SN09225O0009 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 26/05/2022 17:59 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (26/05/2022 17:59 (SGT))

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 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.

- 4. The issue and acceptance of this is form by instrained 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 26/05/2022 17:59 (SGT) Date of Accident 22/05/2022 13:00 (SGT) Exact Location of Accident Punggol Dr., Singapore Additional Location Information TOWARDS OASIS (JUNCTION OF PUNGGOL ROAD) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

1496

Vehicle Registration Number SMK7751H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD. Company Reg No 1XXXXX399N **Email Address** azielahadzim@hotmail.com Mobile Phone No (Phone) +65-81184764 Alternative Phone No (Office) +65-68336152

VEHICLE PARTICULARS

Manufacturer

Model Vezel 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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number D22MTPV01006675 Cover Note Number

DRIVER

CC

Name of Driver NOOR AZIELAH BINTE SAPTU NRIC No. SXXXX743B

Date Of Birth 31/10/1988 Occupation Indoor Date Of Driving Pass 18/03/2008 Driving experience 14 YEARS AND 2 MONTHS Gender Female Mobile Number (Phone) +65-81184764 Alt. Phone Number Email Address azielahadzim@hotmail.com Address BLK 673B EDGEFIELD PLAINS #17-619 Address complement Postcode 822673 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **LEASING** Does Driver Own Other Vehicles? Nο 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 - U-Turn Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No 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 PASSENGER 1 Name NUR ELYZA BINTE ABDUL ADZIM JAWAHIR Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Ang Mo Kio Division Headquarters Police Station Phone No (Phone) +65-18002180000 Alt. Police Station Phone No (Fax) +65-64814246 Police Station Address 51 Ang Mo Kio Avenue 9 Singapore 569784 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT F/20220522/7056 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**

GBL834Z

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?	NUR AZIELAH BINTE SAPTU Female (Phone) +65-81184764 - - - SLIGHT INJURY SMK7751H
Injured person in which vehicle? Were seat belts worn?	SMK7751H Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2	
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?	NUR ELYZA BINTE ABDUL ADZIM JAWAHIR Female SLIGHT INJURY
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

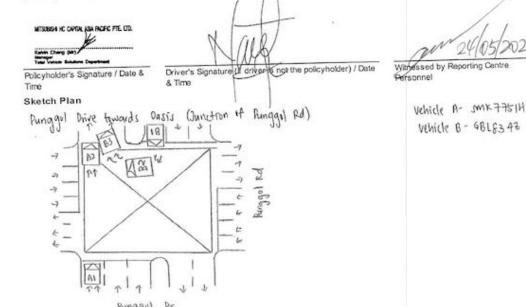
- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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)

Lunderstand, acknowledge, agree and consent that

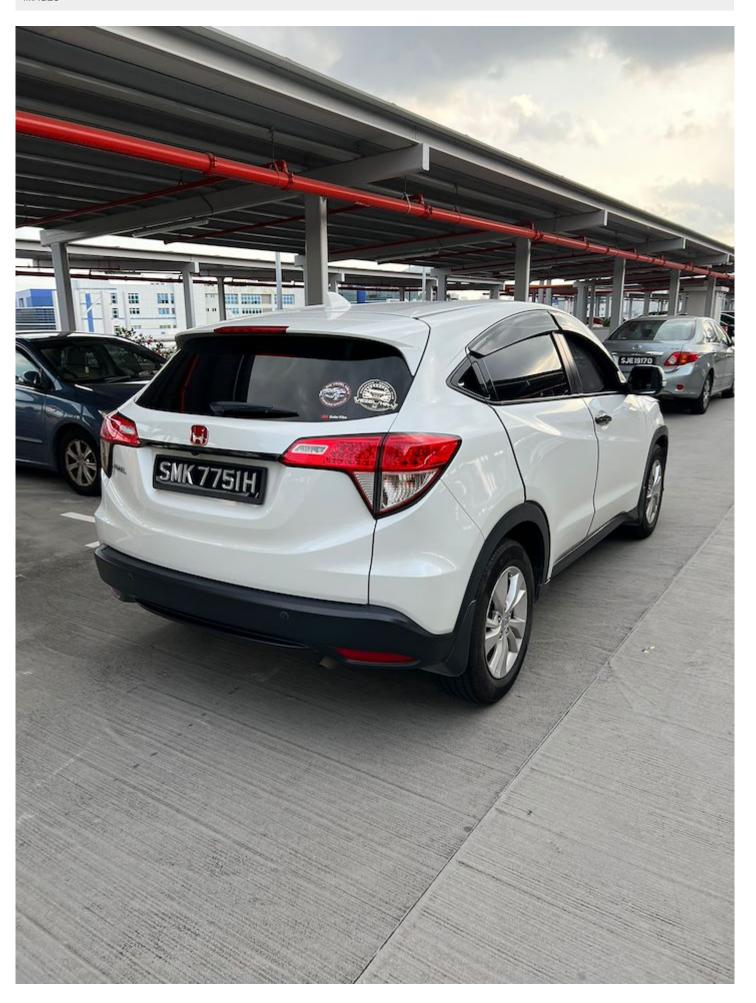
- (a) My insurer , my w orkshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively 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 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
- (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.

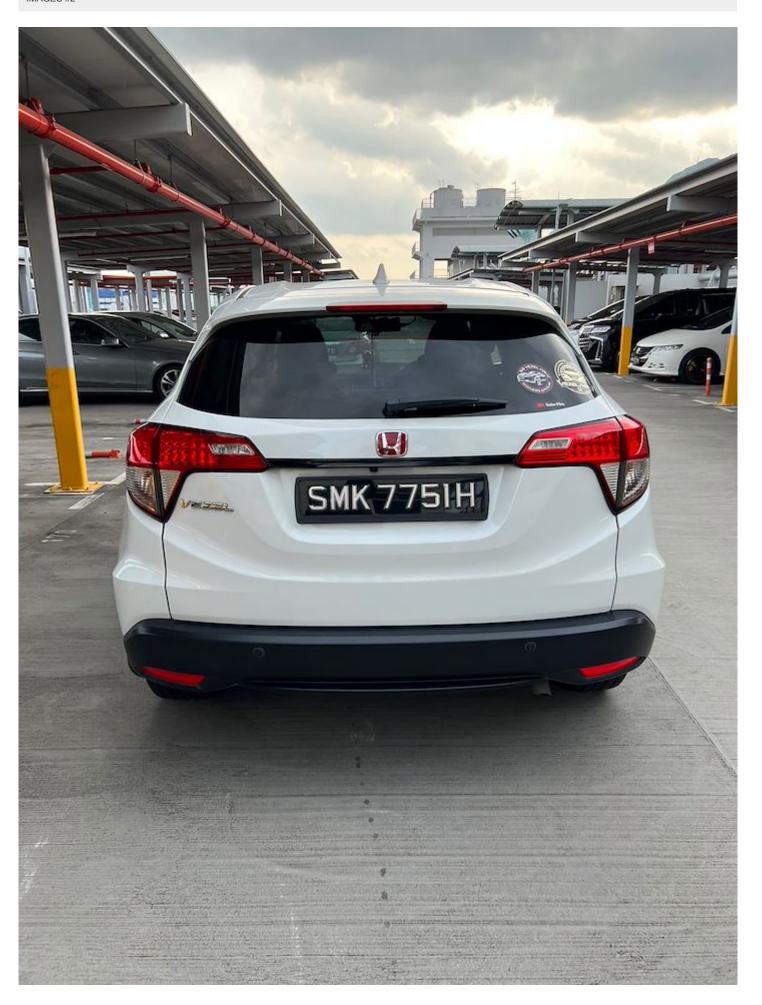
(collectively the "Purposes")

- (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 law yersilaw firms), which may be sited outside of Singapore, for one or more of the above Purposes.

