

Date of Accident : 7.7.22 Accident Time : 6.00 pm (24 -HR-Format)

Accident Place (A) : Paya Lebar ~~at~~ expressway

Vehicle Reg. No.(Car Plate No.): SLF 4388G

Vehicle Make/Model : Toyota Vios

Insurance Company : Liberty Insurance Pte Ltd Policy No SD22V02830/VPZ/R01

Owner or Company Name/IC No : Boss Car Leasing Pte Ltd. 202101709H

Owner or company Contract No: \_\_\_\_\_ Owner's Hp 81288789 Company Tel \_\_\_\_\_

DRIVER'S Name / IC No : Ishak Abdul Latiff IC No: 51590692H

DRIVER'S Date Of Birth : 18-5-63 DRIVER'S Licence Pass Date: 12-6-2009

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Other \_\_\_\_\_

DRIVER'S Address : Blk 850 Tampines ST-82 #03-245 (520850)

DRIVER'S Contract No /Alt No :1) 90077745 2) \_\_\_\_\_

DRIVER'S Occupation : INDOOR \ OUTDOOR \ (e.g. Working inside or outside office)

Email Address : dreamcarrentals@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

Passenger Name : \_\_\_\_\_ (Male / Female)

Was there any video captured by car camera : YES \ NO

Exact purpose for what vehicle was being used at the time of accident : Private use \ Work Purpose .

(B) Other Party Driver's Particulars ( If any )

(C)

Vehicle Reg No: SMS 3373A Vehicle Reg No: \_\_\_\_\_

Vehicle Make \ Model: Subaru Forester Vehicle Make \ Model : \_\_\_\_\_

Driver Name : Teng Driver Name: \_\_\_\_\_

Driver IC No : \_\_\_\_\_ Driver IC No: \_\_\_\_\_

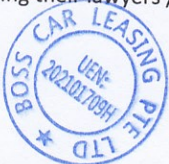
Driver's Contract & Add: 85691262 Driver's Contract & Add: \_\_\_\_\_



## IMPORTANT NOTICE

## SKETCH PLAN

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. 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

PAYA LEBAR  
EXPRESSWAY

A = SLF 438PG  
B = SMS 3373A



**Describe Circumstances of the Accident**

It was about 6pm. There were so many cars. Traffic was quite heavy. The front car made an emergency brake. My car hit it ~~to~~ from behind.

**Declaration**

I / We declare the foregoing particulars are true in every respect.



12/8/22  
6pm

Policyholder's Signature /  
Date & Time

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

12/8/22  
6pm

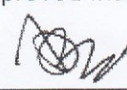
Witnessed by Reporting Centre  
Personnel

CMH



## 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>	<b>SD22V02830 /VPZ /R01</b>
<b>Form</b>	MZ406D
<b>Date Of Issue</b>	21-FEB-2022
<b>1.Index Mark and Registration No. of Vehicle:</b>	SLF4388G
<b>2.Chassis number of Vehicle:</b>	MR053HY9305115802
<b>3.Name of Policyholder:</b>	BOSS CAR LEASING PTE LTD
<b>4.Effective date of Commencement of Insurance for the purpose of the Act:</b>	24-FEB-2022 00:00 AM
<b>5.Date of Expiry of Insurance:</b>	23-FEB-2023 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> 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.	
<b>8.Policy does not cover:</b> 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>*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>	
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.	
For and on behalf of <b>LIBERTY INSURANCE PTE LTD</b> Approved Insurers  _____ Authorised Signature	
<b>For Information only:</b> <b>COVERAGE :</b> Third Party Only,PHV Extension (Geographical Area: Singapore only) <b>SUM INSURED:</b> <b>EXCESS:</b> Section II S\$2000,Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$2000 <b>FINANCE COMPANY:</b> <b>PRODUCER NAME:</b> NEWSTATE STENHOUSE (S) PTE LTD	

PLVC/-/21-FEB-22

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

21-FEB-22