Leman Sem / LE E /S

SK0M225B0001-01 / KANG CAR REPAIRERS PTE LTD ENTRY DATE & TIME: 11/05/2022 15:45 (SGT) SUBMITTED BY: ALICE TNG VERSION: 2 (12/05/2022 12:08 (SGT))



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

11/05/2022 15:45 (SGT) 11/05/2022 07:17 (SGT) Singapore PIE towards Tuas Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNE3675R

INSURED/POLICYHOLDER

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

Singapore Mobility Corporation Pte Ltd 2XXXXX234Z ridwan@sixt.com.sg (Phone) +65-64239566 (Office) +65-64239566

VEHICLE PARTICULARS

Manufacturer Model Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission

CC

Honda Fit

1300

Private use

No - Claiming third party Private car Auto

INSURANCE COMPANY

Name of Insurance Company Type of Coverage

Fleet Policy Policy Number

Cover Note Number

NTUC Income Insurance Co-operative Ltd

Comprehensive Yes

5124932873

DRIVER

Name of Driver NRIC No

Kwek Pei Qi SXXXX864G



Date Of Birth 04/01/1985 Occupation Indoor Date Of Driving Pass 24/05/2016 Driving experience 6 YEARS Gender Female (Phone) +65-90401425 Mobile Number Alt. Phone Number Email Address peiqikwek@gmail.com Address Blk 636B Senja Road #17-319 Address complement Postcode 672636 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

Chain Collision Type of Accident Weather Conditions Drizzling Road Surface Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 5 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) 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? No Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

I was driving my vehicle SNE3675R along PIE towards Tuas. The vehicle in front of me slowed down and stopped. I followed to stop my vehicle. Suddenly the vehicle SJZ8114Y coming from behind hit onto the rear of my vehicle. When I alighted, I found out that there were three other vehicles, SJY4237H, vehicle number unknown and SLZ9182U also involved in the accident.

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes

Will forward to owner insurer

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

S 178114Y Vehicle Registration Number Mercedes Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Private car Vehicle Category Name of Driver Rama

Contact Number	(Phone) +65-90045927
Address	-
Address complement	
Postcode	-
Insurance Company Name	•.
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

DETAILO	OF OTHER	VEHICLE PROPERTY 2	
THE LAILS		VEHILLE PRIDERLY /	

Vehicle Registration Number	SJY4237H
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	manuscript -
Vehicle Category	Private car
Name of Driver	and the second s
Contact Number	in the case of the comment of the co
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	and the second of the second s
No. Of Passenger (Including Driver)	

DETAILS	E OTUED \		DODEDTY 2
DETAILS U		/ENIULE F	PROPERTY 3

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	AND RAIL OF THE REAL PROPERTY OF THE PERSON
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)	

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SLZ9182U	
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	<u> -</u>	
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
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or will holding of material facts may allow insurance companies to repudiate policy liability.
- 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
- 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 aforesaid.
- 3. 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 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 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 obver 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 yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Cooperation of the cooperation o

Policyholder's/Signature / Date &

Time

Sketch Plan

Che ,, may 2022 14 29

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

Witnessed by Reporting Centre

Sketch Plan

8) STZ 81144

e) SJ44237H

D) UNKNOWN

E) SLZ91824



Describe Circumstances of the Accident vehicle SNE 3675R along relide in front of sprawot Slowed followed stopped. vehicle Sudderly the vehicle SJZ 81147 coming from the onto rear of out that there were three aliquited Louid relides, SJ44237H relide number unknown also involved in the accident and SLZ9182 U,

Declaration

IWe declare the foregoing particulars are true in every respect.

THE THE PARTY OF T

Policyholder's Signature / Date &

Men 11 may 2022 1428

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

Witnessed by Reporting Centre Personnel



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report. ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No: SKOM225B0001 Vehicle Registration No: Name (as shown in NRIC): KWEK PEI QI NRIC/FIN/Passport No: S8501864G (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate Address: BLK 636B SENJA ROAD #17-319 Singapore (672636 90401425 Mobile No.: Contact (Tel): PEIQIKWEK@GMAIL.COM Email Address: 7:17AM 11.5.2022 Date of Accident: Time of Accident: PIE TOWARDS TUAS Place of Accident: NTUC INCOME Insurance Company: (B) ADDITIONAL INFORMATION / AMENDMENTS: I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments: TO AMEND TO THERE IS AUDIO Reporting Centre Personnel's Signature Policyholder / Driver's Signature Name: Date: 12.5.2022 NRIC/FIN No .:

Accident report SK0M225B0001

12/5/2022

Date:

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	234Z
Vehicle No.:	SNE3675R
Vehicle to be Exported:	No
Intended Deregistration Date:	17 May 2022
Vehicle Make:	HONDA
Vehicle Model:	FIT 1.3 HOME CVT
Primary Colour:	Blue
Manufacturing Year:	2021
Engine No.:	L13B1607420
Chassis No.:	GR11105709
Maximum Power Output:	72.0 kW (96 bhp)
Open Market Value:	\$19,690.00
Original Registration Date:	08 Mar 2022
First Registration Date:	08 Mar 2022
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Mar 2032
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	07 Mar 2032
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$41,801.00
COE Rebate Amount:	\$40,978.00
Total Rebate Amount:	\$44,728.00

The information contained herein is correct as at 17 May 2022

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