

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	08/06/2022 12:52 (SGT)
Date of Accident	07/06/2022 12:18 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF NORTH BRIDGE ROAD & ROCHOR ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML6932D
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DEFINE LEASING PTE LTD
Company Reg No	2XXXXX674Z
Email Address	STERENAW@HOTMAIL.SG
Mobile Phone No	(Phone) +65-82024804
Alternative Phone No	+65-82024804

VEHICLE PARTICULARS

Manufacturer	Honda
Model	SHUTTLE HYBRID 1.5 AUTO
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SPMF1000000501
Cover Note Number	-

DRIVER

Name of Driver	AW CHIEH SIONG
NRIC No	SXXXX426D

Date Of Birth	18/10/1975
Occupation	Outdoor
Date Of Driving Pass	09/12/2003
Driving experience	18 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82924810
Alt. Phone Number	-
Email Address	STERENAW@HOTMAIL.SG
Address	BLK 679A PUNGGOL DRIVE
Address complement	15-878
Postcode	821679
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	drizzling
Road Surface	Wet

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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	PASSENGER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

-

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO FOOTAGE WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME9735Z
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JAMIE BONG
Contact Number	(Phone) +65-97403993
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	AW CHIEH SIONG
Gender	Male
Phone No	(Phone) +65-82924810
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SML6932D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN



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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.

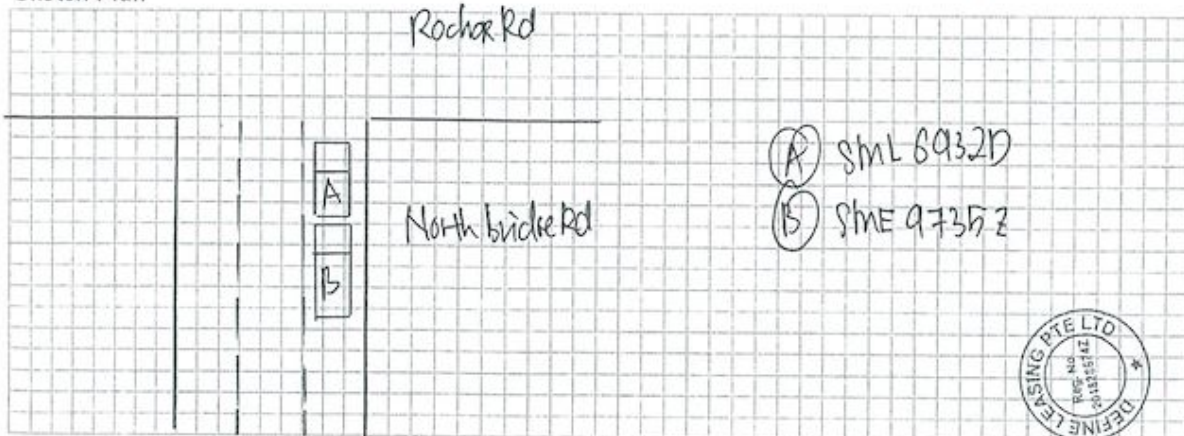


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to Police Report No: P/20220607/7035

A large rectangular area with horizontal lines for describing the accident circumstances. A diagonal line is drawn across the area from the bottom left to the top right.



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

hash

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

Witnessed by Reporting Centre Personnel

[Signature]

Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SPMF1000000501
 Date of Issue : 13 January 2022
 Coverage : COMPREHENSIVE - AUTHORISED WORKSHOP
 Policyholder : DEFINE LEASING PTE. LTD.
 Finance Company : SKYWAY CREDIT & LEASING PTE LTD
 Period of Insurance : 15 January 2022 To 14 January 2023 (both dates inclusive)
 Registration Number : SML6932D
 Chassis Number of Vehicle : GP72002113

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with the his/her permission or to whom the vehicle is hired.
 * Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
 (b) Use for social, domestic and pleasure purposes 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 any person to whom the vehicle is hired and for use within Singapore only.

* Limitation rendered inoperative by Section 8 of 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.

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
 (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

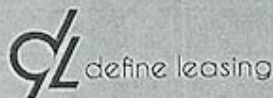
I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

13 January 2022
 Issue Date


 Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code	: 0000347 CASA MERAKI PTE. LTD.		
Excess	Section 1 : Own Damage Within Singapore	SGD	2,000.00
	Section 1 : Own Damage Outside Singapore	SGD	4,000.00
	Section 1 : Windscreen	SGD	100.00
	Section 2 : Liabilities to Third Parties Within Singapore	SGD	1,500.00
	Section 2 : Liabilities to Third Parties Outside Singapore	SGD	3,000.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C
 79 Robinson Road #09-01 | Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

**DEFINE LEASING PTE LTD**

ROC No. 201828674Z
 4 Loyang Crescent Singapore 508979
 Tel : (65) 6214 3633 / HP : (65) 8202 4803
 Email : support@defineleasing.com.sg Facebook: @DefineLeasingSG

