# **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 Actual 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 29/08/2022 16:30 (SGT) Reported by Date of Accident 27/08/2022 19:10 (SGT) Exact Location of Accident Eunos Link, Singapore Additional Location Information Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **SJR4998G** 

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SHINYCAR LIMITED PARTNERSHIP Company Reg No T17LP0002A Email Address T JEX@HOTMAIL.COM Mobile Phone No (Phone) +65-91885523 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Vios Variant Exact purpose for which vehicle was being used at time of Private use

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1500

**INSURANCE COMPANY** 

Name of Insurance Company Etiga Insurance Pte Ltd Policy Number / Cover Note Number M0018990

DRIVER

Name of Driver PNG TECK JIN NRIC No S8118279E Date Of Birth 08/06/1981 Occupation Outdoor

Date Of Driving Pass 03/06/2006 Driving experience 16 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-85115125 Alt. Phone Number Email Address T\_JEX@HOTMAIL.COM Address BLK 201A PUNGGOL FIELD #16-208 Address complement Postcode 821201 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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 Chain Collision Weather Conditions Raining Road Surface Wet 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? 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name PNG ENG CHIANG Gender PASSENGER 2 Name HONG CHYE OON Gender **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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20220828/7005. ATTACHMENT(S)

Yes

Yes

Are accident photos available for attachment?

Was there any video captured by Car Camera?

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

SLV9989E
-
-
-
-
Private car
-
-
-
-
-
-
-
VEHICLE B
2

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Valsiala Danistratian Namahan	
Vehicle Registration Number	SHD6218J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	_
Address	-
Address complement	-
Postcode	-
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	VEHICLE C
No. Of Passenger (Including Driver)	
No. Of Fasseriger (including briver)	-

## **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?  Were seat belts worn?  Was this injured conveyed to hospital by ambulance?	PNG TECK JIN Male SJR4998G Yes No
Name of injured person  Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	HONG CHYE OON Female SJR4998G Yes No

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 GA 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.
- 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 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 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' 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.



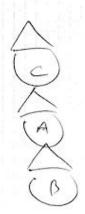
Policyholder's Signature / Date & Time

Briver's Signature (If dri

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

Witnessed by Reporting Centre Personnel

Sketch Plan



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			New York	
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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

Witnessed by Reporting Centre Personnel



# INTERVIEW FORM

Name (Driver)	DNG TECK NIN	
Policy No .	10018770	
Vehicle No :	37K 11989	
Place of Accident	ALONG EUNICE UNIT	
Insured Driver's relationship with Insured:	HIRKA	-
	r:_ <i>Ho</i>	
No of passenger(s) in Insured vehicle :2		
Injury to Insured and/or Insured driver, please		
	PRIVAN L (PATIENCEN HO	MI MY
Third Party Vehicle No (if any) - SLV	99892	THE CHILL COM
	(	
Injury to Third Party driver and/or passenger(s	), please indicate which hospital:	
Type of collision and the extensiveness of the		Transport.
CHAIN COLLISION		
Any witness to the accident (if yes, please indic	ate Name, Contact No and a copy of the statement	):
Traffic Police report (enclosed): Yes / No		
	Insured driver and/or work permit (where fore	lign
h		
/'x		
Driver (Name & Signature)	Attended by (Name & Signature)	<u></u>
I, affirmed the above information is given to my best knowledge	Workshop Name:	
Etiqa Insurance Berhad (Company Reg. No. TogFCoo54K) North Bridge Road, #68-01 High Street Centre, Singapore 179094 I: 465 6336 0477	TO THE PROPERTY CONTRACTOR OF THE PROPERTY CONTR	

Attendered by SEDVI Way to metalic Grow





























1 of 4

Report No. T/20220828/7005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2022 05:23			Vide Report No.:	Station Diary No.		
Informa	nt's Partice	ulars				
Name of PNG TE	f Informant: CK JIN		Address: 201A PUNGGOL FIELD #16-:	208 SINGAPORE 821201		
ID Type / ID No.: NRIC NO / S8118279E			Contact No.: Home/Office:	FR 등 FR ( )		
National SINGAP	ity: PORE CITIZ	EN	Email: T_JEX@HOTMAIL.COM			
Sex: Age: Date of Birth: Male 41 08/06/1981			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation:			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/08/2022 19:10	Type of Location X-Junction
Location: KAKI BUKIT	AVENUE 1			
		and the second second		D 10 111 1
Weather: Raining		Road Surface: Wet		Road Speed Limit: 60 Km/h
	· Way		rking	

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SHD6218J	Car	TOYOTA	Prius			0
SJR4998G	Car	TOYOTA	Vios	Gold		2
SLV9989E	Car	BMW				0



T/20220828/7005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20220828/7005

#### CONTINUATION OF REPORT

Details of Perso						
Any Pedestrian Ir			1777			
No. of Pedestrian	s Injured: NIL		Use of Po	edestria	n Cross	sing: NA
Driver		The Table of the Control				
Name	PNG TECK JIN			ID N	0.	S8118279E
Related Vehicle	SJR4998G (Car)			Cont	act No.	85115125
Hospital/Clinic	NIL			Class Drivin Licer Expir	ng nce &	Class: 3 Date of Expiry: NIL
Date	NIL Date				NIL	
No. of Days gran	ited Medical Leave NIL Degree o			of	Sligh	t
Passenger				57 130	-	
Name	PNG ENG CHIANG			ID No	D.	NIL
Related Vehicle	SJR4998G (Car)			Cont	act No.	98979208
Hospital/Clinic	NIL			Class Drivin Licer Expir	ng nce &	Class: 3 Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	led Medical Leave	NIL	Degree o	The state of the s		
Passenger			- 3.00	W 2175	3.,	
Name	HONG CHYE OON			ID No	о.	NIL
Related Vehicle	SJR4998G (Car)			Cont	act No.	90886326
Hospital/Clinic	NIL			Class Drivin Licer Expir	ng nce &	Class: 3 Date of Expiry: NIL
Date	NIL		Date		NIL	Apple of the second of the
No. of Days grant	ed Medical Leave	NIL	Degree o	·f	Sligh	



T/20220828/7005

3 of 4

Report No. T/20220828/7005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

#### CONTINUATION OF REPORT

Driver					
Name	DESMOND CHOO			ID No.	NIL
Related Vehicle	SLV9989E (Car)			Contact N	lo. 92981266
Hospital/Clinic	NIL			Class of Driving Licence 8 Expiry	Class: NIL Date of Expiry: NIL
Date	NIL Date			NI	L
No. of Days gran	ted Medical Leave	NIL	Degree o	f NI	L

#### Brief Details

Accident happened between 3 cars at junction of Eunos Link and Kaki Bukit Ave 1 travelling towards Katong/East Coast direction. SHD 6218 J was in front of me. SLV 9989 E hit me, SJR 4998 G, from behind causing my car to hit SHD 6218 J from behind. My car, SJR 4998 G, was stationary at the time when SLV 9989 E hit me from behind. SHD 6218 J was also stationary at the time when the accident happened.

The accident happened when the traffic light just turned green. My car, SJR 4998 G, was slowly moving forward, but I saw SHD 6218 J stopped in front of me, so I brake to a stop also. Within a few seconds, SLV 9989 E, hit me from behind and the impact caused my whole car to move and hit SHD 6218 J in front of me.

I have a 2.19MB video of the car positions and conditions after the collision.

Accident happened on Eunos Link, but online map does not allow me to choose Eunos Link, so I had to pick Kaki Bukit Avenue 1.



T/20220828/2005

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20220828/7005

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 28/08/2022 05:23
Officer In Charge Of Case: TP / TPIB / FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:

NP168

147400 88000004

Cov. Type: Third Party Only

#### 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 (MALAYSIA) . MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. M0018990

Index Mark and Registration 1. Number of Vehicle

4. Date of Expiry of Insurance

SJR4998G

2. Name of Policyholder

Shinycar Limited Partnership

Effective Date of Commencement of 3

26/06/2022

Excess: Section II

55 1,500

Insurance for the purposes of the Act

22/03/2023

5. Persons or Classes of Persons entitled to drive

Engine No : 1NZX913376

Chassis No

: MR053HY9305114281

(A) THE POLICYHOLDER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER:
(1) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(1i) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

\* 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 (Malaysia), are not to be included under these bindings.

#### Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

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).

GOPLTY 18/02/2022 11:26:28



For and on behalf of Etiqa Insurance Pte. Ltd. Approved Insurer

Authorised Signature

Shiny Car SG

~	٠.		Market Committee		444
S.	ēη	T-22.0	0.000		12
-7	9.7	15 5 5 17	Car	Sec.	

Car Rental Agreement

Deposit: \$500 \$200

Payment: By 1<sup>st</sup> day of the new week / month\* by bank transfer to POSB 339-01449-3 or Paynow 87002827(\*Delete which s not applicable)

#### Insurance excess according to insurance policy

- 1) The RENTER acknowledges that the VEHICLE is the property of ShinyCar L.P. and the VEHICLE is in perfect working condition. The RENTER is obligated to return the VEHICLE together with all tires, tools, accessories and equipment on the arranged date or as requested by ShinyCar L.P.. Returned vehicle must be in as perfect working condition as when the vehicle was delivered.
- 2) Fuel is at the RENTER's expense.
- 3) The RENTER shall take proper care of the vehicle and operated the vehicle with proper care and obliged to traffic rules and regulations governs by Singapore laws.

In the event of any breached of traffic rules and regulations governs by Singapore laws, the RENTER shall be liable to pay all fines and penalties incurred and be responsible to any Police and Traffic Court Summons, including all notices and inquiries in connection therewith. In particular, the RENTER is to ensure that;

- (a) The vehicle must not be overloaded;
- (b) At all times the vehicle must be provided with sufficient oil, water and the prescribed tire pressure;
- (c) When not-in-use, the vehicle must be properly parked and locked.
- (d) The vehicle cannot be use for any illegal activities such as transportation of drugs, illegal immigrants, firearms etc., according to the laws govern in Singapore.
- 4) The refundable deposit to ShinyCar L.P. is payable by the RENTER to ShinyCar L.P upon delivery of the VEHICLE. ShinyCar L.P shall be entitled to deduct from the said deposit at its discretion and without notice to the RENTER any amount due or owed by the RENTER to ShinyCar L.P.
- 5) The vehicle will only be driven by the RENTER and that the RENTER must be qualified driver with a valid driving license issued by Singapore Land Transport Authority and at least 23 years of age.
- 6) The vehicle is insured under a standard motor vehicle commercial insurance policy in accordance with laws of Singapore covering liability of the RENTER, in respect of any party injury or death and passenger risk liability. The RENTER agrees to be bound by the terms and conditions of the said policies, a copy of which is made available for the RENTER. The RENTER will protect the interest of ShinyCar I.-P. and the insurance company in the event of accident by;
  - (a) Obtaining names and addresses of all parties involved and of witnesses and not admitting liability or guilt without notice to ShinyCar L.P;
  - (b) Not abandoning the vehicle without adequate provisions for safeguarding and securing the vehicle;
  - Lodging a detailed report including diagram for any form of accidents and damages (minor/major) within 24 hours at the nearest police station;
  - (d) Notifying ShinyCar L.P.'s insurers immediately of such accidents and submitting a duly completed Motor Accident Report Form;

Page 1 of 2



#### ShinyCar L.P.

#### Car Rental Agreement

- (e) Make available to ShinyCar L.P. all correspondence, Writs and/or documents of any kind received by the RENTER relating to any accident involving the vehicle while rented under ShinyCar L.P. Agreement;
- (f) comply with all requests by ShinyCar L.P to provide assistance in any litigation or investigation of such accident.
- 7) In an event of an accident, the insurance excess will be borne by the Renter. The Renter shall make full payment of the rent till vehicle is repaired and returned to ShinyCar L.P

#### Maintenance of Vehicle

- 1) All servicing cost will be bare by ShinyCar L.P.
- Reserve the rights to scrap/take back the stated car with given 1 week notice.
- If renter fails to comply for below stated points (1) to (4), ShinyCar L.P. reserves the right to possess back the car. Deposit will be non-refunded.

#### Renter Responsibilities:

- 1) Responsible to send in the car for servicing at every 10000km intervals at designated workshop.
- 2) Responsible to send the car to designated workshop immediately upon any problems or warning lights surface from the Vehicle
- 3) Responsible for punctured tires repairs. 2022 84
  4) Rental of vehicle till 31 / 12 / 2476 (DD/MM/YYYY).
- Further rental extensions require by the RENTER will subject to vehicle availability.
- 6) Deposit will be returned upon returning of vehicle to ShinyCar L.P with given 2 weeks notice
- 7) Responsible to check all vehicle fluids and to top up if necessary.

T17LP0002A	Renter Details  Name: Pry Teek Jin  NRIC: SETIG279F  Address: 2014 Punggol Field #16-200  Mobile: 85115125
*	B.
Signature and Date	Signature and Date

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