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.

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 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 10/05/2021 12:27 (SGT) Date of Accident 06/05/2021 12:50 (SGT) Exact Location of Accident MacPherson Rd, Singapore Additional Location Information **TOWARDS AIRPORT ROAD** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Auto 1799

No - Claiming third party

Commercial vehicle

Vehicle Registration Number SKC1223X

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner VITESSE AUTO PTE LTD Company Reg No 2XXXXX680R

Email Address sky11_sky11@yahoo.com.sg Mobile Phone No (Phone) +65-90611109

Alternative Phone No +65-90738918

VEHICLE PARTICULARS

Manufacturer Honda Model Stream Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Type of Coverage Comprehensive

Fleet Policy

Policy Number DMHCSNW00004602000

Cover Note Number

DRIVER

Name of Driver WELSON SEET CHEE KEONG (XUE ZHIQIANG) NRIC No SXXXX856D

Accident report SN08215A0002

Date Of Birth 17/04/1977 Occupation Outdoor Date Of Driving Pass 23/10/1997 Driving experience 23 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-90738918 Alt. Phone Number Email Address sky11_sky11@yahoo.com.sg Address BLK 194 RIVERVALE DRIVE #09-767 Address complement Postcode 540197 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 - Change/cross lane Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name **FRIEND** Gender Male 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 (TYPE OF COLLISION IS HEAD TO SIDE) ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident WITH OWNER Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SMM7730H Vehicle Manufacturer Subaru

Vehicle Variant
Vehicle Colour

Vehicle Model

Vehicle Category	Private car
Name of Driver	-
Contact Number	_
Address	_
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	WELSON SEET CHEE KEONG (XUE ZHIQIANG) SLIGHT INJURY SKC1223X Yes No
INJURED 2	
Name of injured person Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	UNKNOWN SLIGHT INJURY SKC1223X Yes No

SKETCH PLAN

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- 8. Consent under the Personal Data Protection Act (PDPA)

l 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
- (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.

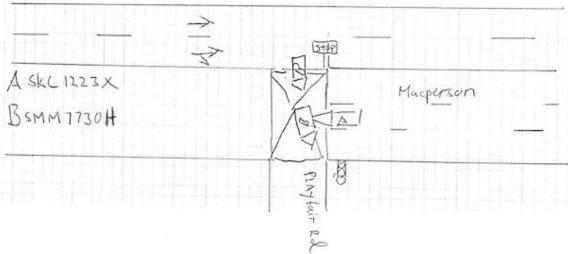


Policyholder's Signature / Date &

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

Witnessed by Reporting Personnel

Sketch Plan



Describe Circumstances of the Accident
was driving straight on Macperson Rol on the 3 lung traffic at the secound lane the traffic light is green so I drive pass suddenly rechicle R on the other side which have to stop at the stop line but he never stop, he two right into playfair Rol and collided onto my Car hup to the strenght impact my car front budly during land my car air-bug hush
which have to stop at the stop line but he never stop, he two right into playfair Rd and collided onto my Car he
my car air-bug hish my car front budly during fund

Declaration

We declare the foregoing particulars are true in every respect.

AUTO OF THE STREET OF THE STRE

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel











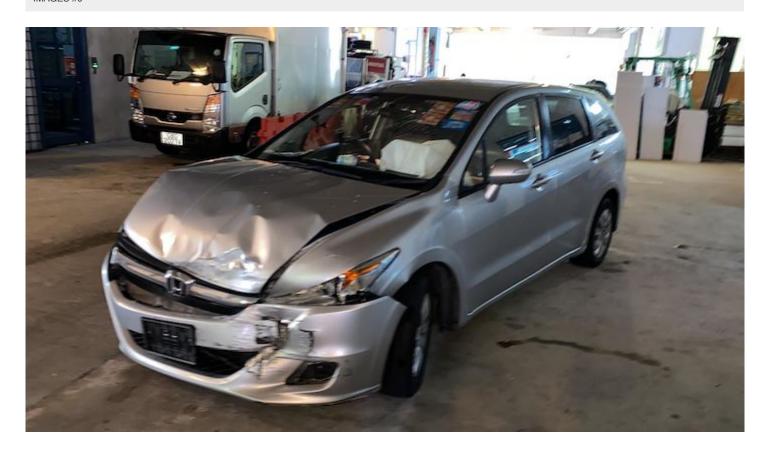












VITESSE AUTO PTE LTD

UEN No.; 201912680R Email: vitesseauto2019@gmail.com

VEHICLE LEASE AGREEMENT

Name of Hirer	:	Welson Seet Chee Keong	NRIC No./ Passport No.	\$7710856D
Address		194 Rivervale Drive #09-767 S(540194)		

(hereinafter known as "the Hirer")

hereby agrees that the Owner shall let and the. Hirer shall take the vehicle described below or a replacement vehicle provided by the Owner (hereinafter known as "the Vehicle") upon the terms and conditions hereinafter appearing.

VEHICLE DETAILS:

Make & Model	:	Honda Stream 1.8	
Registration No	:	SKC1223X	
Mileage	:	170543	

RENTAL PERIOD	07 Months 22days
Note: ½ day rental: 4 to 8hrs; 1	ay rental: 8hrs and above

FIRST WEEK RENTAL START DATE	:	01 Jan 2021	
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DEPOSIT AMOUNT	:	Nil	
RENTAL FEE (SS)	:	\$70.00 per day / \$490.00 per week	

- a. Rental Fee includes the following items:
 - i. Unlimited mileage:
 - ii. Service and maintenance;
 - iii. Road Tax and Radio License;
 - iv. Motor Insurance Coverage (Excess applicable)
 - v. 24 hours breakdown and emergency services (in Singapore only)
- b. Rental Fee is at a nett price.
- c. Agreement is based on weekly payment. All payment must be received on every Thursday before 6pm (Singapore time). Failure to do so, without prejudice to the Owner's other right* the Hirer shall be liable to an administrative fee of \$\$50.00 plus 2% late interest payment (computed on a monthly basis) if the Rental Fee or other payment remain unpaid after becoming due. In the event that the Rental Fee remains unpaid for more than THREE (03) calendar days, the Owner may lodge a police report of loss of the Vehicle and activate the vehicle repossession team to retrieve the Vehicle. The cost of repossession will be charged to. the Hirer.

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