

**NATIONAL Assessment Centre Services** [Ref: 13/05/2022]

Date In: <b>20/05/2022</b>	Job description	Date & Time Completed	Done by
Ref No: <b>Nm / LIP 22004772 / Gm4</b>	SAS e-filing		
Veh No: <b>SLR 6974M</b>	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: <b>13/05/2022 08:45</b>	i-Motor Claim Form		
<b>OD</b> TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars:	Veh No: <b>TCA 6384</b>	INC ( ) / Non-INC ( )
Owner / Driver: ( )	Tel: ( )	
Policy No: ( )	Period: ( )	Cover Type: ( )
Confirmed by: ( )	Date: ( )	Time: ( )
Insured/Driver Liability: ( ) %	[Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]	
Year of Registration: ( )	Warranty: YES ( ) / NO ( )	
Excess: (\$ )	Loading: \$1,000 ( ) / \$2,000 ( )	

**General Remarks:-**

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co. ( )

Remarks:- (INC hotline: 6788 6616)	Date&Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

**Injury :** \_\_\_\_\_

Date/Time	Actions
	Mobile Reporting

NA 2201376 / NA 2201377	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR : Accident Reporting (\$30);		
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
Cat. 1:	7) N1 : Idac DA + SMRT Survey \$160		
Cat. 2 / 3:	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11) : TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

# 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	20/05/2022 16:08 (SGT)
Date of Accident	13/05/2022 08:45 (SGT)
Exact Location of Accident	Johor Bahru, Johor, Malaysia
Additional Location Information	JUNCTION OF JALAN SENTOSA AND JALAN LANGKASUKA
Country/State of Loss	Malaysia/Johor Darul Takzim

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6974M
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DREAM CAR LEASING PTE LTD
Company Reg No	2XXXXX013Z
Email Address	DREAMCARRENTALSG@GMAIL.COM
Mobile Phone No	(Phone) +65-81288789
Alternative Phone No	+65-81288789

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	C-hr
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1196

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD21V12919/VPZ/R01
Cover Note Number	-

### DRIVER

Name of Driver	AHMAD ZAKI BIN ABDULLAH
NRIC No	SXXXX251H

Date Of Birth .....	28/11/1974
Occupation .....	Outdoor
Date Of Driving Pass .....	18/05/2007
Driving experience .....	15 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-92705414
Alt. Phone Number .....	-
Email Address .....	DREAMCARRENTALSG@GMAIL.COM
Address .....	BLK 274 PASIR RIS STREET 21
Address complement .....	#05-516
Postcode .....	510274
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 - Cross Junction
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	Yes
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) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### FOREIGN VEHICLE 1

Vehicle Registration Number .....	TCA6384
Vehicle Category .....	Private car

#### PASSENGER 1

Name .....	FARADILAH BTE SAMAT
Gender .....	Female

#### PASSENGER 2

Name .....	NUR FARAH FARZANA BTE AHMAD ZAKI
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Pasir Ris Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005852999
Alt. Police Station Phone No .....	(Fax) +65-65855261
Police Station Address .....	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT AND POLICE REPORT : 008147/22.

#### ATTACHMENT(S)

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

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number ..... TCA6384  
Vehicle Manufacturer ..... Honda  
Vehicle Model ..... Civic  
Vehicle Variant ..... -  
Vehicle Colour ..... White  
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 willful 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. 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.
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.



Policyholder's Signature / Date & Time

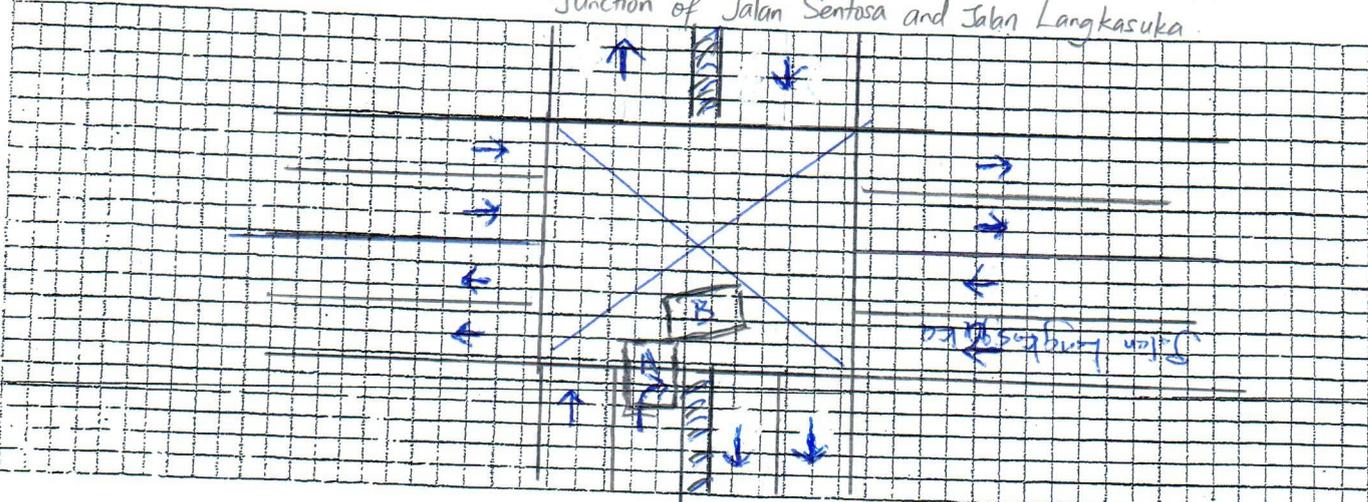
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Ru 20/5/22

**Sketch Plan**

Junction of Jalan Sentosa and Jalan Langkasuka



Jalan Sentosa

Vehicle A - SLR 647AM

Vehicle B - TCA 638A

**Describe Circumstances of the Accident**

I, Ahmad Zaki Bin Abdullah (S7484251) driving Blue  
Toyota CHR Reg no: SLR6974  
Driving to Muar on 13 May 2022.  
At 8:45 am accident between my car and white  
Honda Civic Reg no. TCA6384.  
Accident happened at T Junction  
I about to turn right and other party coming from  
the right of 90 degree angle.  
No one was injured.  
Toyota CHR was towed to Singapore on the same  
day.  
- Police Report attached: 008147/22.

**Declaration**

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

 20/5/22

Witnessed by Reporting Centre  
Personnel



## POLIS DIRAJA MALAYSIA REPOT POLIS

**Balai** : TRAFIK JOHOR BAHRU(S)  
**Daerah** : J/BAHRU SELATAN  
**Kontinjen** : JOHOR  
**No. Repot** : TRAFIK JOHOR BAHRU(S)/008147/22  
**Tarikh** : 13/05/2022  
**Waktu** : 1400 PM  
**Bahasa Diterima** : B. Malaysia

**Pegawai Penyiasat** : R104724  
**No. Repot Bersangkut** : TRAFIK JOHOR  
 BAHRU(S)/008137/22

### Butir-butir Penerima Repot :

**Nama** : NOAZZA BINTI ABD WAHID  
**No. Badan** : R136178  
**Pangkat** : KPL

### Butir-butir Jurubahasa (Jika Ada) :

**Nama** : ---  
**No. K/P (Baru)** : ---  
**No. Pasport** : ---  
**Alamat** : ---  
**Bahasa Asal** : ---  
**No. Polis/Tentera** : ---

### Butir-butir Pengadu :

**Nama** : AHMAD ZAKI BIN ABDULLAH  
**No. K/P (Baru)** : 741128016115  
**No. Sijil Beranak** : ---  
**Umur** : 47 Tahun 5 Bulan  
**Pekerjaan** : BOMBA  
**Alamat Tinggal** : 947 A JLN TEMENGGONG AHMAD MUAR, 84000 JOHOR  
**Alamat IbuBapa** : ---  
**Alamat Pejabat** : ---  
**No. Tel (Rumah)** : ---  
**Emel** : ---

**No. Polis/Tentera** : A2804750  
**Jantina** : Lelaki  
**Keturunan** : Melayu  
**No. Pasport** : ---  
**Tarikh Lahir** : 28/11/1974  
**Warganegara** : Malaysia

