

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	29/06/2021 09:40 (SGT)
Date of Accident	28/06/2021 14:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	EXIT TOWARDS EUNOS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR1424S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE. LTD.
Company Reg No	1XXXXX399N
Email Address	charmtsw@yahoo.com.sg
Mobile Phone No	(Phone) +65-98556612
Alternative Phone No	+65-98556612

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	-
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1395

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ20-005022
Cover Note Number	-

DRIVER

Name of Driver	CHARM THIRI SOE WIN
NRIC No	SXXXX709D

Date Of Birth	24/10/1983
Occupation	Indoor
Date Of Driving Pass	17/09/2007
Driving experience	13 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98556612
Alt. Phone Number	-
Email Address	charmtsw@yahoo.com.sg
Address	32 KEPPEL BAY DRIVE #05-58
Address complement	-
Postcode	098651
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER (LEASING)
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 - Head to Rear
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	HELPER
Gender	Female

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	SMS9023X
Vehicle Manufacturer	Mitsubishi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	-
Contact Number	(Phone) +65-88920609
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

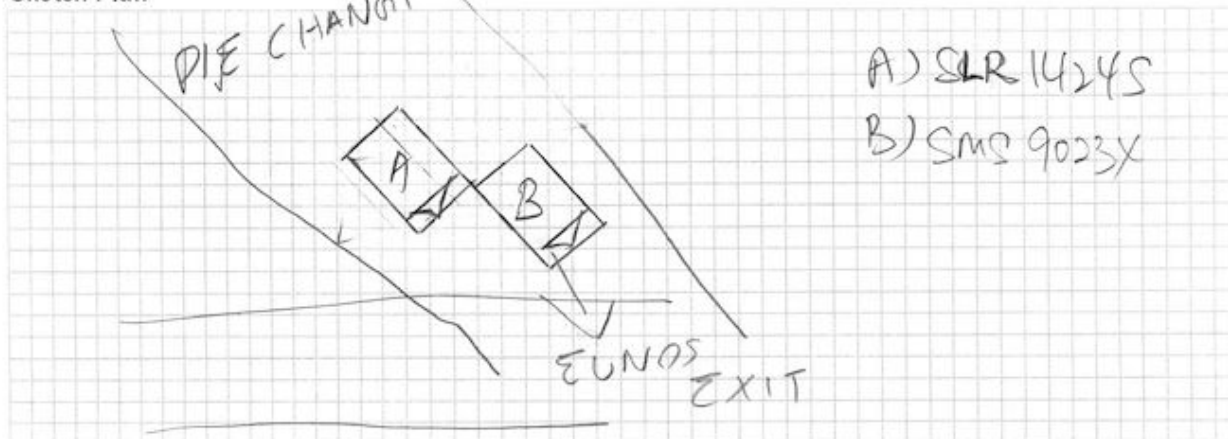
SKETCH PLAN**IMPORTANT NOTICE**

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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.

Edaism 28/6/2021
Policyholder's Signature / Date & Time

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

[Signature] 29/06/2021
Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

I was coming out at EUNOS exit from PIE CHANGI,
 I thought the car in front of me was going to
 proceed towards the EUNOS ROAD and I was behind
 the car. Both cars were at idle to slow speed.
 As the car didn't proceed further, I ran into it
 from behind but at a slow pace and I immediately
 pressed on my brakes. My car was not injured
 at all but the car in front ended up with some
 damage of minor dent.

Declaration

We declare the foregoing particulars are true in every respect.