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VEHICLE RENTAL AGREEMENT

Date Signed :	30/3/2022			Vehicle Rental Agreement No.	DL/WT/2021000 1		
RENTER'S PARTICULARS							
Renter/Company Name :	Aw Chieh Siong						
NRIC/ROC No. :	S7531426P	DOB :	18/10/1975				
D/License No. :		Passed Date :					
Address :	679A Punggol Drive #15-878						
	Singapore 821679						
Tel (M) :	9690 1156	Steveaw					
Next of Kin :		Tel (M) :					
ADDITIONAL DRIVER'S PARTICULARS (If Any)							
Renter/Company Name :							
NRIC/ROC No. :		DOB :					
D/License No. :		Passed Date :					
Address :							
Tel (M) :		Email :					
* Additional charge of S\$20.00 / week is applicable (GST not applicable)							
VEHICLE'S CHECKLIST							
Checked by :		Mileage :					
Date out :		Time out :					
Petrol in : Empty 1/8 1/4 3/8 1/2 5/8 3/4 7/8 Full							
(A) - ACCIDENTS (D) - DENTS (S) SCRATCHES							
Checked by :		Mileage :					
Date in :		Time in :					
Petrol in : Empty 1/8 1/4 3/8 1/2 5/8 3/4 7/8 Full							
VEHICLE'S DETAILS							
Vehicle No. :	SML6932D						
Make & Model :	HONDA SHUTTLE HYBRID						
RENTAL PERIOD							
Rental Tenure :	12	(Months)	-	(Days)			
Start Date :	30/3/2022	End Date :	29/3/2023				
NON-WAIVER EXCESS : S\$2500 / S\$2500 (Section 1 & 2)							
RENTAL CHARGES* & DEPOSIT							
Security Deposit (GST not applicable)						\$ 1,500.00	
Daily Rental	per day @					\$ 63.00	
Weekly Rental	per week @					\$ 441.00	
Collision Damage Waiver	per day @					\$ 6.00	
"CDW" (GST inclusive if any)	per month @					\$ 180.00	
Others (GST inclusive if any)						\$ -	
1) Deposit - b/f (Cash / Paynow)						\$ 1,500.00	
2) CDW "1 month" (Cash / Paynow)						\$ -	
Amount Collected (dd/mm/yy)						\$ 1,500.00	
Outstanding Balance						\$ 180.00	
Final Amount Collected (dd/mm/yy)						\$ -	
Refundable Deposit (GST not applicable)						\$ -	
Damage Recovery (Vehicle Returned)						\$ -	
Total						\$ -	
Authorised Signatory & Co. Stamp							
PAYMENT MODE :							
Account Name : Define Leasing Pte Ltd							
Bank Name : OCBC Bank							
Account No. : 7128 7262 1001							
Paynow UEN : 201828674Z							
** SMS or WhatsApp once transaction done **							
The Renter has read, understood and agrees with all the terms and conditions of this Rental Agreement.							
The Renter's			Additional Driver's				
Signature (& Co. Stamp if any)			Signature				
Name : Steve Aw Chieh Siong			Name :				
Date : 30/3/2022			Date :				

























**SINGAPORE
POLICE FORCE**



T/20220607/7035

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20220607/7035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2022 16:43		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: AW CHIEH SIONG			Address: 679A PUNGGOL DRIVE #15-878 SINGAPORE 821679		
ID Type / ID No.: NRIC NO / S7531426D			Contact No.: Home/Office: Mobile: 82924810		
Nationality: SINGAPORE CITIZEN			Email: STEVENAW@HOTMAIL.SG		
Sex: Male	Age: 46	Date of Birth: 18/10/1975	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/06/2022 12:15	Type of Location: Straight Road
Location: NORTH BRIDGE ROAD				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No. of
SME9735Z	Car		KIA	Blue		0
SML6932D	Car		HOND SHUTTLE	White		1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20220607/7035

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220607/7035

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SML6932D	ALLIANZ INSURANCE SINGAPORE PTE. LTD.			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	AW CHIEH SIONG		ID No. S7531426D
Related Vehicle	SML6932D (Car)		Contact No. 82924810
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	05	Degree of	Slight

Brief Details.

ON 07.06.2022 AT ABOUT 1218HRS, I WAS TRAVELLING ALONG JUNCTION OF NORTH BRIDGE ROAD & ROCHOR ROAD. UPON REACHING THE TRAFFIC JUNCTION, THE TRAFFIC TURN RED. I SLOW DOWN AND STOP. WHILE WAITING ALL OF A SUDDEN I FELT AN IMPACT FROM THE REAR. THEN I REALISED A VEHICLE SME 9735Z HAD COLLIDED ONTO MY REAR. THERE'S A FEMALE PASSENGER IN MY VEHICLE. DUE TO THE IMPACT, I WENT TO SEE A DOCTOR AND WAS GIVEN 5 DAYS OF MC. THAT'S ALL.



**SINGAPORE
POLICE FORCE**



T/20220607/7035

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20220607/7035

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
BOON YEN KIAN
Contact No.: 65476172

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
07/06/2022 16:43

Classification Of Case:

