

## 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	14/07/2020 12:51
Date Of Accident	20/05/2020 12:30
Exact Location Of Accident	FERNVALE STREET BLK 471 CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT3852C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GO-RENT PTE LTD
Co Reg No	2XXXXX747D
Email Address	XDETOX32@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92223331
Alternative Phone No	OFFICE-91154422

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSNA00000742000
Cover Note Number	

### Driver

Name of Driver	YAZID MUNIR SUNGKAR
NRIC No	SXXXX479D
Date Of Birth	12/04/1985
Occupation	OUTDOOR
Date Of Driving Pass	27/10/2012
Driving Experience	7 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92223331
Fax Number	
Contact Number	OTHERS-91154422
Email Address	XDETOX32@GMAIL.COM

Address	BLK 607 BEDOK RESEVOIR ROAD #02-824
Postcode	470607
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?	YES
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 AND POLICE REPORT T/20200714/7008

#### 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	SME6913X
Vehicle Make/Model/Colour	HONDA SHUTTLE
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	YAZID MUNIR SUNGKAR
------	---------------------

Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SKT3852C
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

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#### 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:  
NIC/PIN No.:

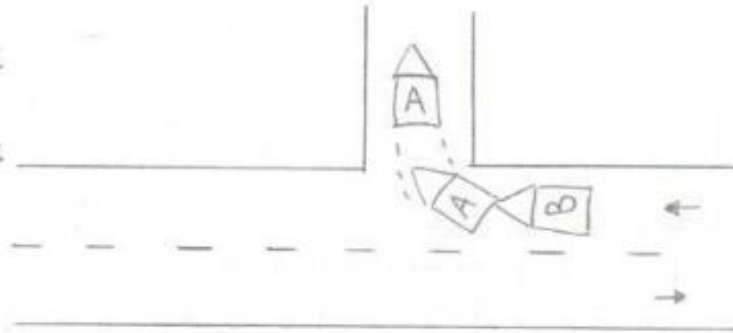


# Accident Sketch Plan

## SKETCH PLAN

A: SKT 3852C

B: SME 6913X



FERNVALE STREET BLK 471 CARPARK

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above stated date and time, my vehicle was park  
at Fernvale Street BLK 471 Carpark. I was making  
a reverse to exit ~~my~~ from my parking lot when vehicle  
B collided on to my vehicle rear portion.

POLICE REPORT T/20200714/7008.

## DECLARATION

(We declare the foregoing particulars are true in every respect)



Signature:  
Date & Time:

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

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

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200714/7008

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20200714/7008

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/07/2020 12:02		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: YAZID MUNIR SUNGKAR			Address: APT BLK 607 BEDOK RESERVOIR ROAD #02-624 SINGAPORE 470607		
ID Type / ID No.: NRIC NO / S8511479D			Contact No.: Home/Office:		Mobile: 91154422
Nationality: SINGAPORE CITIZEN			Email: yazidsungkar@rocketmail.com		
Sex: Male	Age: 35	Date of Birth: 12/04/1985	Type of Informant: Driver		
Race: Arab			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/05/2020 12:30	Type of Location: Car Park
Location:  FERNVALE LINK				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 20 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKT3852C	Car	VOLKSWAGO N	GOLF	Black	Slightly Damaged	0
SME6913X	Car	HONDA	SHUTTLE	Silver	Slightly Damaged	0

## Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200714/7008

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20200714/7008

### CONTINUATION OF REPORT

Driver			
Name	YAZID MUNIR SUNGKAR		ID No. S8511479D
Related Vehicle	SKT3852C (Car)		Contact No. 91154422
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury Slight

#### Brief Details.

ON THE ABOVE STATED DATE AND TIME , MY VEHICLE WAS PARK AT FERNVALE STREET BLK 471 CAR PARK .  
I WAS MAKING A REVERSE TO EXIT FROM MY PARKING LOT WHEN VEHICLE SME6913X COLLIDED ON TO MY VEHICLE REAR PORTION.  
I AM MAKING THIS REPORT FOR MEDICAL AND INSURANCE PURPOSES.



## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200714/7008

3 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20200714/7008

### CONTINUATION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
ONG YONG HOCK  
Contact No.: 65476436

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
14/07/2020 12:02

Classification Of Case:



# RANTAL AGREEMENT

Go-Rent Pte Ltd

Reg No. 201824747D

Office Address: 2 Venture Drive #14-28 Vision Exchange Singapore 608526

## AUTOMOBILE LEASE AGREEMENT

Agreement No.: SK001424

Agreement Date: 09.04.2020

Lessor	Go-Rent Pte Ltd	ROC No.	201824747D
Address	2 Venture Drive #14-28 Vision Exchange S(608526)	Office No.	6904 8608

Lessee	YAZID MUNIR <del>SONG</del> SUNGKAR	NRIC/LEN No.	SS511477D	Contact 1	91154432
Address	BLK 607 BEDOK RESIDUAL #02-570		S470607	Contact 2	
Email Address	yazidsungkar@rocketmail.com	Date Of Birth	12.04.1985	Contact 1	
Address				Contact 2	
Company				Occupation	
Co. Address					
Driving Pass Date	27.10.2012	Driving Class	3	D.O. Birth	

Co-Lessee / GTA		NRIC/LEN No.		Contact 1	
Address				Contact 2	
Named Driver 2		NRIC/LEN No.		Contact 1	
Company				Occupation	
Co. Address					
Driving Pass Date	COPIED EXCHANGES TILL 31-03-2020 @ 1000 DAILY	Driving Class		D.O. Birth	

### DESCRIPTION OF VEHICLE (Personal/Private Hire)

Registration No.	SKT 3852C	Colour	BLACK
Make / Model	VW GOLF	Chassis No.	AS PER RECORD
Reg. Date	** (New / Used) 03.06.2015	Engine No.	AS PER RECORD

### TERMS OF RENTAL PAYMENT & PERIOD 1 DAY PER DAY RENTAL

Leasing Period	1 MONTH	Deposit	\$500 TOP UP WEEKLY
Leasing Start Date	09.04.2020	1st Rental Fee	\$500 (RENTAL \$256 + DEPOSIT 24HR)
Leasing End Date	09.05.2020	Weekly Rental Fee	\$256
Termination Charge	AS PER CONTRACT	Weekly Rental Due on	EVERY 10TH BPM

ADMIN CHARGE \$150

APPLIES FOR AN STICKER

Page 1 of 7

\$500 PAYMENT

09.04.2020 1504HR

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



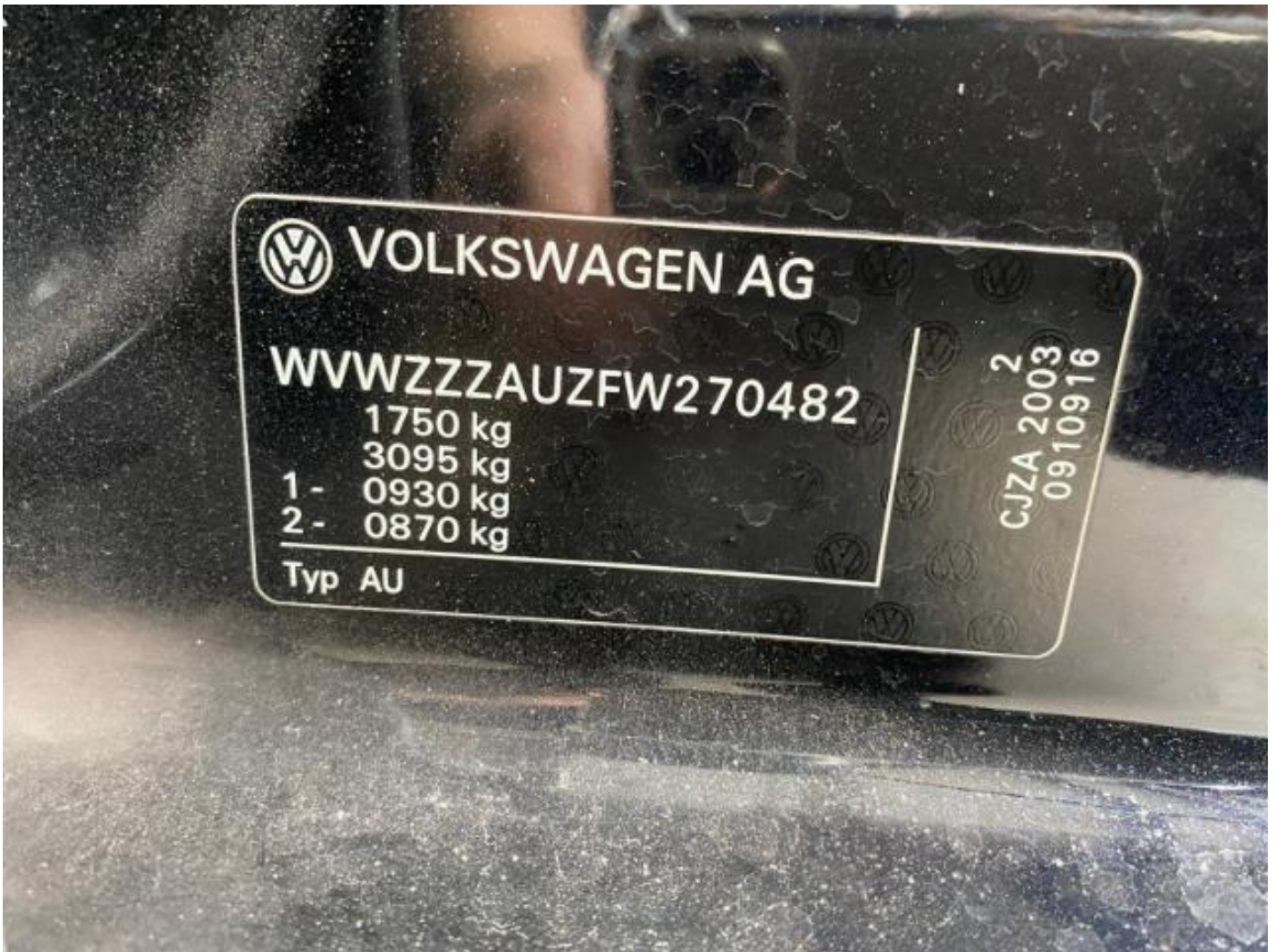


Accident Photo



Accident Photo







Accident Photo

