# **AUTO BULLOX PTE LTD**

53 Ubi Avenue 1#01-25 Paya Ubi Industrial Park Singapore 408934
Tel: 6844 4290 Fax: 6841 6043 HP: 9769 9299 Email: motoricarzgarage@gmail.com

Register No.: 201919765N

Date: 15/03/2021

By Fax & Email

Fax: 6224 4174

Email: motorclaim@iii.com.sg

India International Insurance

64 Cecil Street, #04-05, IOB Building, Singapore 049711.

Dear Sirs.

# ACCIDENT INVOLVING VEHICLES SMP8482B AND SFM668J ON 13/03/2021.

We are instructed by SUPER STAR LIMO & CAR RENTAL (UEN: 53359119L) to notify you of a road traffic accident on 13/03/2021 at about 23:15 HRS at Mandai Road involving our customer's vehicle registration number SMP8482B and vehicle registration number SFM668J drive by you at the material time. A copy of the Singapore accident statement/traffic police report filed is enclosed.

As a result of the accident, our client's/customer's vehicle has been damaged. Before our client/ we proceed to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client/we shall proceed to repair the vehicle without further reference to you.

Yours faithfully,

Dr.

Auto Bullox Pte Ltd

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
- 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 Submission 15/03/2021 12:19 (SGT) Date of Accident 13/03/2021 23:15 (SGT) **Exact Location of Accident** Mandai Rd, Singapore Additional Location Information

Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Private hire

Vehicle Registration Number SMP8482B

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner SUPER STAR LIMO & CAR RENTAL

Company Reg No 5XXXX119L

**Email Address** superstarlimosg@gmail.com Mobile Phone No (Phone) +65-96233308

Alternative Phone No +65-96233308

VEHICLE PARTICULARS

Manufacturer Toyota Model Noah

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle?

Vehicle Category Private hire

**INSURANCE COMPANY** 

Name of Insurance Company Tokio Marine Type of Coverage

Comprehensive Fleet Policy No

Policy Number MR002371 Cover Note Number

DRIVER

Name of Driver ILZAM BIN SAMSUDIN NRIC No SXXXX354E Date Of Birth 06/10/1966 Occupation Outdoor

Accident report SN09213F0008

Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Weather Conditions
Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT: T/20210314/2009

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

29/10/1996

#11-129

730418

Side Swipe

Clear

Dry

No

No

Yes

1

No

Yes

No

Woodlands West Neighbourhood Police Centre

1 Woodlands St 12 Singapore 738622

(Phone) +65-18003639999

(Fax) +65-63640997

2

No

No

Hirer

24 YEARS AND 5 MONTHS

(Phone) +65-98519518

VIRUZZ97@GMAIL.COM

BLK 418 WOODLANDS STREET 41

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

NRIC No

SFM668J

-

-

-

Private car

CHAN GUOWEI, DARIAN

SXXXX778B

Accident report SN09213F0008

Page 2 of 21

Contact Number	(Phone) +65-97382866
Address	-
Address complement	-
Postcode	
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

### SKETCH PLAN

# IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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.
- 6. 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.
- 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 aforegoid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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 hourers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

SUPER STAR LIMO & CAR RENTAL

Reg. No.: 533591191

Policyholder's Signature / Date & Time

Driver's Signature (# driver is not the policyholder) / Date
& Time

Sketch Plan

A SMESSER BOOK

A SMESSER BOOK

A SMESSER BOOK

B Time

Driver's Signature (# driver is not the policyholder) / Date
& Time

Driver's Signature (# driver is not the policyholder) / Date

Witnessed by Reporting Centre
Personnel

A SMESSER BOOK

A SMESSER BOOK

B Time

Driver's Signature (# driver is not the policyholder) / Date

Witnessed by Reporting Centre
Personnel

Describe Circumstances of the Accident

The state of the s		
		44
1		
Section 1994		
	, , , , , , , , , , , , , , , , , , , ,	
Declaration		
tWe declare the foregoing particular	re are trus in every respect	
The access of the considered baracters	a sita sian ai asur ji shapuut.	
SUPER STAR LIMO & CAR RENTAL		
Reg. No.: 53359119L	The state of the s	r)
0 22221121	Tan. 15/03/2	
	13/03/3	21 ofym 15/03/21
Policyholder's Signature / Date &	Driver's Signature (# driver is not the policyholder) / D	
Time	& Time	Personnel
	TO ATTEN	K THE RESPONSE VALUE

the police report: 7/2021031x/2009



T/20210314/2009

11202100178

Police Station Of Origin: Woodlands West N.P.C.

1 Woodlands Street 12 SINGAPORE 738622

Tel No: 1800-363 9999

CONTINUATION OF REPORT

2 of 4 Report No. T/20210314/2009

Details of Perso	n Involved				
Any Pedestrian In	rvolved: No		*		
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA			
Driver	<b>这种证明的</b>				
Name	CHAN GUOWEI, DARIAN		ID No.	S9049778B	
Related Vehicle	SFM668J (Car)		Contact No	97382866	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NII Date Disc		harge NIL		
No. of Days granted Medical Leave NIL		Degree of I	Degree of Injury NIL		
Driver					
Name	ILZAM BIN SAMSUDIN		ID No.	S1772354E	
Related Vehicle	SMP8482B (Car)		Contact No	98519518	
Hospital/Clinic	NIL		Class of Driving Licence & Explry Date	Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	NIL	Date Disch	arge NIL		
No. of Days gran	ted Medical Leave NIL	Degree of I	njury NIL		

#### **Brief Details**

On the 13/3/2021 at about 2313hrs, I was proceeding to Singapore Zoo to pick up a passenger from Woodlands Road. As I was driving, I came upon a traffic light which was still green and still proceeded on while going at speed limit of the road when a car "SFM668J" suddenly made a right turn towards BKE from the opposite direction without checking for any oncoming vehicles. I quickly made a emergency brake and swerved to the right to prevent collision but was not able to stop in time and a collision occurred. My vehicle stayed on the middle of the junction while the other car moved and waited at the side. Since, I was on the middle of the road I had to make a U turn and come back.

Upon coming back to the location where the accident occurred, I realized that the car was not around so I quickly went to drive along BKE towards SLE and spotted the car. I went close to the car to signal him to stop along the road shoulder. The driver informed that he thought that it was a hit and run and left but I informed him that I needed to make a U turn as I was in the middle and didn't want to obstruct traffic. We both made assessment to our vehicles, the damages my car sustained was my front left bumper was heavily dented which is almost touching the tire and the passenger seat door is unable to be fully opened. The other car only sustained minor scratches but unsure if there were any other damages as it was dark. Both of us exchanged particulars and we both agreed to lodge a police report and to inform our insurance agencies regarding this incident.

I wish to inform that no one was injured and no government property was affected.



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

15 Mar 2021 / 13:10:47

Receipt Date/Time:

15 Mar 2021 / 13:10:37

# Tax Invoice/Receipt

Receipt No.: ITNET-00000-210315-001945

Previous Receipt No.:

Trottodo Hodolpe Horr				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SFM668J As at 13 Mar 2021/23:15:00 Insurance Co: INDIA INT'L INS PTE LTD  1 Insurance Enquiry - SFM668J Enquiry Fee 20210315130811432396		7.00	0.49	7.49
20210313130011432350	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	552038XXXXXX7566	eNETS	eNETS Credit Card	
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

# THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.