

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 17/05/2021 18:04 (SGT)
Date of Accident 14/05/2021 09:00 (SGT)
Exact Location of Accident Penjuru Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YP3039P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SKYLINK VEHICLE RENTAL PTE LTD
Company Reg No 201710755G
Email Address charles@skylinkauto.com.sg
Mobile Phone No (Phone) +65-62665858
Alternative Phone No (Office) +65-62665858

VEHICLE PARTICULARS

Manufacturer Isuzu
Model NMR85UH5A
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 - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2999

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number DMCVSNA00049832100
Cover Note Number -

DRIVER

Name of Driver MUHAMMAD NAJMI BIN MOHD SRIP
Work Permit No G2967374N

Date Of Birth	09/08/1993
Occupation	Outdoor
Date Of Driving Pass	28/05/2018
Driving experience	3 YEARS
Gender	Male
Mobile Number	(Phone) +65-88072065
Alt. Phone Number	-
Email Address	charles@skylinkauto.com.sg
Address	430B YISHUN AVE 11 #11-406
Address complement	-
Postcode	762430
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 - Change/cross lane
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?	Yes
Police Station Name	Changi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005872999
Alt. Police Station Phone No	(Fax) +65-65872900
Police Station Address	9 Simei Street 2 Singapore 529914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

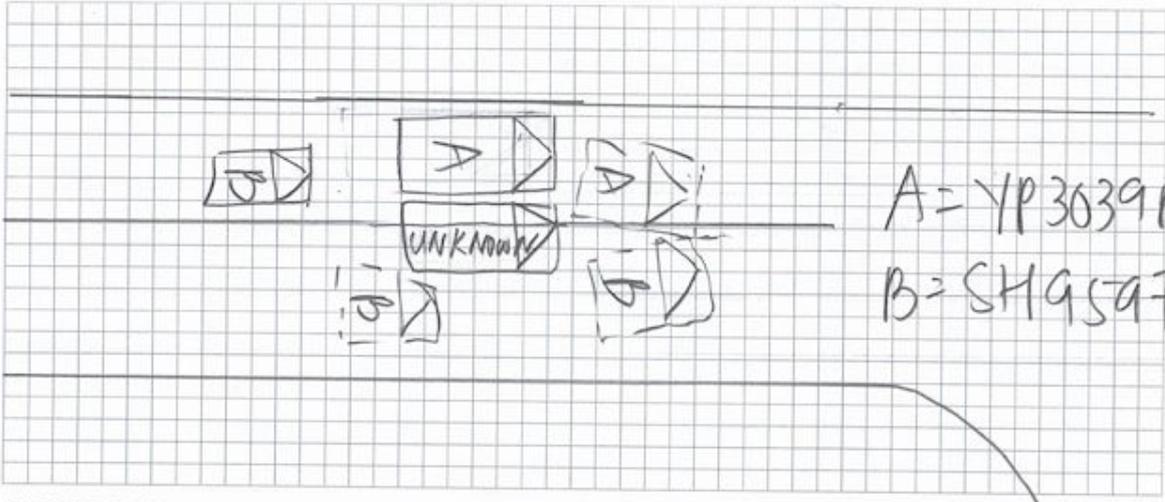
Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH9597T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

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) -

SKETCH PLAN



A = YP3039P
B = SH9597T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

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:

 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



Motor Commercial

MZ407/C

N SN

AND478A

Cov. Type:F

CERTIFICATE OF INSURANCE
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysia)

CERTIFICATE No.	DMCVSNAD0049832100	Engine No.: 4JJ12N5483	
		Cha. No.: JAAANMR85HG7101690	
1. Index Mark and Registration Number of Vehicle	YP3039P		
2. Name of Policy Holder	SKYLINK VEHICLE RENTAL PTE LTD		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	23/04/2021 (00:00:00)	Excess Sect. I.	S\$2,000.00
		Excess Sect. II	S\$2,000.00
4. Date of Expiry of Insurance	22/04/2022	EX ON WINDSCREEN .	S\$100.00
5. Persons or Classes of Persons entitled to drive*			
Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.			
6. Limitations as to use**			
(1) Use in connection with the Policyholder's business and Hirer's Business.			
(2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business and Hirer's Business.			
(3) Use for social, domestic or pleasure purpose.			
The policy does not cover:			
(1) Use for racing, pace-making, reliability trial or speed-testing.			
(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.			
(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.			

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse.

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Lim Lee Choo
Authorised Officer

Authorised Signatory





















**SINGAPORE
POLICE FORCE**



T/20210515/2017

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

1 of 3

Report No. T/20210515/2017

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/05/2021 08:32	Vide Report No.:	Station Diary No.: 13
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Informant's Particulars

Name of Informant: MUHAMMAD NAJMI BIN MOHD SRIP		Address: APT BLK 430B Yishun Ave 11 #11-406 orchid spring SINGAPORE 762430	
ID Type / ID No.: FIN NO / G2967374N		Contact No.: Home/Office: Mobile: 88072065	
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 27	Date of Birth: 09/08/1993	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 14/05/2021 09:00	Type of Location: Straight Road
Location: PENJURU ROAD			
Weather: Clear		Road Surface: Dry	Road Speed Limit: 40 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SH9597T	Taxi				Slightly Damaged	0
YP3039P	Lorry				No Damage	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210515/2017

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20210515/2017

CONTINUATION OF REPORT

Driver			
Name	MUHAMMAD NAJMI BIN MOHD SRIP	ID No.	G2967374N
Related Vehicle	NIL	Contact No.	88072065
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date, day and time, I was along Penjuru Rd. The lorry I was driving was initially blocked. There was another lorry beside behind me, blocking some of my view. Before moving off, I checked behind and from my view, the road was clear. However, as I moved off, the above mentioned taxi came from behind the lorry. Due to the speed, I was unable to react in time and we hit each other. There were no injuries observed on either parties. I am lodging this report as advised my supervisor.



**SINGAPORE
POLICE FORCE**



T/20210515/2017

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20210515/2017

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sgt 2 MUHAMMAD AMIN BIN ABDUL HALIM <i>Amin</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2021 08:32
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	<div style="border: 1px solid blue; padding: 5px;">  <p style="text-align: center;">SIGNATURE</p> </div>