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.	
	ACCIDENT STATEMENT
Date Of Report	16/11/2020 12:08
Date Of Accident	15/11/2020 10:10
Exact Location Of Accident	CTE TWDS CITY B4 EXIT 7D
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLX7151H
Insured/Policyholder	
Name Of Registered Owner	LAY AUTO LEASING PTE LTD
Co Reg No	2XXXXX521C
Email Address	JOEL@LAYAUTO.COM
Mobile Phone No	
Alternative Phone No	OFFICE-87973443
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSNA00001672000
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD ALHASYIR BIN ZAKARIA

SXXXX389F NRIC No Date Of Birth 07/03/1986 Occupation **OUTDOOR Date Of Driving Pass** 21/02/2013

Driving Experience 7 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84484472

Fax Number **Contact Number**

EMail Address NOEMAIL

BLK 701 YISHUN AVE 5 Address

#08-310

Postcode 760701

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

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

ambulance?

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

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMQ6072J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver CHAN MEI FONG SXXXX177C NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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Accident Sketch Plan

SKETCH PLAN

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- 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

(ii) for complying with requirements under any regulations, laws or court orders.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement

CIE TWOS CITY BY EXIT 70 SKETCH PLAN HIZITXE: A B: 5ma 6072 DESCRIBE CIRCUMSTANCES OF THE ACCIDENT I am the driver of Honda Shuttle Hybrid SLX 7151 H, named MUHAMMAD ALMASTIR BIN ZAFAKIA, S8605389 F. I was driving along the Central Expressivary towards City what on lane 2 when vehicle Honda FIT SMQ 6072 J driven by Monn Chan Wei Fong abruptly jam both braked which regulted me not being able to Brake in time to avoid Collision. Collision happened at approximate 1010 hrs on the central expressiony towards city just before Exit 70 Balestier Poly 10 Rd. Based on visual assessment of myself, no one was injured moun Chan Wei Fong Claimed she had to butte sudden brake due to a heavy traffic Infront of her. We left the scene at approximate 104 Shrs to 1100hrs after exchanging details. DECLARATION Reporting Centre Personnel's Signature Dover's Signature Policyholder

(If driver is not the policyholder)

Date & Time:

NRIC/FIN No.:

Date & Time



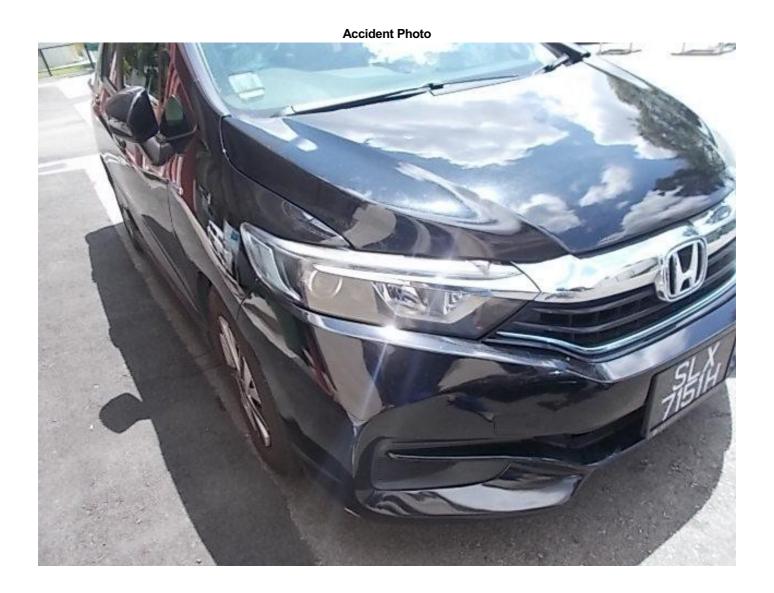
























LAY AUTO LEASING PTE LTD

Rental Agreement Number: LASAOPEA
This agreement is made on (Date) 19 8 30 between (Name) LAY AUTO LEASING PTE LTD
(Registration No.) 201310521C a company incorporated in Singapore with its
registered officer at21_TOH_GUAN_ROAD_EAST_#01-16/17_TOH_GUAN_CENTRE_5508605
(hereinafter called the "OWNER") which expression shall where the contest so admits, include the
successoria) in tale and Ownammed Alhasyir Bin Zakaria after
called the "HIRER") in respect of the hire of the motor vehicle ("THE VEHICLE") for the period ("THE PERIOD") at the rate of the hire rental ("THE RENTAL") set out in the schedule of this agreement ("THE
SCHEDULE") and upon the terms and conditions stated hereunder.
SCHEDULE OF AGREEMENT
I. PARTICULARS OF THE VEHICLE Shuffle Hybrich
a. Masse/Model : FOX D
b. Registration Number : SLX 7151 H
c. Chassis Number As Dev LOS Card:
C. Engine number
2. COMMENCEMENT
8. Effective Date : 29 - 8 - 30
b. Expiry 068 2 2 2 2 3 - 21
3. HIRE RENTAL
a. Security Deposit : 415001 -
b. Daily Hire Rates : \$4 601 -
c. Additional Charges : Ni \
4. DRIVERS
1st Driver
Name ": Muhammed Alhaevir Bin Zakaria
DOB 17-3-1586
IKENSE No. : 58605389 F
Contact No. : 84484472. 1/
SIGNATORY OF HIRER: