SD08229S0002 / Ding Auto Pte Ltd ENTRY DATE & TIME: 28/09/2022 11:29 (SGT) SUBMITTED BY: Lynn Yap VERSION: 1 (28/09/2022 11:29 (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 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 28/09/2022 11:29 (SGT) Reported by Date of Accident 08/09/2022 06:48 (SGT) Exact Location of Accident Singapore Additional Location Information CHANGI AIRPORT T1 DEPARTURE DOOR 5 Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

1797

Vehicle Registration Number **SLT1387E** 

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **BIZTEK LEASING** Company Reg No 53329851B Email Address DAV.BIZTECKLEASING@GMAIL.COM Mobile Phone No (Phone) +65-98321500 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model C-hr 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

No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto

**INSURANCE COMPANY** 

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SPMF1000000534

DRIVER

CC

Name of Driver PEREIRA ELVIS X' AVIER NRIC No S8224079I Date Of Birth 27/07/1982 Occupation Outdoor

Date Of Driving Pass 26/09/2018 Driving experience 4 YEARS Gender Male Mobile Number (Phone) +65-80232178 Alt. Phone Number Email Address DAV.BIZTEKLEASING@GMAIL.COM Address **BLK 291 TAMPINES STREET 22** Address complement #07-434 Postcode 520291 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 - Change/cross lane 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? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLQ5834X Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car

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)		_

## SKETCH PLAN

## IMPORTANT NOTICE

- 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.
- 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.
- 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 &

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

Witnessed by Reporting C Personnel

Sketch Plan

CHANGI BIRRORT DEPRISTURES

						NC	the	Sto	ited	90	tes	1 +1	mes	an	9 10	ca	neit
(	Jev	ازرك	~A	V	uus	0	iliql	ntelle	7	my	91	ab	ch	ent	at	-	71
121	parti	ire	90	0/ 0	5 ,	V	He	9	rop	piny	0 (	ţ	hef	ove	1	m 0	rect
0	4	S	199	entr	1		Ret	4 9	1	Jery	hi	192	\M	pac	t	en	m
+1	ne	K.1.	Sht	£	von.	t	90	mu		Veh	icle	1	V	Lhic	le .	B	1
CV	1+	int	0	my		la	re	an	9	Coi	llide	Ş	ont	0	m	1	Veh
20	, uses	_ dg	rmag	e +	70	my	V	enic	le		tha	+	all				
														-			
		-															
				_													
		7,00						-						-			
											21						
								-	-				-				