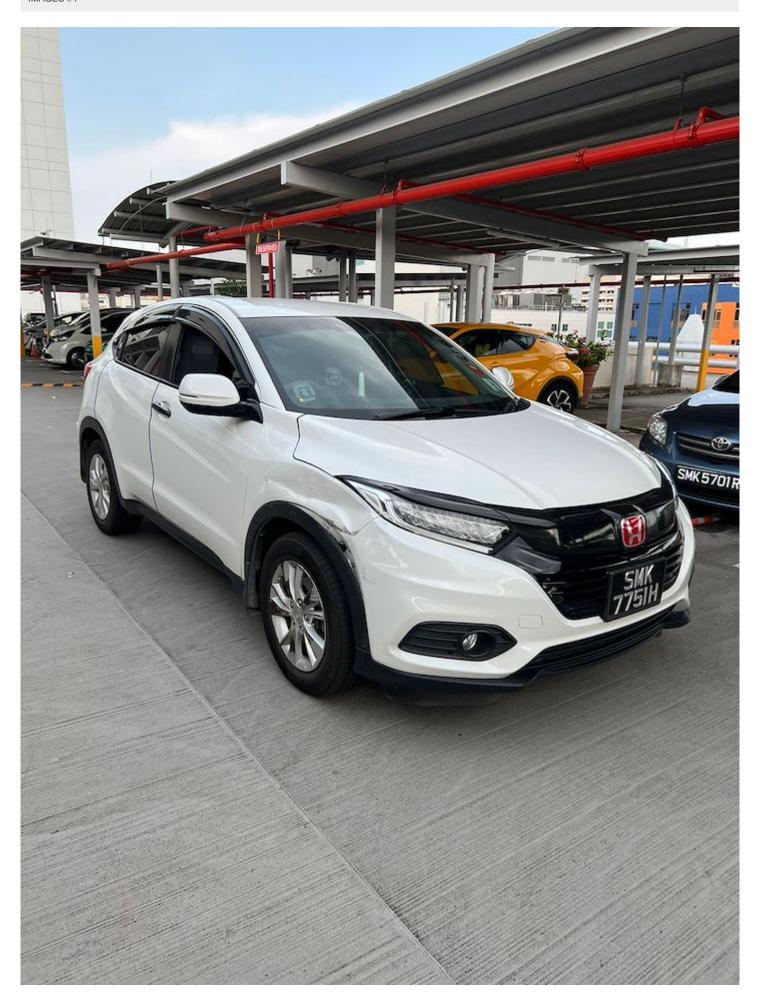


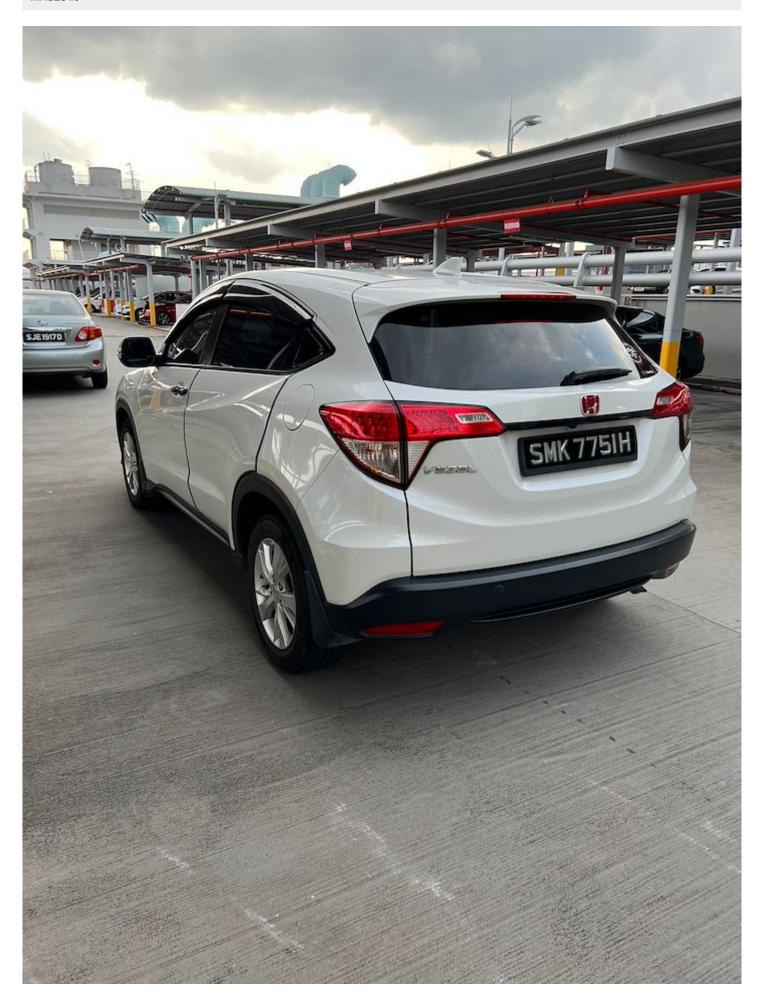
ort NO. F/24020522/7056.
1
<u> </u>
true in every respect.
1 /
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TUIN!
MARY 24/05/2
ver's Signature (III driver is not the policyholder) / Date Witnessed by Reporting Centre
Time Personnel



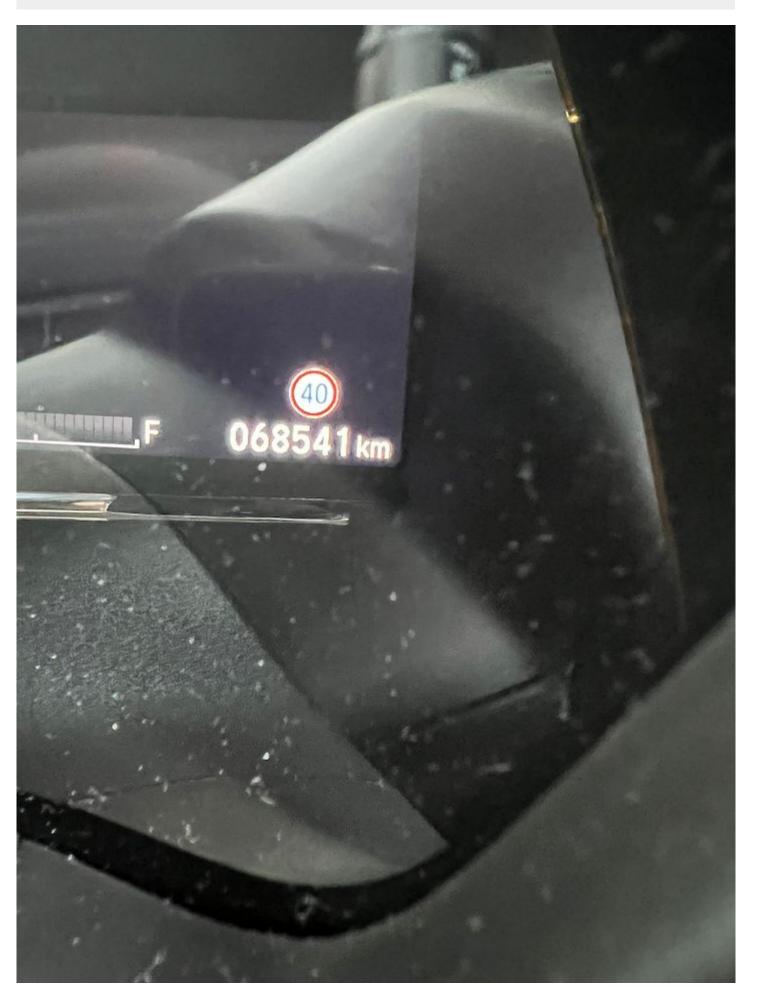




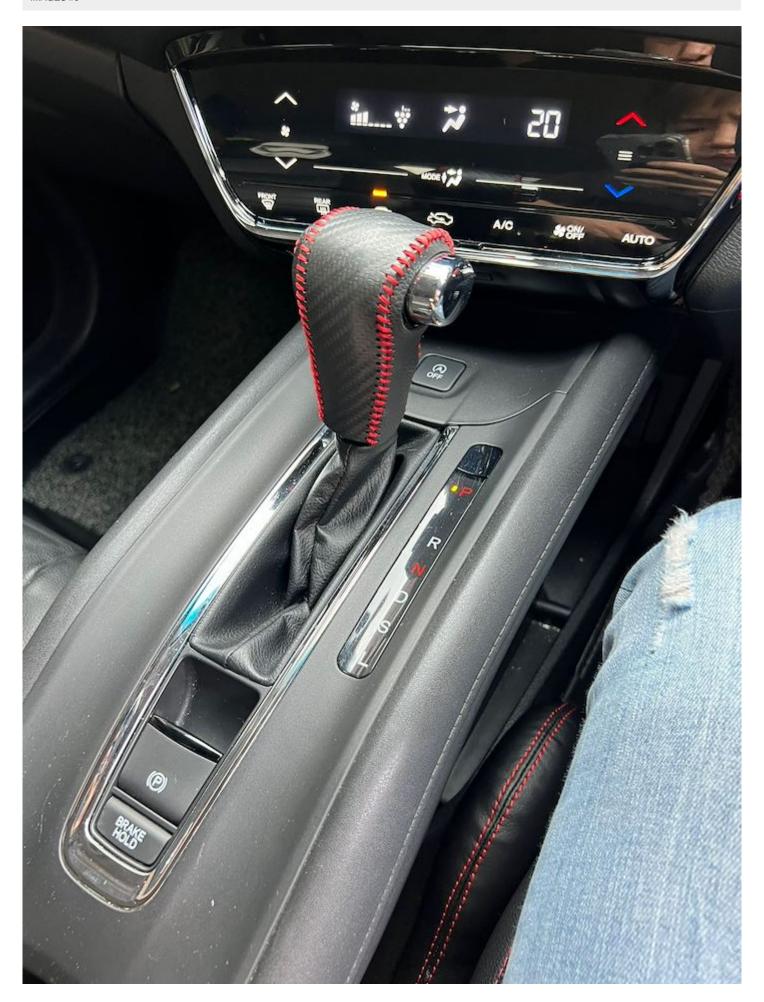
















Report No. F/20220522/7056

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE Tel No:1800-2180000

Date/Time Report Made 22/05/2022 20:40	Vide Rep	ort No.	Station Diary No.	
Name Of Informant NOOR AZIELAH BINTE SAPTU	Address 673B EDGEFIELD PLAINS #17-619 SINGAPORE 822673 Contact No. Home/Office: Mobile: 81184764			SINGAPORE
ID Type / ID No. NRIC NO / S8842743B				
Nationality SINGAPORE CITIZEN	Email Address AZIELAHADZIM@HOTMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
Nurse	Female	33	31/10/1988	Malay
Institution/School Name	Language English			
Date/Time Of Incident 22/05/2022 13:00	Location Of Incident PUNGGOL DRIVE			
Dulaf dataila				

Brief details.

On the stated date and time I was driving my daughter (Nur Elyza) on board vehicle SMK7751H. I was travelling along punggol drive towards Oasis.

As I approach the X-junction of punggol Road and punggol drive the traffic light was still green and I proceeded on.

I noticed vehicle GBL834Z who was on my opposite direction making a U-turn.

The said vehicle did not wait for me to clear 1st and he also made a wide turning and cut into my lane. When I saw the said lorry I tried to swerve to my left to avoid collision but I had no time to react and my

Signature Of Officer Recording The Report: Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 22/05/2022 20:40		
Officer In-Charge Of Case:	Classification Of Case:		





2 of

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220522/7056

front right portion of my vehicle collided into the said lorry left portion.

The impact causes my right knee to hit onto the dashboard.

I then check on my daughter and realised that she felt pain on her neck and shoulder areas.

I also start to feel pain on my neck, shoulders and lower back areas.

We then proceeded to intermedical kovan clinic to seek treatment and both of us were given 3 days MC.

Signature Of Informant: The identity of the person making this report has been authenticated by Singpas No signature is required.	
Date/Time: 22/05/2022 20:40	
Classification Of Case:	

HITACHI Inspire the Next

13 MAY 2019

ABDUL ADZIM BIN ABDUL AZIZ BLK 673 EDGEFIELD PLAINS #17-619 SINGAPORE 822673

Dear Sir/Madam,

AUTOMOBILE LEASE AGREEMENT -93435 VEHICLE REGISTRATION NUMBER -SMK7751H MAKE & MODEL-HONDA VEZEL 1.5X CVT

We refer to the above.

The Vehicle was registered successfully.

Since then, we have re-worked the rental calculations based on the actual COE & OMV figures.

Therefore, your revised monthly rental is read as \$1,096.74 (include GST).

The difference (if any) which has been collected from you beforehand will be adjusted accordingly from your 2nd rental.

We hereby attach the documents below (where applicable) for your retention and safe-keep:-

☑	Automobile Lease Agreement
	Road Tax Disc
	Certificate of Insurance (copy)
	Others:

For customer who has already submitted the GIRO application form to us, we will inform you once the GIRO application is approved. Please make payment till you receive notification from us.

Thank you.

Yours Sincerely, Hitachi Capital Asia Pacific Pte Ltd

This is a computer generated letter, no signature is required.

Hitachi Capital Asia Pacific Pte. Ltd. (Main Office) co. Reg. No. 199400399N 111 Somerset Road #14-05 Singapore 238164 Tel: (65) 6734 1222 Fax: 6734 8835

111 Somerset Hoad #14-05 Singapore 238164 | let: (65) 6734 1222 | Fax : 6734 8633 www.hitachi-capital.com.sg

Jun Talyo Service Centre (Automobile Workshop) 8 Fourth Lok Yang Road Singapore 629705 Tel: (65) 6466 3022 Fax: (65) 6896 6591

HITACHI Inspire the Next

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

Agreement Date: 24/04/2019

greement No.:	93435	AUTOMOBILE L	EASE AGREEMENT CHEDULE	
(Lessor)	Name Address	: Hitachi Capital Asia Pacific Ptc. Ltd. : 111 Somerset Road #14-05 Singapore	UEN No.: 199	400399N
(Lessee)	Name Address	: ABDUL ADZIM JAWAHIR BIN ABDU : BLK 673B EDGEFIELD PLAINS #1		No: \$8633793B
(Guaranter)	Name Address		NRIC/PP/UEN	No:
DESCRIPTION	The second second second second			
		EL AND DISTRIBUTOR OF VEHICLE A VEZEL 1.5X CVT	COLOUR	REGISTRATION NO.
	Engine No. ;	MJ1315615 / L15B5565628 TIMES ("Distributor")	WHITE	SMK7751H
Period of I Initial Pay SGD\$ 1, Security D	ement Date: Lease: From ment of SGD\$_ 024.99 eposit: SGD\$_	24/04/2019 24/04/2019 to 23/03/202 10,090.41 Plus GST SGD\$ 706 each Plus GST SGD\$ 71.75 ("Reatal"), d	.33 ("Initial Payment") and the ue on the 24th day of each mo	ase Period") ereafter 118 monthly rental of onth (payable in advance) ("Due Date").
5. 24 Hr Em 6. 24 Hr Em 7. Collision 1 8. Mandator 9. GPS Trac 10. Provision 11. Replacem 12. Contracto	ergency Break of crigency Break of Damage Waiver y Excess SGDS, king: YES (Ple of Courtesy Ca ent cost of Veh or (pursuant to C	Janual / Not-included in Rental Jown & Towing in Singapore: VES / NO Jown & Towing/in Malaysia: TES / NO (CDW): VES / NO 1,500.00 (in Singapore) and SGD\$ 1,50 asse refer to Clause 17.3 / NO 1: VES (subject to Clause 7.4) / NO icle's Tyres : Included in Package / Payable by clause 12.1.1):		and every single accident.
13. Estimated	Residual Value	e (For reference only): \$7,990.26		
AND THE RESERVE AND THE RESERVE AND THE	ULARS OF M.	AIN NAMED DRIVER ABDUL ADZIM JAWAHIR BIN ABDUL A	ZIZ Date of Birth :	Harris San Charles San San Fred
Name : Company :			Nationality :	
Address :			Contact No :	
			Driving Licence No	
NRIC/FIN/PP		S86337938		
A Proposition of the Park	ULARS OF O	THER NAMED DRIVER	Date of Birth :	
Name :			Nationality :	
Company: Address :			Contact No :	Charles of the Control of the Contro
NRIC/FIN/PP	No.		Driving Licence No	
VITNESS to Le			SIGNED by for and on behalf of AOMA CAPITA	ALMASIA ASISIPACATIC HITO, LTD. (Lesson
				(pu
	Cum	X.	MATTHEWELEE	(MR)
	kle Far	rideh	Authorised SignatorNicle Solutions	
ame: RIC/PP No.:	381116	5137	Total Vehicle Sol	utions Department
VITNESS to I	essee Signatur	e	SIGNED by OR for and of behalf	f of <u>LESSEE</u> :
STORES	11			
	Utz		L.	
Vitness Signat	ure Name; NRIC/PP	Childsehlang No systestea	Lessee Signature (Name : Abdu	I Adzim Jawahir Bin
WITNESS to G	iuarantor Sign		SIGNED by GUARANTOR:	
Witness Signatu	are Name: NRIC/PP	No	Guarantor Signature (Name :)