**No. Tel (Pejabat)** : ---  
**No. Tel (Bimbit)** : 92705414

### Pengadu Menyatakan :

PADA 13/05/2022 JAM LEBIH KURANG 0845HRS , SEMASA SAYA MEMANDU MPV SLR6974M DARI LARKIN BOMBA HENDAK KE STADIUM LARKIN BERSAMA KELUARGA , APABILA SAYA SAMPAI DI JALAN SENTOSA , SEMASA SAYA MEMBELOK KE JALAN LANGKASUKA , TIBA - TIBA DATANG SEBUAH M/KAR NO TCA6384 YANG DARI ARAH SEBELAH KANAN TELAH MELANGGAR M/KAR SAYA. SAYA MENGALAMI SAKIT DI BAHAGIAN DAHI AKIBAT TERKENA PADA DAHI SAYA. SAYA MENDAPAT RAWATAN DI HOSPITAL SULTANAH AMINAH DAN MENDAPAT RAWATAN PESAKIT LUAR. KEROSAKKAN M/KAR SAYA BUMPER DAN BONET DEPAN , LAMPU DEPAN KIRI KANAN , PANEL DEPAN , AIR BEG DEPAN KIRI KANAN DAN AIR BEG KIRI KANAN , SENSOR DEPAN , MUDGUARD DEPAN KIRI KANAN , TANGKI AIR , TANGKI AIR COND DAN LAIN - LAIN KEROSAKAN TIDAK PASTI LAGI.  
 INILAH LAPORAN SAYA

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada):

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak : R104724 | 13/05/2022 02:27:13 PM

SALINAN YANG DISAHKAN BENAR  
(HANYA UNTUK TUNTUTAN SIVIL)

CONFIDENTIAL



ANNEX E

NOTICE OF REPORTING

This is to confirm that Ahmad Zaki Bin Abdullah, NRIC ~~51513694D~~ <sup>37464251H</sup> currently residing at Blk 274 Pasir Ris Street 21 #05-516 Singapore (510274) (hp no: 92705414) has reported to the Police a non injury traffic accident which occurred in Johor Bahru, Malaysia on 13/05/2022 at 0745hrs involving the following vehicles;

- a) SLR6974M - Blue Toyota CHR
- b) TCA6384 - White Honda Civic

I am the driver of SLR6974M. I am in post to report of non-injury accident happened in Johor Bahru, Malaysia involving the 2 vehicles mentioned above.

On the 13th May 2022 at about ~~0745hrs~~ <sup>0845hrs</sup>, I was driving a rental vehicle (SLR6974M) in Johor Bahru. As I was turning right at a T-junction, a Malaysia vehicle (TCA6384) that was coming from the right at a 90degree angle collided into the right of my vehicle.

After the accident, the driver of the Honda Civic informed me that he will report the accident to his insurance. I contacted the car rental company who instructed for me to call for towing. I did as instructed, and the vehicle was towed back to the Singapore workshop. Nobody was injured.

I have lodged a traffic accident report in Johor Bahru. I am lodging this report for record purpose as required by the rental company.

2 If this accident was reported to the Police within 24 hours of its occurrence then he/she has complied with Sec 84 (2) of the Road Traffic Act, Cap 276

Rank / Name of Issuing Officer: Sgt(3) Chan Xiang Da  
 Date: 17/05/2022 Time: 1448hrs  
 ESD Ref No: 44  
 Police Post / Unit: Pasir Ris NPC

Pasir Ris NPC  
 No. 1 Pasir Ris Drive 4  
 #01-01 Singapore 519457  
 Tel: 1800-5852999

Original to be issued to complainant  
 Duplicate to be submitted to Traffic Police (6547 0000)

CONFIDENTIAL

Sgt1 Shekhar  
 Pasir Ris NPC  
 No. 1 Pasir Ris Drive 4  
 #01-01 Singapore 519457  
 Tel: 1800-5852999

Sgt1 Shekhar  
 Pasir Ris NPC  
 No. 1 Pasir Ris Drive 4  
 #01-01 Singapore 519457  
 Tel: 1800-5852999

Date of Accident: 13 May 2022 Accident Time: 0845 (24-HR-Format)  
 Accident Place: Learkin, Johor (Malaysia)  
 Vehicle Reg. No. (Car Plate No.): SLR 6974M  
 Vehicle Make/Model: CHR TurDO 1-2 (Toyota/CHR) (1196cc) (A)  
 Insurance Company: Liberty Policy No.: SD2112919/VP4/201  
 Owner or Company Name / IC No.: Dream Car Leasing Pte Ltd (201420013Z) 2014200132  
 Owner or Company Contact No.: \_\_\_\_\_ Owner's Hp: 81288789 Company Tel: \_\_\_\_\_  
 DRIVER'S Name / IC No.: AHMAD ZAKI BIN ABDULLAH 57484251H  
 DRIVER'S Date Of Birth: 28 Nov 1974 DRIVER'S License Pass Date: 18 May 07  
 Relationship of Owner & Driver: Spouse | Parents | Children | Sibling | Employee | Others: Hirer  
 DRIVER'S Address: 274 PASIR RIS ST 21 # 05-516 (S) 510274.  
 DRIVER'S Contact No. / Alt No.: 1) 92705414 2) \_\_\_\_\_  
 DRIVER'S Occupation: INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address: ~~zaki@dreamcar.com~~ dreamcar.com@gmail.com  
 Weather & Road Surface: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type: Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (including driver): ( ) Anybody injured in the accident Yes/No  
 Was there any video captured by car camera: YES \ NO  
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

**(B)**  
 Other Party Driver's Particular (if any):  
 Vehicle Reg. No.: TCA 6384 (Malaysia veh.)  
 Vehicle Make/Model: Honda Civic  
 Name Driver: \_\_\_\_\_  
 IC No. Driver: \_\_\_\_\_  
 Driver's Contact & Add: \_\_\_\_\_

**(C)**  
 Vehicle Reg. No.: \_\_\_\_\_  
 Vehicle Make/Model: \_\_\_\_\_  
 Name Driver: \_\_\_\_\_  
 IC No. Driver: \_\_\_\_\_  
 Driver's Contact & Add: \_\_\_\_\_  
 Farrahilah Bte Samat  
 Nur Farah Farzana  
 Bte Ahmad Zaki

\* 3px including driver! (SLR 6974M)



**Liberty Insurance Pte Ltd**  
 Registration no.199002791D  
 51 Club Street  
 #03-00 Liberty House  
 Singapore 069428  
 Tel: (65) 6221 8611  
 Website: <http://www.libertyinsurance.com.sg>

## 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  
 ROAD TRANSPORT (AMENDMENT) ACT 2019  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

<b>Certificate No</b>	SD21V12919 /MPZ /R01
<b>Form</b>	MZ406D
<b>Date Of Issue</b>	09-SEP-2021
<b>1.Index Mark and Registration No. of Vehicle:</b>	SLR6974M
<b>2.Chassis number of Vehicle:</b>	NGX502009989
<b>3.Name of Policyholder:</b>	DREAM CAR LEASING PTE LTD
<b>4.Effective date of Commencement of Insurance for the purpose of the Act:</b>	20-SEP-2021 00:00 AM
<b>5.Date of Expiry of Insurance:</b>	19-SEP-2022 23:59 PM
<b>6.Persons or Classes of Persons entitled to drive*:</b>	
<p>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 t</p>	
<b>7.Limitations as to use*:</b>	
<p>A) Use for carriage of passengers or goods in connection with the Policyholder's business.          B) Use for social, domestic, pleasure and business purposes of any person to whom the vehicle is hired.          C) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by the person to whom the vehicle is hired.</p>	
<b>8.Policy does not cover:</b>	
<p>A) Use for racing, pace-making, reliability trial or speed-testing.          B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.</p>	
<p>*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 are not to be included under these headings.</p>	
<p>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.</p>	
<p>For and on behalf of  <b>LIBERTY INSURANCE PTE LTD</b>          Approved Insurers</p>	
<p>_____          Authorised Signature</p>	
<b>For Information only:</b>	
<b>COVERAGE :</b>	Comprehensive,Unlimited Windscreen,PHV Extension (Geographical Area: Singapore only)
<b>SUM INSURED:</b>	MARKET VALUE AT THE TIME OF LOSS
<b>EXCESS:</b>	All Claims S\$2000,Additional Excess for Young, Elderly & Inexperienced Drivers S \$2000,Windscreen Excess S\$100
<b>FINANCE COMPANY:</b>	LAKE VIEW CREDIT PTE LTD
<b>PRODUCER NAME:</b>	NEWSTATE STENHOUSE (S) PTE LTD

PLVC-/09-SEP-21

S1\_CI\_T1\_T3\_OE\_Template2-Ver1.

09-SEP-21