

## 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	04/05/2019 12:07
Date Of Accident	03/05/2019 07:55
Exact Location Of Accident	CAVENAGH RD SLIP RD BUYONG RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR3672D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	BIZLINK RENT-A-CAR PTE LTD
Co Reg No	200402911Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92434885

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA
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 CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994542/100828890-00000
Cover Note Number	

### Driver

Name of Driver	KIM HOSIK
NRIC No	G3378021X
Date Of Birth	02/12/1981
Occupation	INDOOR
Date Of Driving Pass	30/05/2018
Driving Experience	0 YEAR AND 11 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98272542
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	18 UBI RD 4 #01-11
Postcode	408616
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 (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)	1

#### 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

I WAS TRAVELLING ALONG CAVENAGH ROAD SLIP ROAD BUYONG ROAD. I SLOWED AND STOPPED AT THE STOP LINE TO CHECK FOR ONCOMING TRAFFIC ALONG BUYONG ROAD WHEN SUDDENLY, I FELT AN IMPACT. VEHICLE B HAD HIT ONTO THE REAR PORTION OF MY VEHICLE AND CAUSED DAMAGES. AFTER THE ACCIDENT, DRIVER B APOLOGISED AND ADMITTED HIS FAULT.

#### 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	SBP3828B
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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**

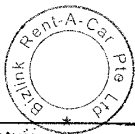
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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:

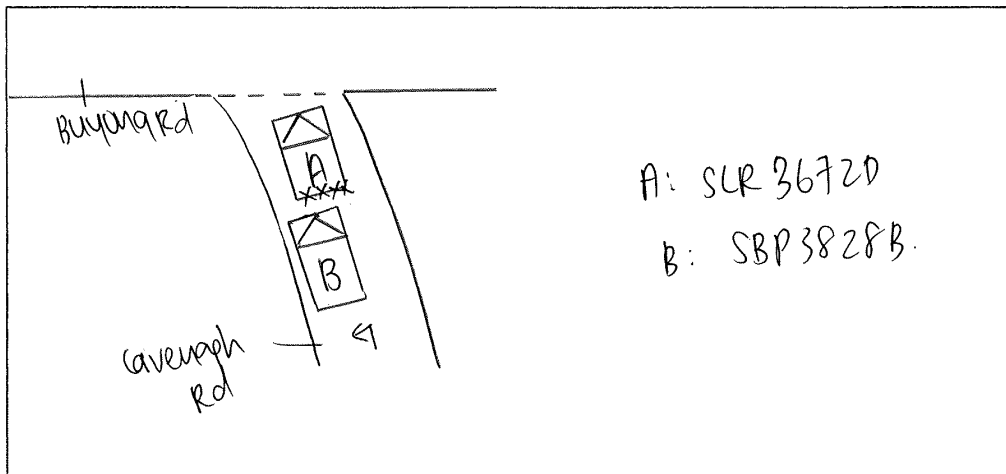
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

03/05/2019

GIA/MT SketchPlanForm\_v2

NEW HOPE TRAD

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Cavenagh Rd slip road Buyong Rd.

I slowed and stopped at the stop line to check for oncoming traffic along Buyong Rd when suddenly I felt an impact.

Vehicle "B" had hit onto the rear portion of my vehicle and caused damages.

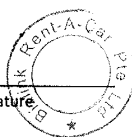
After the accident, driver "B" apologised and admitted his fault.



DECLARATION

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

Policyholder's Signature  
Date & Time:

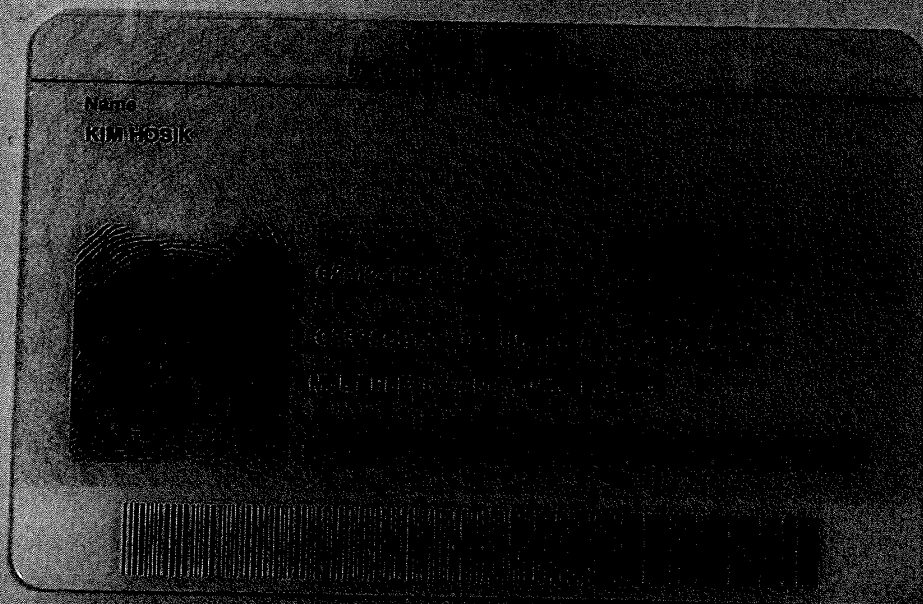


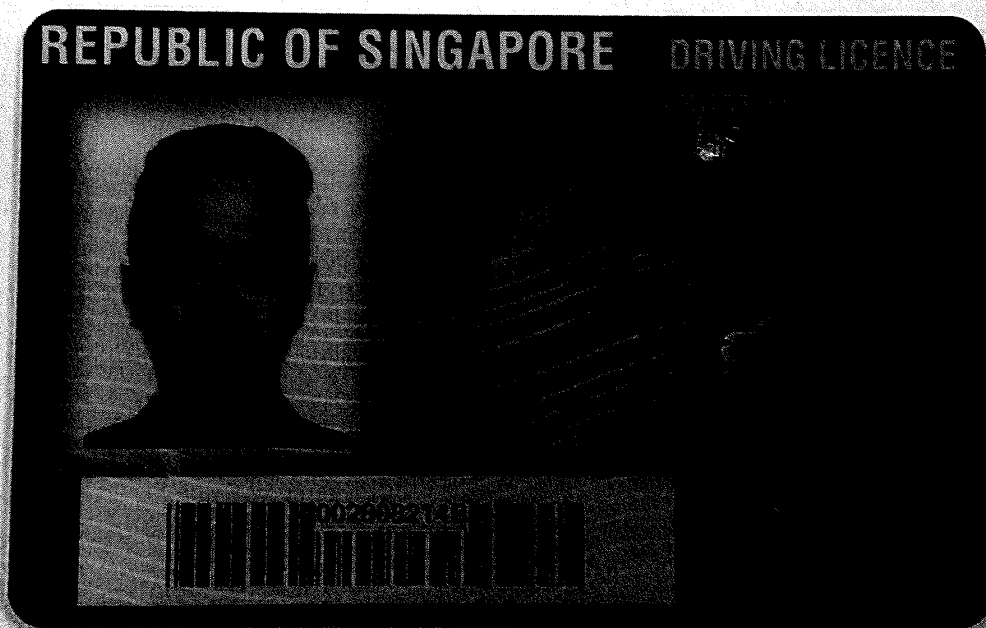
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

03/05/2019

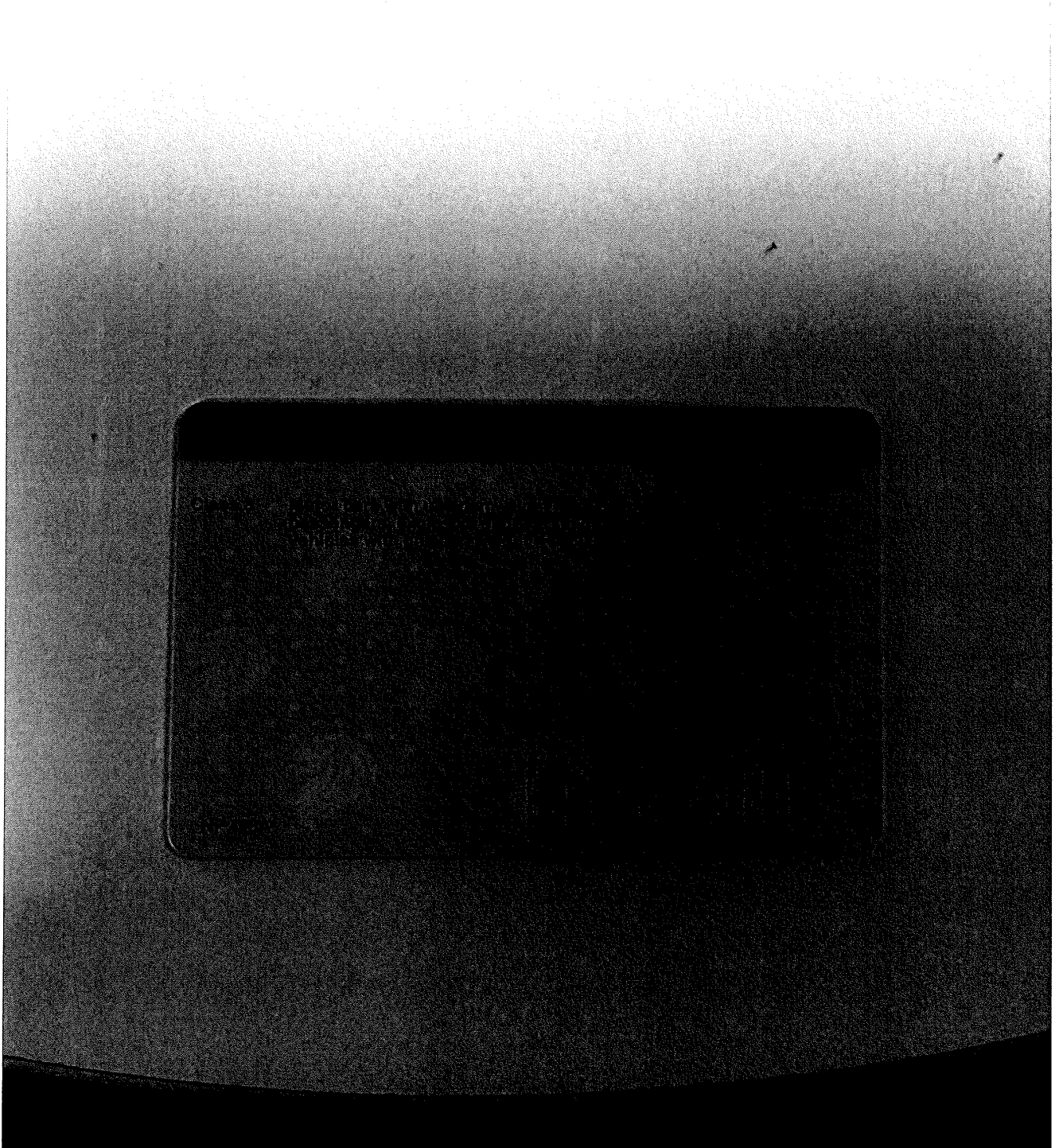
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:













# Accident Sketch Plan Pg. 1



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	OWN DAMAGE EXCESS	S\$1,200.00 (1)
CERTIFICATE NO. 999994542/100828890-00000	WINDSCREEN EXCESS	S\$100.00
	(for policies with effect from 1st November 2002)	
	SUM INSURED	S\$1.00
	INSURING WITH COE/PARF	YES
1) VEHICLE REGISTRATION NO.	SLR3672D	
2) NAME OF INSURED	BIZLINK RENT-A-CAR PTE LTD	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	1 Jul 2018	
4) DATE OF EXPIRY OF INSURANCE	30 Jun 2019	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *		
Any person who is driving on the Insured'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 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 *		
Use for the carriage of passengers or goods in connection with the Insured's business.		
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.		
The Policy does not cover		
1) Use for 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 the carriage of passengers for hire or reward by any person to whom the vehicle is hired.		
LOSS OF USE NOT INCLUDED		
* NAMED DRIVER N/A		
HIRE PURCHASE COMPANY HONG LEONG FINANCE LTD		
* 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 At Singapore 3 Jul 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD.

