

# 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 Submission .....	09/02/2021 17:09 (SGT)
Date of Accident .....	08/02/2021 00:19 (SGT)
Exact Location of Accident .....	Keong Saik Rd., Singapore
Additional Location Information .....	KRETA AYER
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMA2144X
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	SUNRITA PRIVATE LIMITED
Company Reg No .....	1XXXXX361G
Email Address .....	zhiyangyap@gmail.com
Mobile Phone No .....	(Phone) +65-90998910
Alternative Phone No .....	+65-90998910

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	C-hr
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Employment
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Reporting only
Vehicle Category .....	Private hire

### INSURANCE COMPANY

Name of Insurance Company .....	NTUC
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	5110111062-01
Cover Note Number .....	-

### DRIVER

Name of Driver .....	YAP ZHIYANG
NRIC No .....	SXXXX835E
Date Of Birth .....	21/04/1988
Occupation .....	Outdoor

Date Of Driving Pass .....	31/12/2009
Driving experience .....	11 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90998910
Alt. Phone Number .....	-
Email Address .....	zhiyangyap@gmail.com
Address .....	BLK 441B BUKIT BATOK WEST AVENUE 8 #13-913
Address complement .....	-
Postcode .....	652441
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident .....	Collision - Major/Minor Rd
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
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 .....	SLL1842A
Vehicle Manufacturer .....	Mitsubishi
Vehicle Model .....	Evo
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	DAVID LIM
NRIC No .....	SXXXX543H
Contact Number .....	(Phone) +65-91502295
Address .....	-
Address complement .....	-
Postcode .....	-

Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	4




Describe Circumstances of the Accident

ON 08/02/2021 AT ABOUT 00:19 HRS I WAS AT KEONG SAK ROAD JUNCTION OF KREKA AYER. AT THE JUNCTION I SAW ON MY LEFT THERE WAS ON COMING VEHICLE WHICH WAS AT A DISTANCE SO I PROCEEDED. WHILE I WAS GOING HALFWAY THEN, I SAW CAR (B) WAS VERY CLOSE AND VERY FAST. I TRY TO SPEED UP, BUT STILL CANNOT CAR (B) STILL BRUSH AGAINST MY CAR (A) REAR PORTION. WE EXCHANGE PARTICULAR & MOVE ON.

Declaration

We declare the foregoing particulars are true in every respect.

X   
Policyholder's Signature / Date & Time

 09/02/2021 16:08  
Driver's Signature (If driver is not the policyholder) / Date & Time

 09/02/2021  
Witnessed by Reporting Centre Personnel































HYBRID VEHICLES SINGAPORE PTE LTD  
 24 LENG KEE ROAD, #03-04/05  
 SINGAPORE 159096  
 TEL- 6250 7887, FAX-6250 7997  
 COMPANY REGISTRATION NO: 201712402Z  
 EMAIL: [hvsi.gapore@mail.com](mailto:hvsi.gapore@mail.com)

This is an agreement between **Hybrid Vehicles Singapore Pte Ltd** (hereafter known as "The Company") **YAP ZHIYANG** NRIC NO.:S8814835E, residing 405 Jurong West Street 42 #06-609 S640405 (thereafter known as "The Driver") dated on 5.April.2018.

Details of vehicle: Toyota CHR Hybrid S 1.8 A (Brand New Car)

**Particulars of Driver**

Name : YAP ZHIYANG  
 NRIC No : S8814835E  
 DOB : 21-04-1988  
 Address : Blk 405 Jurong West Street 42 #06-609 S640405  
 Mobile : 9099 8910

Deposit amount and Contract Period: SGD1,500/- Deposit. \$500 on 7April 2018 and the Remaining \$1,675 upon Collection of Vehicle, S\$675/week for 260 weeks.

**Terms and Conditions:**

1. The vehicle is loaned in exchange for a daily jobs assignment as per stated on the company's arrangement. If the driver is unable to fulfill the daily jobs, the driver is to reimburse the company \$90/- per day for the use of vehicle. All reimbursements against the vehicle must be paid to the company by every end of the week, i.e. Monday. In the event of failure to pay on time, the company reserves the right to collect/repossess the vehicle for alternative deployment.
2. Notification must be given to the company 30 minutes in advance if the driver is unable to fulfill any of the 2 assigned jobs. IF APPLICABLE
3. Any extra job (trips or hours) will be paid at a rate of \$90 per trip or per hour. All extra jobs done will be submitted every Friday weekly for payment to be made the following Monday. The driver must submit acknowledgment forms duly signed by the customers promptly to the company to avoid delay for the payments date, i.e. Saturday – Friday. IF APPLICABLE
4. In the event that there are no daily jobs available, the driver may continue to use the vehicle at a rental fees of S\$90/- per day. Should the company require the driver's service, driver's should prioritize service to company. IF APPLICABLE
5. Driver also is responsible for all related vehicle matters (maintenance, repair, and fines etc). Only 5 years insurance and road tax is free up to maximum paid out of S\$4,000/ year), any amount more than S\$4,000 is payable by the driver.
6. Driver will need to check all related summons and fines on a weekly basis. The Driver will need to clear all fines one week before due date. In the event that driver fails to pay the fine, company will pay on his behalf and claim from driver with an additional of \$10/- admin charge.



HYBRID VEHICLES SINGAPORE PTE LTD  
24 LENG KEE ROAD, #03-04/05  
SINGAPORE 159096  
TEL- 6250 7887, FAX-6250 7997  
COMPANY REGISTRATION NO: 201712402Z  
EMAIL: [hvsingapore@mail.com](mailto:hvsingapore@mail.com)

CUSTOMER NAME : HYBRID VEHICLES SINGAPORE PTE LTD  
NRIC. : S8814835E  
HP. : 9099 8910

This is an official receipt that we hereby received the balance deposit including the 1st week rental of \$1,630 from the above customer.

Vehicle: SMA2144X  
Chassis no. : ZYX102118974

  
Sales Consultant  
Name: Julie Ana  
Hp: 8809 0293

  
Customer Name:  
NRIC: S8814835E