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 29/09/2022 10:28 (SGT) Reported by Date of Accident 28/09/2022 08:50 (SGT) Exact Location of Accident MCE, Singapore Additional Location Information TWDS ECP Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

No - Claiming third party

Vehicle Registration Number SLM7244G

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner PRECISE CAR RENTAL PTE LTD Company Reg No 201818221G Email Address CARLEASING@PRECISEAUTO.SG Mobile Phone No (Phone) +65-94897930 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Axio Variant Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category

Private car Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company Etiga Insurance Pte Ltd Policy Number / Cover Note Number M0022809

DRIVER

Name of Driver KAMARUDIN BIN AHMAD NRIC No S1421480A Date Of Birth 24/10/1960 Occupation Indoor

Date Of Driving Pass 07/01/1987 Driving experience 35 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +62-811845646 Alt. Phone Number Email Address KAMARUDIN_AHMAD@BAHTERANIYA.COM Address 41 LORONG MARICAN Address complement Postcode 416086 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 Collision - Head to Rear 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? No 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 **ENDANG PALUPI** Gender **Female** DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 28/09/2022 AT 0850HRS, I WAS DRIVING MY RENTED CAR (SLM7244G) WITH ONE PASSENGER (MY WIFE) ALONG MCE

ON 28/09/2022 AT 0850HRS, I WAS DRIVING MY RENTED CAR (SLM7244G) WITH ONE PASSENGER (MY WIFE) ALONG MCE TOWARDS ECP (INSIDE TUNNEL) IN THE 4TH LANE FROM THE RIGHT. SUDDENLY, I FELT AN IMPACT FROM BEHIND AND I REALISED THAT A TAXI (SHD3177M) SWERVE INTO MY LANE FROM THE LEFT AND THEN COLLIDED ONTO MY REAR PORTION OF MY RENTED CAR. BOTH PARTIES HAD EXCHANGED PARTICULARS AFTER ACCIDENT IMPACT. ME AND MY PASSENGER WILL VISIT MY DOCTOR IF WE FEEL ANY DISCOMFORT AFTER THIS. HENCE, I HERE TO LODGE THIS RPEORT TO CLAIM AGAINST TAXI (SHD3177M)'S INSURANCE FOR MY ACCIDENT DAMAGES.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

Reasons for not uploading a video of the accident NOT AVAILABLE. WITH TP WORKSHOP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD3177M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	TEO HUP KHIAM
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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.
- Consent under the Personal Data Protection Act (PDPA)

l 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' 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
- (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.

RC: ROC.: 201818921077

Policyholder's Signature / Date &

AS)

Driver's Signature (If driver is not the policyholder) / Date & Time 28 9 22 @ 11:35 a.M.

Witnessed by Reporting Centre Personnel

Sketch Plan

Time

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Declaration

IWe declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Driver's Signature (If driver is not the policyholder) / Date & Time 28 9 22 00 11:35 am

Witnessed by Reporting Centre

etiqa Insurance

INTERVIEW FORM

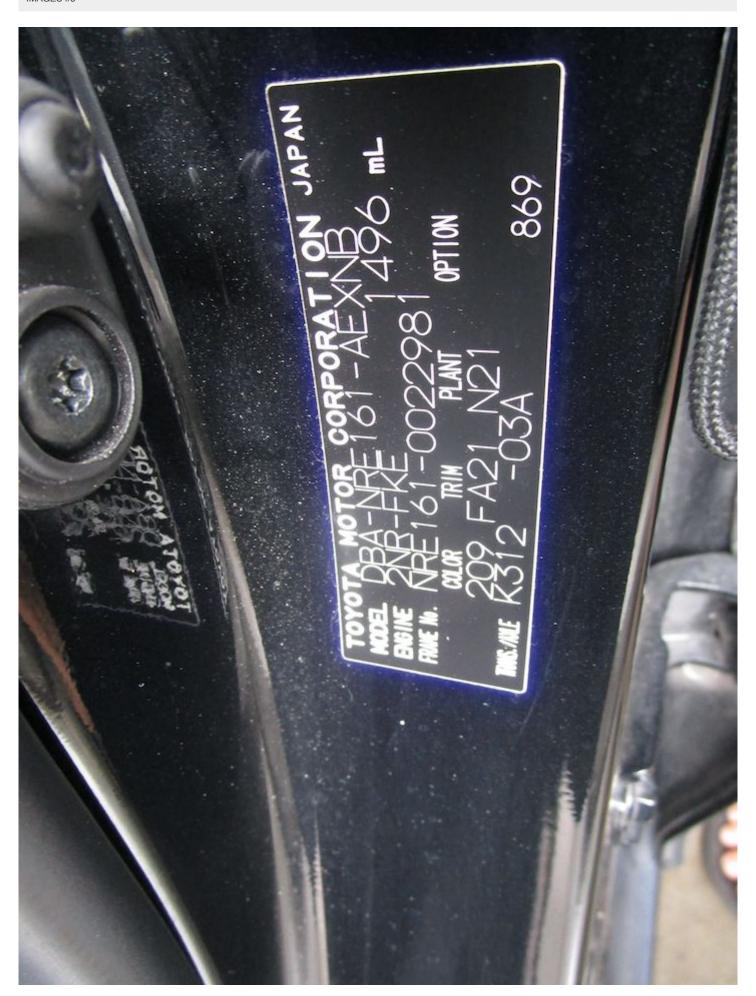
Name (Driver)	:Kamarudin	Bin Ahmad	
Policy No	:M0022809		
Vehicle No	:_ SLM 721	44 G	
Place of Accident	: Along MCE :	towards ECP (In	side tunnel)
Insured Driver's relations	hip with Insured :Hi	irer	
Drink Driving of Insured	and/or Insured Driver :	No	
	ared vehicle: +1		
To be	sured driver, please indicate w confirm by driver	& passenger	
Third Party Vehicle No (if	any):SHO3177	М	
No of passenger(s) in Thir	d Party Vehicle : 3 0	r 4	
Injury to Third Party drive	r and/or passenger(s), please in	idicate which hospital:	
Type of collision and the e	xtensiveness of the damages to	all vehicles involved:	
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Any witness to the accident	(if yes, please indicate Name,	, Contact No and a copy o	f the statement):
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liga Insurance Berhad (Comp. Yorth Bridge Road, #c8-o1 High Street			
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LETTER OF UNDERTAKING

I/We, Precise Car Rental PIL	, the owner of vehic	cle no. SLM 72446
My/Our Insurance is under M/s Etiqa In claim under my/our Policy or against the such a claim to M/s Etiqa Insurance Pte within 14(fourteen) days of occurrence	e Third Party and if the for Ltd with all relevant fact	ormer shall submit is and documents
My/Our Third Party claim is handle by r	ny/our preferred worksh	op, Precise Auto Svc.
Signed and Acknowledge by:		
<u>J</u> A	S SERVICE S	28/9/22
Nric no. & signature of policyholder	Company stamp	Date



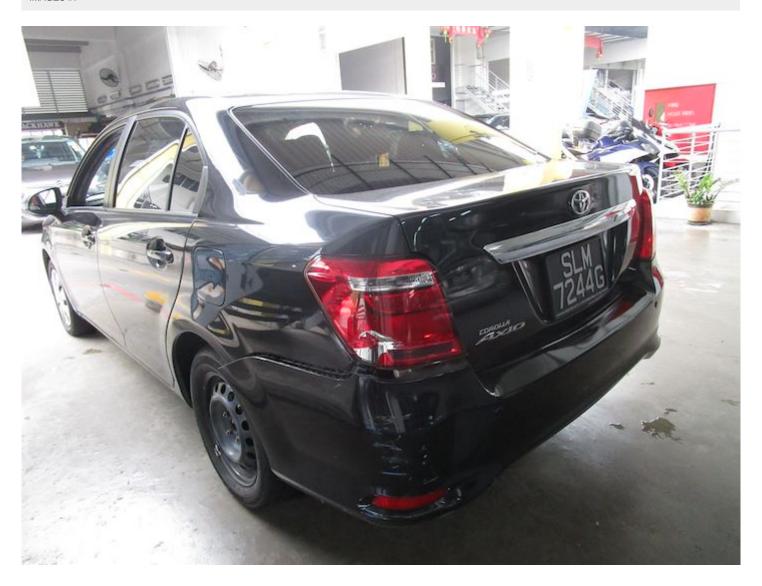




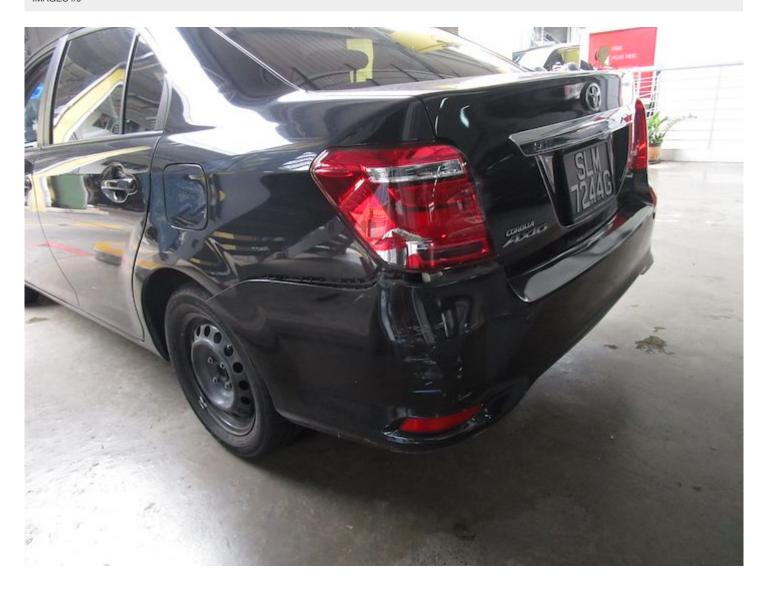


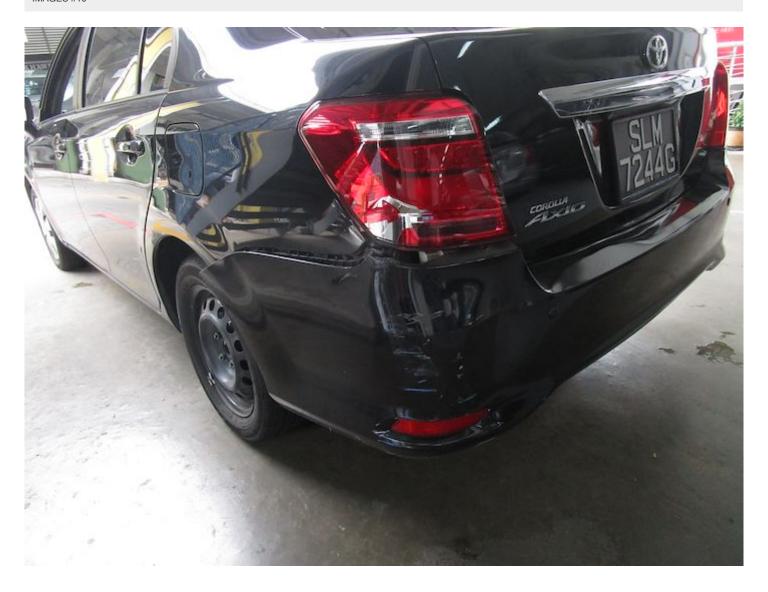














eTiQa

MZ400 31023901 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. M0022809 Index Mark and Registration SLM7244G Number of Vehicle Name of Policyholder Precise Car Rental Pte Ltd 3 Effective Date of Commencement of 23/09/2022 Excess: Section II S\$ 1,500 Insurance for the purposes of the Act 4. Date of Expiry of Insurance 05/05/2023

5. Persons or Classes of Persons entitled to drive

Engine No : 2NR8691317 Chassis No : NRE1610022981

(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:
(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(ii) 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.gla.org.sg or www.fla.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).

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

GOPTLAY 21/09/2022 16:11:10



Authorised Signature



PRECISE CAR RENTAL PTE LTD UEN: 201818221G 1 Kaki Bukit Avenue 6 #02-34 Autobay@Kaki Bukit S(417883) TEL: 67457367

RA NO: U 1070 DATE: 22-09-2022

Rental Agreement

Vehicle Number	Make/Model		Usage	Salesmai	n		
SLM7244G TOYOTA AXIO			Personal				
MERCETES FOLDER	TOUL INS		531.784.67277	10 DE DOMENTA A 150			
Name: KAMARUDIN BIN AHMAD			Name:				
Address: 41 LORONG MARICAN		A	ddress:				
Singapore 416086							
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