

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	12/11/2020 15:59
Date Of Accident	11/11/2020 11:10
Exact Location Of Accident	ALONG HAVELOCK ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR3405Y
Insured/Policyholder	
Name Of Registered Owner	1NSPIRED CONCEPT AUTO LEASING PTE LTD
Co Reg No	2XXXXX357K
Email Address	INSPIREDAUTOLEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98399993
Alternative Phone No	OFFICE-98399993

Vehicle Particulars

Manufacturer	TOYOTA
Model	NOAH HYBRID-1.8 X CVT (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5113397340-01
Cover Note Number	

Driver

Name of Driver	NG KIAN SOON, ALVIN (HUANG JIANSHUN, ALVIN)
NRIC No	SXXXX890E
Date Of Birth	17/07/1981
Occupation	OUTDOOR
Date Of Driving Pass	15/01/2007
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98399993
Fax Number	
Contact Number	OTHERS-98399993
Email Address	ALVINNG1707@GMAIL.COM

Address	BLK 56 CASSIA CRESCENT #14-17
Postcode	910567
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 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	SGY222L
Vehicle Make/Model/Colour	FERARRI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG WEE ONG (HUANG WEIHUANG)
NRIC/Passport Number	SXXXX433Z
Contact Number	90467246
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	NG KIAN SOON, ALVIN (HUANG JIANSHUN, ALVIN)
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Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	SMR3405Y
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: 12/11/20 12:37pm

Reporting Centre Personnel's Signature
Name: Koshli
NRIC/FIN No.: 12/11/2020

Accident Sketch Plan

SKETCH PLAN

ALONG HAVELOCK ROAD

A) SMR 3405Y
B) SKY 772L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I was travelling along Havelock Road at around 11.09pm
A Ferrari knock my car from behind when my car is stationary
waiting for the green light at the traffic light.

DECLARATION

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

Policyholder's Signature

Date & Time:

GLARMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 12/11/20 12:37pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

RENTAL AGREEMENT

INSPIRED CONCEPT AUTO LEASING PTE LTD

Agreement Date: 31-12-2019

AUTOMOBILE LEASE AGREEMENT

THE SCHEDULE

(Lessor)	Name: <u>INSPIRED CONCEPT AUTO LEASING PTE LTD</u> ROC No: <u>201927357K</u> Address: <u>24 LENG KEE ROAD, LENG KEE AUTOPOINT, #03-01 SINGAPORE 159096</u>
(Lessee)	Name: <u>NG KIAN SOON, ALVIN (HUANG JIANSHUN, ALVIN)</u> NRIC/PP/UED No: <u>S8120890E</u> Address: <u>BLK 178 EDGEFIELD PLAINS #17-232 SINGAPORE 820178</u>
(Guarantor)	Name: _____ NRIC/PP/UED No: _____ Address: _____
(Guarantor)	Name: _____ NRIC/PP/UED No: _____ Address: _____

DESCRIPTION OF VEHICLE ("Vehicle")

MAKE/MODEL & DISTRIBUTOR OF VEHICLE	COLOUR	REGISTRATION NO.
1. Make/Model : <u>TOYOTA NOAH HYBRID 1.8X CVT</u>	<u>BLACK</u>	<u>SMR3405Y</u>
2. Chassis No : <u>ZWR800411717</u>		
3. Engine No : <u>2ZR2F21618</u>		
4. Distributor : <u>INSPIRED CONCEPT AUTO LEASING PTE LTD</u>		

TERMS OF RENTAL PAYMENT

1. Commencement Date: <u>31-12-2019</u>
2. Period of Lease: From <u>01-01-2020</u> to <u>31-12-2025</u> (<u>72</u> months) ("Lease Period").
3. Initial Payment of SGD\$ _____ ("Initial Payment") and thereafter <u>DAILY</u> Lease of SGD\$ <u>109</u> each ("Rental"), due on the every last Friday of the week (payable in advance) ("Due Date").
4. Security Deposit: SGD\$ <u>800</u>

Upon 3 rd Year Completion	Choose <u>one</u> from the option : 1. Continue the Lease with no Rebate <input type="checkbox"/> 2. Take back \$5 per day Rebate & end the contract* <input type="checkbox"/>
Complete Full 6 Years	Fully Own the Vehicle with 'ZERO' Loan without taking any \$5 per day rebate

*(eg. 365 Days x 3 years x \$5 = \$5,475)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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