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# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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.

- 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

09/12/2021 15:44 (SGT) 26/11/2021 15:21 (SGT) Tampines Ave 2, Singapore

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

GBL3311X

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No.

ABS LEASING SERVICES PTE LTD 2XXXXX528D john.pyj@hotmail.com (Phone) +65-92966056 +65-88567415

VEHICLE PARTICULARS

Manufacturer Model 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 CC

Nv200

Nissan

Employment

No - Reporting only Commercial vehicle Manual 1598

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd. Comprehensive

DMCVSNW00061202100

DRIVER

Name of Driver NRIC No

ZULKARNAEN BIN MOHD TAIB SXXXX899B

Date Of Birth 16/07/1974 Occupation Outdoor Date Of Driving Pass 20/11/2007 Driving experience 14 YEARS Gender Male Mobile Number (Phone) +65-88567415 Alt. Phone Number Email Address john.pyj@hotmail.com Address BLK 2 EUNOS CRESCENT #04-2545 Address complement Postcode 400002 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 - Head to Rear 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 SLQ1125K Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour 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)

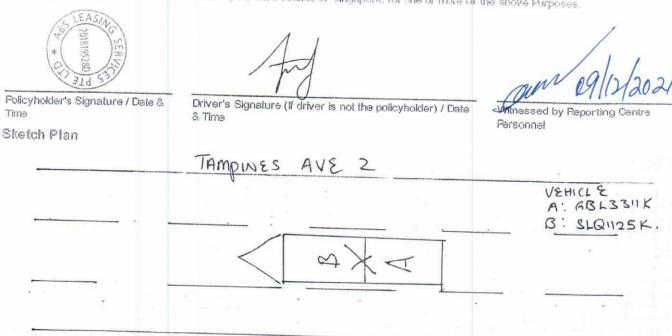
#### SKETCH PLAN

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

l understand, acknowledge, agree and consent that :

- (a) My insurer, my w orkshop 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' law yers/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 ms, 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 Insurers and/or GIA to their third party service providers or agents (including their law vers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



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### Declaration

VWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

201819528D

Time

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

Witnessed by Reporting Centre

Personnel

WENTER BING GBL 3311 MARE WITEL NISSAN NV200 LEURO FOREIGH 26 / 11 / 2021 DATE OF ACCIDENT TIME OF ACCIDENT 1521HRS AMI / PAI ) LOCATION OF ACCIDENT TAMPINES AUE 2 ST 22 EMPLOYMENT / PRIVATE USE / PRIVATE HIRE EXACT PURPOSE USED AT TIME OF ACCIDENT NAME OF OWNER ABS LEASING SERVICES PTE LTO. JOHN. PYJQHOTMAIL. COM EMAIL. Office. MOBILE: 9296 6056 MIC OD / REPORTING ONLY CLAIM TYPE THURD PARTY YES NO ? FLEET POLICY. INSURANCE CO. CHINA TAIPING Comprehensive / Third Party / Third Party Fire & Thesi TYPE OF COVERAGE POLICY NO. DMCVSNWØØØ612Ø21ØØ AS ABOVE / IFNO: ZULKARNARN BIN MOHD NAME OF DRIVER S7422899B. DATE OF BIRTH 16 107 11974 ANY PASSENGER YES / NO !: NAME OF PASSENGER GENDER OF PASSENGER MAKE / FEWIALE OCCUPATION Outdoor / Indoor LINTE OF CONVERT PASS 20 / 11 /2007 LIFT OF BE Requarie CONTACT NO. Mobile 8856 74150ffice LALAIL AID OF ESS BLK 2, SUNDS CRESCENT #04-2645 A RESIDENCE AND LITTLES VEHICLES? noll appleann Charloges i with HIRER. TELLATBURGHIP WEATHER CONDITION [ Reining] / Caher. Dry / West / Other POACE SUPPACE MITTHIOUTES Moll If you . Hother ? CONTACT NO. No ) (fyes: Where? POLICE PEPCIT HOTICE OF INTELIDED PROSECUTION GIVE NO/IF YES, WHO? VEHICLE BINO. SLQ 1125K Any Passenger . I VANOE COUNTACTIO. " THICLE CHO. Any Passenger. PETFICLE DIFFO Arry Passenger. VEHICLE EITO Arry Passenger: OHA STOTERS Any Passenger . STEEN WITHERS EVITABLES CONTACT PO WAS THERE ANY ADEO CAPTURE? WAS THERE ANY AUDIO RECORDED? TOENE ACCIDENT PHOTOSTAPEN? 7157 NC \* 'WORKSHOP: Have you been approach by authown person solicifing (s) / offering no ideal dains assistance? 733/10/