502806-000  
LIEW OOI LIN MAY  
AIG BUILDING  
78 SHENTON WAY #07-18  
SINGAPORE 079120

Authorised Representative

ORIGINAL

SSPYTP

# Accident Sketch Plan Pg. 1



RENTAL / LEASING AGREEMENT NO : RA 16269  
RCB / GST REGISTRATION : 200402911-Z

## THE SCHEDULE

VEHICLE DETAILS	
VEHICLE NO :	SLR 3672 D
CONTRACT REF :	KL/LG-17/104
MAKE / MODEL :	HYUNDAI ELANTRA 1.6A 'S'
HIRER'S PARTICULARS	
BILLING NAME :	LG ELECTRONICS SINGAPORE PTE LTD
ADDRESS :	8 TEMASEK BOULEVARD #27-01, SUNTEC TOWER 3 SE 038988
TELEPHONE :	6333-6092
PERSON IN CHARGE :	MR NGIAM FAN KAI
DRIVER'S DETAILS	
NAME :	MR KIM HO BIK
ADDRESS :	15 EVELYN ROAD #32-01 RESIDENCES Q EVELYN SE 309311
TELEPHONE :	9827 2542
NRIC/PASSPORT NO :	M49243593
DATE OF BIRTH :	21/12/1981 SEX (M) / F
DRIVING LICENCE NO :	1128-17-136388
ISSUE/PASS DATE :	18/4/2017
EXPIRY DATE :	17/4/2018
COUNTRY OF ISSUE :	KOREA INT'L
ADDITIONAL DRIVER'S DETAILS	
NAME :	
ADDRESS :	
TELEPHONE :	
NRIC/PASSPORT NO :	
DATE OF BIRTH :	SEX : M / F
DRIVING LICENCE NO :	
ISSUE/PASS DATE :	
EXPIRY DATE :	
COUNTRY OF ISSUE :	

RENTAL / LEASING PARTICULARS	
DATE OUT :	01/09/2017 DATE IN :
TIME OUT :	TIME IN :
MILEAGE OUT :	MILEAGE IN :
ESTIMATED DATE OF RETURN : 31/08/2020	
INSURANCE EXCESS IN SINGAPORE : S\$ 500.00	
INSURANCE EXCESS IN MALAYSIA : S\$ 2,500.00	
MODE OF PAYMENT : CREDIT CARD   <u>CHEQUE</u>   CASH   OTHERS	
CHARGES	S\$
S\$ Per day x Days	
S\$ Per week x Weeks	
S\$ 1800 Per month x 36 Months	64800
Day/Wks/Mths CDW Ins. S\$ Per day/wks/mths	
Day/Wks/Mths PAI Ins. S\$ Per day/wks/mths	
DELIVERY CHARGES	
COLLECTION CHARGES	
SUB-TOTAL	64800
PETROL USED	
RECOVERY FOR DAMAGES	
OTHERS	
SUB-TOTAL	64800
GOODS & SERVICES TAX (GST) 7 %	4536
TOTAL AMOUNT PAYABLE	69336
PAYMENTS	
MONTHLY RENTAL PAYMENT ON THIS AGREEMENT	
DEPOSIT	1800.00
TOTAL AMOUNT PAID BY HIRER	
OPTION TO PURCHASE (IF APPLICABLE)	
OWNER'S PURCHASE PRICE	
OPTION TO PURCHASE PRICE	
SALESPERSON	
NAME :	KEN LEE
TEL :	96891621

I have read and agree to the terms and conditions on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature below will be considered to have been made on the charge/credit card voucher. All information I have given "Bizlink Rent-A-Car Pte Ltd" in connection with this agreement is true.

**24-HOUR ROADSIDE ASSISTANCE 9012 6616**

### PERSONAL DATA PROTECTION

The Hirer is aware that by signing the Agreement, the Owner will access and be in possession of personal data of the Hirer. By signing this Agreement, the Hirer consents to the use of such personal data as deemed necessary for the operation and effectiveness of this Agreement. The Owner agrees to such use of personal data as is reasonable for the purposes of this Agreement. The Personal Data Protection Policy of the Owner can be found on the Owner's website at [www.bizlinkgroup.com.sg](http://www.bizlinkgroup.com.sg).

### REMARKS

WITH DIPLOMATIC CLAUSE - 24 + 12 MTHS.

**No Uber/GrabCar use**  
**Full liability for any violations**

Acknowledgement of receipt of car

Hirer's Signature / Co's Stamp

18 Ubi Road 4. • #01-11 • Ubi Car Mall • Singapore 408616 • Tel: 6285 6616 • Fax: 6285 6626

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

