" type="checkbox"/> Telephone No.	
<input checked="" type="checkbox"/> Expected Date/Time of Return	08/31/2019	<input checked="" type="checkbox"/> Mobile No.	
<input checked="" type="checkbox"/> Actual Date/Time of Return			
<b>Rental Charges* &amp; Deposit</b>			
<input checked="" type="checkbox"/> ( ) RR Rental Charges/Day	Per day @ S\$85.00 Per week @ S\$595.00	Deposit Received	S \$500.00
<input checked="" type="checkbox"/> (X) ER Promotion Rental Charges/Day	Per day @ S \$73.95 Per week @ S\$517.66	Total Amount Received*	S \$36.98
<input checked="" type="checkbox"/> (X) CDW Charges/Day	Per day @ S\$4.28 Per week @ S\$29.96	* Inclusive GST	
Rental Period	221 days / 31 weeks	Total Rental Charges	S \$0.00

Insurance Matters (Accident/Theft)				
Liability Assessment / Nature of incident	Non-Refundable Excess Payable by Renter*			Rental Charge / Replacement Vehicle
	Section 1 (Own Damage)*	Section 2 (3 <sup>rd</sup> Party Damage if applicable)*	Renter or authorised driver(s) is below 26 years of age	
3 <sup>rd</sup> Party Fault	S\$2,140.00	S\$2,140.00	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Own Fault (inclusive of accidents in Malaysia)	S\$2,140.00	S\$2,140.00	S\$1,605.00	No waiver of Rental Charges & no replacement vehicle provided
Act of God	S\$2,140.00	Not applicable	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Stolen Vehicle	S\$2,140.00	Not applicable	S\$1,605.00	Rental Charges waived or replacement vehicle provided (subject to availability)
Damage to Windscreen	S\$107.00	Not Applicable	Not Applicable	No waiver of Rental Charges & no replacement vehicle provided
Unreported or late reporting of accidents	Renter is liable for 3 <sup>rd</sup> parties & own vehicle repair costs associated with the accident			No waiver of Rental Charges & no replacement vehicle provided

\* excess payable is accumulative & inclusive of GST

<b>Payment Method</b>			
<input checked="" type="checkbox"/> Driver Wallet		<input type="checkbox"/> Cash	S\$
<input type="checkbox"/> Credit Card		<input type="checkbox"/> Debit Account	
Type		Bank Name	
Card No.		Account No.	



ID

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1665304G



Name  
FOO CHIN JIN

Race  
CHINESE

Date of birth  
29-04-1964

Sex  
M

Country of birth  
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S1665304G

Name  
FOO CHIN JIN

Birth Date 29 Apr 1964

Issue Date 03 Nov 2014




Land Transport Authority

VOCATIONAL LICENCE

Licence No : S1665304G

Name : FOO CHIN JIN

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



4848029



NIC No: S1665304G



Date of issue  
16-10-2010

Address  
APT BLK 560 CHOA CHU KANG NORTH 6  
#06-74  
SINGAPORE 680560

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(IES)

EFFECTIVE DATE

Class 2B	Motorcycles <= 200 cc	06 Apr 1960
Class 2A	Motorcycles between 201 cc and 400 cc	06 Apr 1960
Class 2	Motorcycles > 400 cc	06 Apr 1960
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	22 Apr 1960

Licence No: S1665304G



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	Issue Date
12	TAXI VL	14/02/2018



Accident Photo



**Accident Photo**



Accident Photo





Accident Photo



Accident Photo



Accident Photo



**Accident Photo**





**Accident Photo**



Accident Photo



Accident Photo



Accident Photo

