

## 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	02/08/2019 18:29
Date Of Accident	30/07/2019 21:00
Exact Location Of Accident	EUNOS AVENUE 3 TOWARDS EUNOS ROAD 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW2905L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MARIC CAR RENTAL PTE LTD
Co Reg No	201620648G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97634241
Alternative Phone No	OFFICE-97634241

### Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.6 LUX (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994148
Cover Note Number	

### Driver

Name of Driver	LEROY SELDON SUBRAMANIAM
NRIC No	S9302993C
Date Of Birth	30/01/1993
Occupation	OUTDOOR
Date Of Driving Pass	25/03/2015
Driving Experience	4 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97634241
Fax Number	
Contact Number	OTHERS-97634241
Email Address	NOEMAIL

Address	BLK 256D SUMANG WALK #15-661
Postcode	824256
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 - CROSS JUNCTION
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

PLEASE REFER TO 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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE814T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

### SKETCH PLAN

(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:

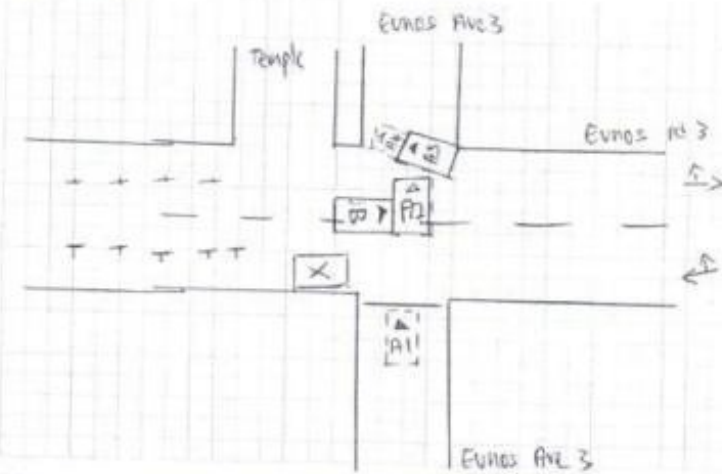
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
- (ii) for complying with requirements under any regulations, laws or court orders.



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

## Accident Sketch Plan

### SKETCH PLAN



V-A) 51V290SL

V.B) GIBESIT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle "A" 5JW2A05L was travelling on the stated venue. I was behind the stop line checking if there was any incoming vehicle before I proceed to go straight toward Juncos Ave 3. After checking both side clear, I proceed to move forward. There was a van parked at position X, hence I have to move forward while approaching the opposite lane, position A2. Suddenly I felt a huge impact on my vehicle rear, my vehicle then hit the kerb from position A3. It then move forward to position A4. I got down and speak to driver "A", he mention he could not stop as he was afraid the vehicles behind him would hit onto his rear. No one was injured. I wish to add that vehicle "B" was coming at very high speed rate, I believe he was talking to the passenger, he did not attempt to slow down or avoid this collision.

## 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: *Robert M...*  
NRIC/FIN No.:



# LETTER

## Maric Car Rental Pte Ltd

### VEHICLE LEASE AGREEMENT

Agreement Date: 19.7.2019

Referrer Name: Carousell

NRIC: \_\_\_\_\_

Car plate no.: \_\_\_\_\_

Company **Maric Car Rental Pte Ltd**

Having its registered office at:  
9 Tagore Lane #03-04, Singapore 787472  
(hereinafter known as "The Owner")

Rental Begins on: 19.7.2019

Time Out & Sign: 3.30pm *[Signature]*

Office No: 6452 4300

Office hour: 10 am - 7 pm

Date & Time In: \_\_\_\_\_

Signed by Staff: \_\_\_\_\_

Hirer's Name: Leroy Seldon Subramaniam IC: S9302993C *30 July Accident 11PM*

Address: AD1 BIK 256 D Srimang Walk # 15-661 S(824256)

(hereinafter known as "the Hirer")

hereby agrees that the Owner shall let and the Hirer shall take the vehicle described below or a replacement vehicle provided by the Owner (hereinafter known as "the Vehicle") upon the terms and conditions hereinafter appearing.

#### 1. DESCRIPTION OF VEHICLE

- a. Make & Model: Mazda 3
- b. Registration No: SJW 240SL
- c. Mileage: \_\_\_\_\_
- d. Contact No: 9763 4241
- e. Bank Account: \_\_\_\_\_
- f. Email: \_\_\_\_\_

*s/o - B3-04 (2day)*

2. RENTAL PERIOD: 3 month

3. DEPOSIT AMOUNT: \$470

4. FIRST WEEK RENTAL STARTS ON 25.7.2019 AMOUNT \$22857 (5day) *[Signature]*

5. RENTAL FEE: \$5320 per week *[Signature]*

a. Rental Fee includes the following items:

- i. Unlimited mileage;
- ii. Service and maintenance;
- iii. Road Tax and Radio License;
- iv. Motor Insurance Coverage (Excess applicable);
- v. 24-hours breakdown and emergency service (in Singapore only); and

<i>[Signature]</i>	<i>[Signature]</i>
Hirer's Initial	Owner's Initial

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



## Identification Card





Driving License

