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Owner / Driver: (11040	, 11.01	Tel:)	
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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 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.
- 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.

THE PARTY OF THE P	ACCIDENT STATEMENT	
Date Of Report	09/01/2020 18:42	
Date Of Accident	09/01/2020 10:00	
Exact Location Of Accident	SELETAR WEST LINK TWDS YIO CHU KANG RD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBJ4591H	
Insured/Policyholder		
Name Of Registered Owner	SKYLINK VEHICLE RENTAL PTE LTD	
Co Reg No	2XXXXX755G	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-81012498	
Alternative Phone No	OFFICE-81012498	
Vehicle Particulars		
Manufacturer	KIA	
Model	K2500 6MT	
Exact Purpose for which vehicle was being used at time of accident	t COMMERCIAL USE	
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	COMMERCIAL VEHICLE	
Insurance Company		
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	YES	
Policy Number	A29123065MKF	
Cover Note Number		
Driver		

OFFICE-81012498

NOEMAIL

Name of Driver KHAIRUL ANWAR SAHARI NRIC No SXXXX500A Date Of Birth 09/09/1986 Occupation OUTDOOR Date Of Driving Pass 05/04/2008 Driving Experience 11 YEARS AND 9 MONTHS Gender MALE Mobile Number (LOCAL) +65-81012498 Fax Number

Contact Number

EMail Address

Address

BLK 387 YISHUN RING ROAD

#04-1655

Postcode

760387

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

3

Insurance Company of Driver's Own Vehicle

- Ti

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?

YES

Was any injured conveyed to hospital by

NO

ambulance?

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

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

SJQ7184Z

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)

DETAILS OF INJURED PERSON 1

Name

KHAIRUL ANWAR SAHARI

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

BODY

GBJ4591H

YES

NO

the Development

Shape V. And Vertical

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- consent under the Personal Cata Protection Act (PDPA)

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- The literature state of the disclosure of the insurers and/or GA to their tests party service providers as agents; including the state of the short of may be stall possible of Singapore, for one or more of the above Purisional Conference of the short Purisional
- (4) The Personal information was a screen and used to compile claims distory for the purpose of fraunt detection exestigation and management in present and all fature claims.
- (b) The information superfection must fill allow may be shared a discussed
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for some angles to requirements under any regulations, laws or court orders

Policyholizer singilaries Dan & Timo

Oriver's Signature.
If driver is not the policyholde is liste & Time.

NAMES OF BUILD

SELE TAR WEST LANK TWOS YIU CHU KANG A-GBS 4591H B-5567184Z

Give my line Main Rond

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG SELETAR WEST LINK TOWARDS YIO CHU KANG. I STOP AT THE GIVE WAY LINE WAITING TO FILTER ONTO THE MAIN ROAD, AS THERE WERE ON COMING VEHICLE. MOMENTS LATER VEHICLE B REAR ENDED MY VEHICLE.

If We declar the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time:

Driver's Signature (if driver is not the policyholder)

Name: Date & Time:

NRIC / FIN No.:

Reporting Centre Personnel's Signature

Accident Reporting Draft

VEHICLE NO: GBJ4591H

MODEL: kia

DATE OF ACCIDENT	9/1/2020			
TIME OF ACCIDENT	1000 HRS AM/PM			
LOCATION OF ACCIDENT	SELETAR WEST LINK TOWARDS YIO CHU KAN			
EXACT PURPOSE USE DURING ACCIDENT	37.00			
NAME OF OWNER	SKYLINK VEHICLE RENTAL PTE LTD			
CONTACT NO.	81012498			
NRIC	201710755G			
CLAIM TYPE	OD / (HIRD PARTY) REPORTING ONLY 3P			
INSURANCE CO.	MSIG			
TYPE OF COVERAGE	COMPREHENSIVE/ THIRD PARTY/ THIRD PARTY FIRE & THEFT			
POLICY NO.	TANTY TIME PARTY FIRE & THEFT			
NAME OF DRIVER	AS ABOVE / IF NO: KHAIRUL ANWAR SAHARI			
NRIC	S8626500A ANY PASSENGER: 0			
DATE OF BIRTH	AINT PASSENGER: ()			
OCCUPATION	OUTDOOR / INDOOR			
DATE OF DRIVING PASS	OUTDOON / INDOON			
GENDER	MALE / FEMALE			
CONTACT NO.	81012498 OFFICE: HOME:			
ADDRESS	11011121			
DRIVER HAVE ANY OWN VEHICLE	21 TOH GUAN ROAD EAST #01-12 TOH GUAN CENTRE S(608609) NO/ IF YES: REG NO.			
RELATIONSHIP	EMPLOYEE OF NO:			
WEATHER CONDITION	CLEAR / RAINY/ OTHER: CLEAR			
ROAD SURFACE	/ Auditor Management Comment C			
ANY INJURIES	NO / IF YES:) DOWN			
CONTACT NO.	W W W			
POLICE REPORT	NO / IF YES:			
VIDEO RECORDING	NO / YES			
VEHICLE B NO.	SJQ7184Z ANY PASSENGER:			
NAME	ANT PASSENGER:			
CONTACT NO.				
VEHICLE C NO.	ANY PASSENGER:			
VEHICLE D NO.	ANY PASSENGER:			
VEHICLE E NO.	ANY PASSENGER: ANY PASSENGER:			
VEHICLE F NO.	ANY PASSENGER:			
ANY WITNESS	ANT TAJJENGEN.			
WITNESS CONTACT NO.				
PARTICULAR WORKSHOP				
MOBILE NO.	Duden			
CONTACT PERSON	Ryder Auto Pte Ltd			
AX NO.				
	2 Kaki Bukit Ave 2, #02-19/22 @ Kaki Bukit Auto Hub, Singapore 417921 Email: ryderautoworkshop@gmail.com Tel: 67418277 Fax: 67468277			



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre Z, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA) THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA) THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORÉ)

THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.400 Cars for Hire

COMMERCIAL VEHICLE - FLEET

Comprehensive

Certificate No. A 29123065 MKF

Excess: SGD2,000

1. Index Mark and Registration Number of Vehicle GBJ4591H

2. Name of Policyholder

Skylink Vehicle Rental Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act 24/04/2019

4. Date of Expiry of Insurance

23/04/2020

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

- * Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

Use for the carriage of passengers or goods in connection with the

Policyholder's business. Use for social domestic and pleasure purposes.

- 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.
- 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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer