#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number EMail Address

- 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 <u>truthful and accurate</u> 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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	02/11/2020 14:14
Date Of Accident	30/10/2020 19:00
Exact Location Of Accident	TPE TWDS SLE EXIT TAMPINES AVE 7 & CHANGI VILLAGE
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJH707J
Insured/Policyholder	
Name Of Registered Owner	D.Z.G AUTO PTE LTD
Co Reg No	2XXXXX496E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81611940
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	PTE 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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5119002108
Cover Note Number	22/09/20 - 21/09/21
Driver	
Name of Driver	MUHAMMAD AZHAR MAWAQIF BIN RAZALI
NRIC No	SXXXX672B
Date Of Birth	08/04/1992
Occupation	OUTDOOR
Date Of Driving Pass	05/08/2011
Driving Experience	9 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86175875
Fax Number	

AZHAR.ALTIVO@GMAIL.COM

BLK 7 NORTH BRIDGE RD #06-4002 Address

Postcode

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?

Passenger 1

NO

NO

3

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NAME: : NUR HAYATY D/O AHMAD (MOTHER)

GENDER: : FEMALE

Passenger 2 NAME: : MOHD FIRDAUS BIN RAZALI (BROTHER)

> GENDER: : MALE

**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 ATTACH. \* THIRD PARTY CLAIM BY JWG INTERNATIONAL PTE LTD \*

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: DIRECT TO REPAIR WORKSHOP

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SDJ2277E Vehicle Registration Number

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 MUHAMMAD AZHAR MAWAQIF BIN RAZALI

Approximate Age

Injuries Sustain 2 DAYS MC Injured person in which vehicle? SJH707J

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

### **DETAILS OF INJURED PERSON 2**

Name NUR HAYATY D/O AHMAD

Approximate Age

Injuries Sustain 2 DAYS MC Injured person in which vehicle? SJH707J

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

### **DETAILS OF INJURED PERSON 3**

Name MOHD FIRDAUS BIN RAZALI

Approximate Age

Injuries Sustain 2 DAYS MC Injured person in which vehicle? SJH707J

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

#### Sketch Plan

# SKETCH PLAN

# IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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.
- 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:
  - 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:
  - 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

complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

LIEN

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

Date & Time:

Reporting Centre Personnel's Signature

02/11/20

Name: / (PMK) NRIC/FIN No.:

### Sketch Plan #2

		VALIDATE SJH2073
		Vehicles: SDJ>>77E
NED WAN		
ESCRIBE CIRCUMSTANCES O	F THE ACCIDENT	
no the eleted	date & time, I, vuhicle A (SOH	2027) was traulting along
ON THE STATEO	The second of th	change lane to the lane on
the left of 2 lanes.	I had signalled my intention to	charge tone to be
my right after exiti	ng TPE Loyang Exit.	
1 77		
I checked m	y rear view mirror and noti	ced that a rea car was all
trying to make the s	ame manoeuvre.	
Hence, I patie	utly waited for the red car to	pass and made sure
that there were no	oncoming traffic behind th	e red car before making
		,
a lane change to n	10.5	
c 11.1.	1:10 8 ( SDI22775) which	was behind me also
Suddenly, U	ehicle B (SDJ 2277E), which lane Change and swened as me and collided into the	and to the violat long
made the same	lane Change and swerred	uf to me right lane
at the same time	as me and collided into fi	he rear right portion of my
vehide.		
	<u></u>	
	#	
	t t	
DECLARATION PTE		,
We declare the deregathe partie	culars are true in every respect.	//
(0) 20202-196E (0)		/h 0x/11/20
0 0 1	V	
14.		
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name: (AWK)

#### RENTAL AGREEMENT



543 Ang Mo Kio Avenue 10 Cheng San Green S(560543) Tel: (81611940) (81578993) (81878899)

Reg No: 202025496E

### AGREEMENT FORM

NAME:	al house 1 Notes	Amico.C b	a Pozol:	N	RIC: \$92126	728
	7.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	MOBILE)	IN Kazan	(RESIDENCE)		
CONTINUE	8617 5875				SINGAPORE (190	007 )
ADDRESS	Blk 7 North Bridge that I will take over this sti	Road Act	4002 ne stated period and shi	all abide to the terr	ns and conditions as I	isted below,
Hereby declare	that I will take over this su	ited vehicle for c			Till	Time
Vehicle Registrati	on Model	Colour	From	Time	31007	
107938			12 / 10 / 2020	1330 HRS	12/11/2020	1330 HRS
STH707	3 Hordy Fit 13A	Blue	12 / 10 / 2020	1550		

Rate: \$ 300 Weekly (1 month) Deposit:\$ 100

- 1. The above vehicle is insured for use on Singapore roads only. As such using of this vehicle outside Singapore territory is strictly prohibited. Whilst the vehicle is in your possession and is driven in or outside of Singapore if applicable, you will be held fully responsible for any, but not limited to, vehicular accident, damages, lose, fire or theft caused to this vehicle.
- 2. The use of this vehicle during the period from the date of taking over until the termination date of this agreement will be under the full responsibility of the driver.
- 3. ONLY the driver above named/authorized may use the vehicle. In any circumstances another driver apart from the named/authorized driver found using the vehicle, the owner will have the right to repossess the vehicle stated above and arise while the driver will be held fully responsible for any, but not limited to, vehicular accident, damages, loss, fire or theft caused to this vehicle.
- 4. Should the vehicle be involved in any traffic offence during the period, you agreed to be liable for any issues with the vehicle that arise under your care and agree to pay all fines and any amount government or semi-government authorities shall levy or impose.
- 5. Upon claiming the vehicle's insurance which the driver stated above shall be liable to pay an excess of \$\$5,000/- NETT to the owner.
- 6. At any point of time if the vehicle breakdown due to driver's negligence, flat battery, tire puncture, empty petrol tank, loss of keys, keys locked in car or any other breakdown not due to vehicle maintenance or wear and tear, a nominal fee of \$\$50/- (from Weekdays 12PM to 8PM) and \$\$100/- (from 8PM to 12PM, Saturday and Sunday, PH 24Hours)
- 7. The maintenance of the vehicle will be borne by the owner. Driver must keep note of the vehicle engine temperature, any overheating due to Driver's negligence, repair and any misc cost shall be bourn by the driver. If there is any problem due to wear and tear or vehicle breakdown, the driver is to report to the owner immediately and seek for advice/permission before proceeding to fix the issue.

#### RENTAL AGREEMENT



543 Ang Mo Kio Avenue 10 Cheng San Green S(560543) Tel: (81611940) (81578993) (81878899)

Reg No: 202025496E

- 8. If the vehicle stated met with an accident, the driver is to inform the owner immediately. NO repairs are to be done without the owner's approval. If the driver is caught repairing the vehicle at any workshop unauthorized by the owner, the owner reserve the rights to repossess the vehicle with a \$\$5000/- compensation.
- 9. Any damage which includes physical damage or any other general damages to the vehicle, payment of repair cost has to be made immediately unless any other alternative arrangements is made.
- 10. DZG Auto Pte Ltd will not be responsible for loss of or damage to personal belongings and the contents therein (including any valuables, even if we have been advised) during storage or during the disposal process however caused and you hereby release DZG Auto Pte Ltd from any liability in respect thereof.
- payment of \$\$15.00/- NETT will be charged to the driver for every 10% of fuel used.
- 12. Vehicle is handed over clean and it should be returned clean. If vehicle is returned dirty, a nominal charged of S\$10.00/shall be collected.
- 13. NO Smoking, Durians and Transportation of Pets are allowed. Hirer is responsible for a penalty of \$\$500/-
- 14. NO speeding, Reckless Driving, Racing or ANY Illegal Activities shall be carried out during the use of this vehicle. The owner reserves the rights to repossess the vehicle with an additional S\$3000/- compensation and any other cost incurred (if any).
- 15. Should there be any breaches to any of the above clauses; the owner reserves the right to repossess the vehicle without any refund with a compensation of S\$3000/- imposed.

Agreed and acknowledged the above stated by Name: A2NOV MOWGGIF	0.2
NRIC: 592126728	
Signature:	agreement. I will not dispute to the claims made against me for any incident occurri

during the stated period and thus this agreement.

### **RENTAL AGREEMENT**

[Type here]

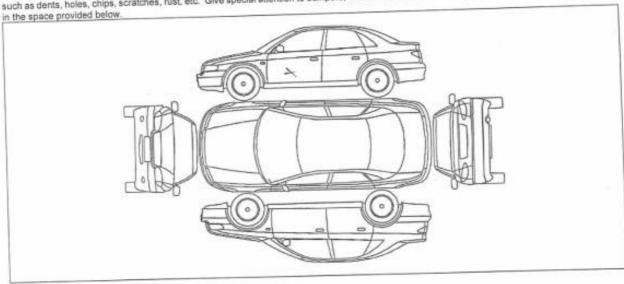
PHYSICAL DAMAGE INSPECTION / MECHANICAL STATEMENT REPORT



Hirer's Name: www.mand Ashar wavaget Raz	Hirer's Contact: \$6/7 5875
Vehicle Number: STH 707 T	Rental Replacement*
Vehicle Make / Model: Monda Fit 1.34	Rental Agreement No:
Mileage:	Date & Time: 12/10/2010
Petrol: Empty / Quarter Hail Three Quarter / Full*	Vehicle Color: Blue

# VEHICLE INFORMATION

FOR PHYSICAL DAMAGE COVERAGE, conduct a visual inspection of the vehicle and indicate on the illustration the areas where any damage exists, such as dents, holes, chips, scratches, rust, etc. Give special attention to bumpers, windshields and condition of paint. Describe any present damage



INTERIOR & EXTERIOR CHECK	<b>产品的一位的工作等的企业企业</b>	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	YES / NO
Spare Tyre / Rim	YES / NO	Emergency Signage	1637 NO
	YES / NO	Air Conditioner	YES / NO
Headlights Working	tts Working		YES / NO
Tail Lights Working	YES / NO	Audio Player Working	1E3 / NO

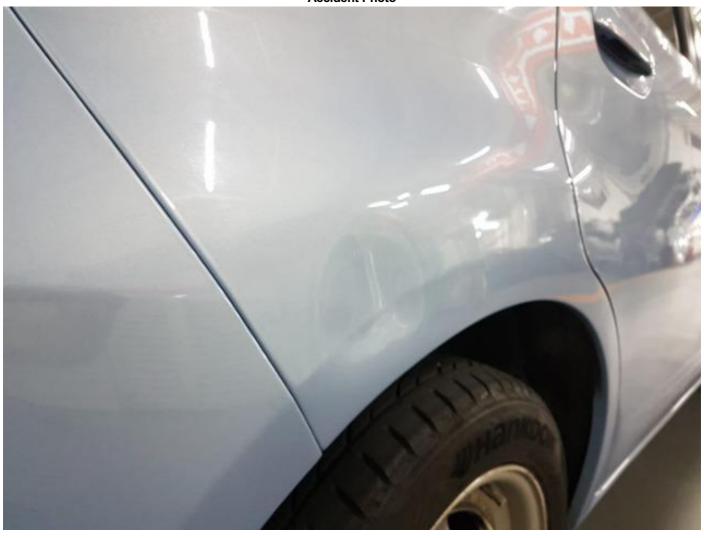
I acknowledged that the vehicle assessment was inspected by myse		D.Z.G Auto Staff	
Hirer			
Hirer' Name:	Muleymod Ashor mawage his Rardi	Checked Out by:	Dem
	ALLEGATION LAND HANDER ON THE PERSON	Signature:	11/1
Signature:	14)		16.9
Date:	12/10/2010	Date:	12/10/2000

Kindly remove all your cash & valuables from the vehicle when you return.

D.Z.G Auto reserves the right to dispose of personal items after the return or repossession of the vehicle and is not liable for any loss of cash, valuable items or any articles of importance from the vehicle.















### **CHASSIS**