## **ABS LEASING SERVICES PTE LTD**

WIN 5, 15 Yishun Industrial Street 1 #01-02, Singapore 768091

TEL: 6259 6590 FAX: 6933 9399 Email: enquiry@absleasing.com.sg

UEN No. 201819528D

In 1121080063

#### RENTAL AGREEMENT

No. A21080018

Date: 05 Aug 2021

: 05 Aug 2021 | 1600

7704 Aug 2022 | 1600

VEHICLE DESCRIPTION

Vehicle No.

: GBL3311X

Make

: NISSAN

Model

: NV200 DX 1.6 AUTO

Fuel type

: Petrol

HIRER PARTICULARS

Name

ZULKARNAEN BIN MOHD

TAIB

Co Reg No./ NRIC

: 574228998

Address

: BLK 2 EUNOS CRESCENT #04-2545 Singapore

400002

Fax Contact Person

ZULKARNAEN BIN MOHD

NRIC

: S7422899B

Tel

: +6588567415

Email

MAIN DRIVER PARTICULARS

Name

ZULKARNAEN BIN MOHD

TAIB

NRIC/FIN/Passport No

: S7422899B

RENTAL DETAIL

Rental Start Date & Time

Rental End Date & Time

Rental Period

Rental Per Month (excl. GST)

Rental Per Month (incl. GST)

Payment on

Insurance Premium

(for ABSL arranged

Insurance)

PAYMENT

Deposit

Upfront Rental

Total Rental Fee (to be paid

on signing of Agreement)

: S\$ 1,100.00 : 5\$ 1,177.00

: 12 months

: CHINA TAIPING

: S\$ 1,100.00

: 5\$ 1,177.00

5\$ 2,277.00

IMPORTANT NOTE

Rental Fee is to be fully paid within 3 days from the date of our invoice

Hirer to ensure pumping correct FUEL TYPE listed above. Hirer to conduct proper checks on the vehicle while using such as sufficient engine oil and coolant water etc. Any unusual discovery of warning lights in the vehicle,

Hirer are to consult ABSL for further assistance.

This Agreement constitutes the entire agreement between the Parties with respect to the subject matter hereof, and may be amended only by the written agreement of the Parties.

IN WITNESS WHEREOF, the parties hereby enter into this Agreement as of the date first above written

SERV

Signed by and on behalf of ABS Leasing Services Pte Ltd

Position : Salesman Name : Chan Sjang Shan Date:

Signed by and on behalf of

Position:

Name: ZULKARNAEN BIN MOHD

TAIR

NRIC: 57422899B Date: LO





## 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ407/C

SN

AN0597A Cov. Type:C

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, 1997 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00061202100

Engine No.: HR161835660 Cha. No.: VM20165121

1 Index Mark and Registration Number of Vehicle

GBL3311X

AUTOSAFE

2 Name of Policy Holder

4. Date of Expiry of Insurance

ABS LEASING SERVICES PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, (00:00:00) Ordinance or Enactment

Excess Sect I.

\$\$1,500.00

Excess Sect. II

S\$1,500.00

27/05/2022

EX ON WINDSCREEN .

\$\$100.00

5 Persons or Classes of Persons entitled to drive\*

Sersons 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

(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.

HIRE PURCHASE CO. : DBS BANK LTD

\* 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: trene Hor Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte, Ltd. (Co. Reg. No. 200208384E) 🐴 3 Anson Road #16-00 Springleaf Tower Singapore 079909

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6222 1033

www.sg.cntaiping.com