Charm 28/6/2021

Policyholder's Signature / Date &
 Time

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

Witnessed by Reporting Centre
 Personnel





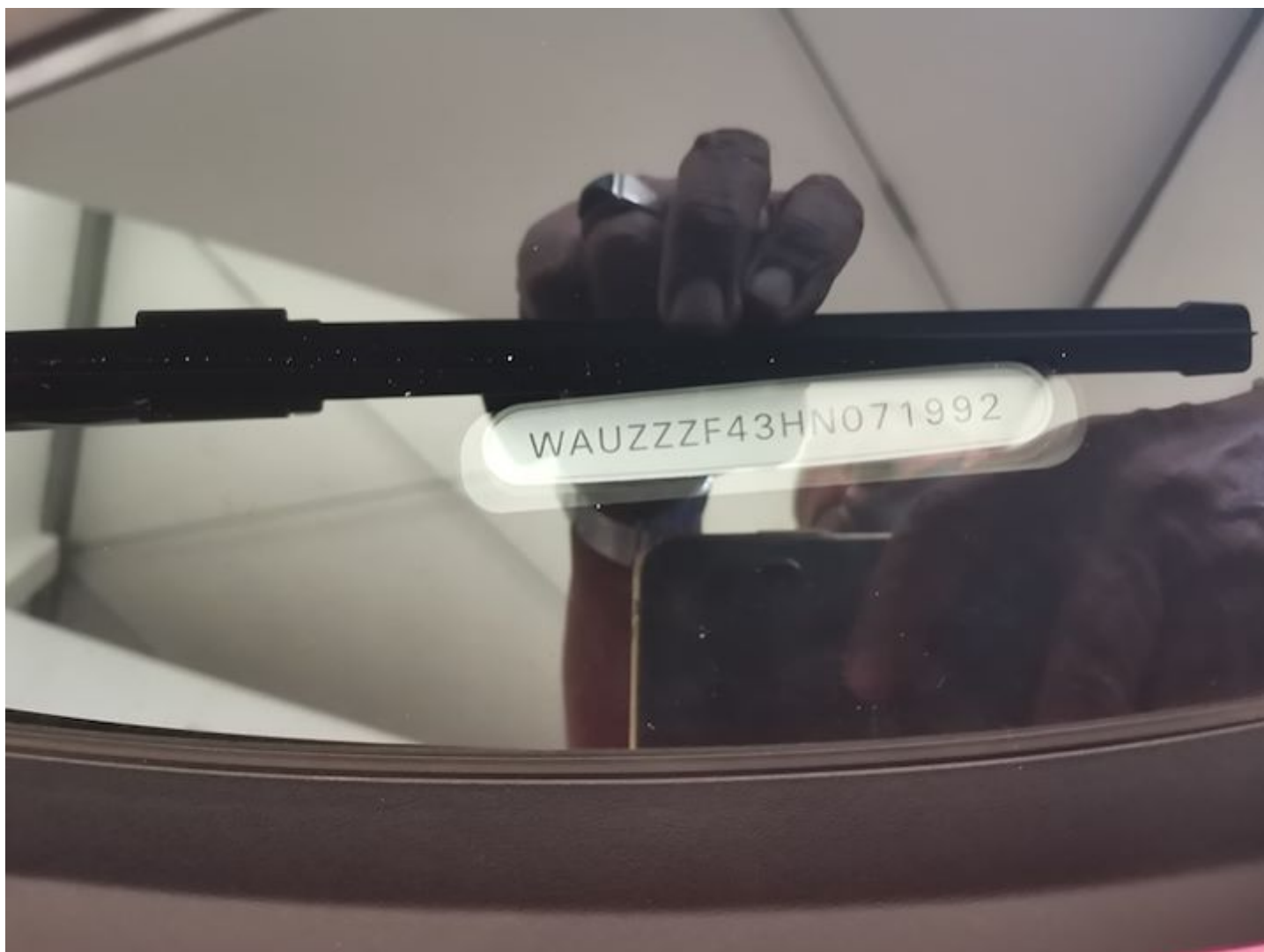
























HITACHI
Inspire the Next

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

Agreement Date: 31/07/2017

111 Somerset Road #11-05 Singapore 238164

Agreement No.: 73616

**AUTOMOBILE LEASE AGREEMENT
THE SCHEDULE**

(Lessor)	Name : Hitachi Capital Asia Pacific Pte. Ltd. Address : 111 Somerset Road #11-05 Singapore 238164	UEN No. : 199400399N
(Lessee)	Name : CHARM THIRI SOE WIN Address : 32 KEPPEL BAY DRIVE #05-58 SINGAPORE 098651	NRIC/PP/UE No: S8375709D
(Guarantor)	Name : Address :	NRIC/PP/UE No :

DESCRIPTION OF VEHICLE ("Vehicle")

MAKE / MODEL AND DISTRIBUTOR OF VEHICLE	COLOUR	REGISTRATION NO.
1. Make / Model: AUDI A4 1.4 TFSI S TRONIC 2. Chassis / Engine No. : WAUZZZF43HN071992 / CVN041752 3. Distributor: PREMIUM AUTOMOBILES ("Distributor")	RED	SLR14245

TERMS OF RENTAL PAYMENT

1. Commencement Date: 31/07/2017	to	30/06/2027	(119 months) ("Lease Period")
2. Period of Lease: From 31/07/2017	to	30/06/2027	(119 months) ("Lease Period")
3. Initial Payment of SGD\$ 16,622.89	Plus GST SGD\$ 1,163.60	("Initial Payment") and thereafter 118 monthly rental of SGD\$ 1,669.62	each Plus GST SGD\$ 116.87 ("Rental"), due on the 31ST day of each month (payable in advance) ("Due Date").
4. Security Deposit: SGD\$ 0.00			

OTHER TERMS OF LEASE (* Except for Items 8, 12 & 13, please delete the option clearly if inapplicable)

1. Service: Distributor's Package / Lessee to pay for own service at []
2. Mileage Limit: YES / () Kilometer every () Months / NO
3. Motor Insurance: Included in Rental / Not-included in Rental
4. Road-Tax: Included in Rental / Not-included in Rental
5. 24 Hr Emergency Break down & Towing in Singapore: YES / NO
6. 24 Hr Emergency Break down & Towing in Malaysia: YES / NO
7. Collision Damage Waiver (CDW): YES / NO
8. Mandatory Excess SGD\$ 600.00 (in Singapore) and SGD\$ 600.00 (in Malaysia) in respect of each and every single accident.
9. GPS Tracking: YES (Please refer to Clause 17.3) / NO
10. Provision of Courtesy Car: YES (subject to Clause 7.4) / NO
11. Replacement cost of Vehicle's Tyres: Included in Package / Payable by Lessee
12. Contractor (pursuant to Clause 12.1.1):
13. Estimated Residual Value (For reference only): \$13,877.93

FULL PARTICULARS OF MAIN NAMED DRIVER

Name : CHARM THIRI SOE WIN	Date of Birth :
Company :	Nationality :
Address :	Contact No. :
NRIC/FIN/PP No : S8375709D	Driving Licence No :

FULL PARTICULARS OF OTHER NAMED DRIVER

Name :	Date of Birth :
Company :	Nationality :
Address :	Contact No. :
NRIC/FIN/PP No :	Driving Licence No :

WITNESS to Lessor Signature

Name: Ida Faridah
 NRIC/PP No: S8111613Z

 SIGNED by
for and on behalf of HITACHI CAPITAL ASIA PACIFIC PTE. LTD. (Lessor)

NG KWANG SIMON (MR)
 General Manager
 Total Vehicle Solution
 Asia Pacific Business Division

WITNESS to Lessee Signature

Witness Signature: [Signature]
 Name: Lee Sum Lee
 NRIC/PP No: S7512071J

SIGNED by OR for and on behalf of LESSEE:

Lessee Signature (Name : CHARM THIRI SOE WIN)

WITNESS to Guarantor Signature

Witness Signature Name:
 NRIC/PP No:

SIGNED by GUARANTOR:

Guarantor Signature (Name :)