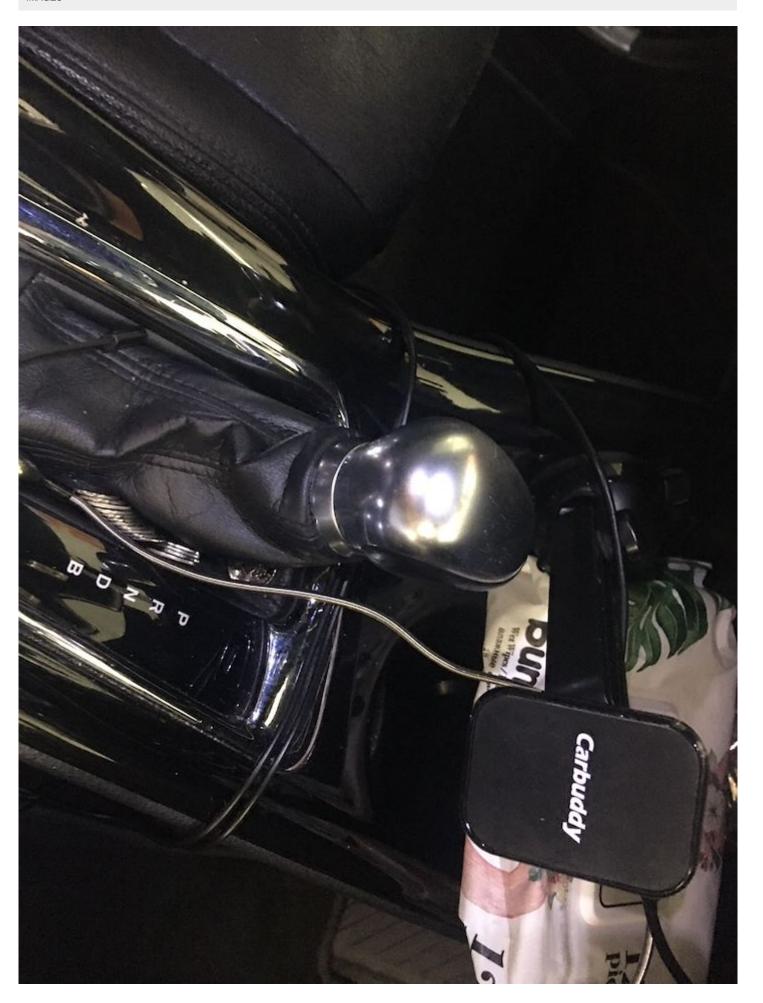
# Declaration

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 0 1 Personnel



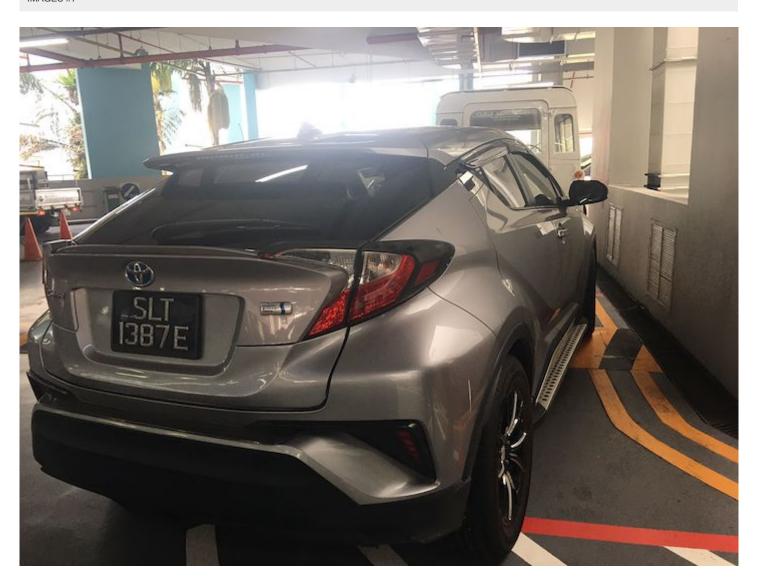




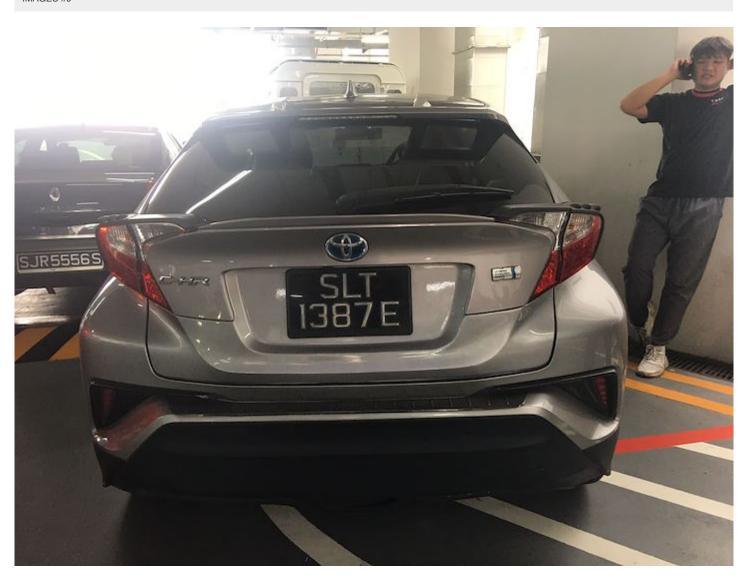
















Allianz Insurance Singapore Pte. Ltd.

#### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTOR VEHX.(ES [THRD: PARTY RISKS) RULES 1959 (FEDERATION OF MALAPSIA).
MOTOR VEHX/LES [THRD: PARTY RISKS AND COMPENSATION] ACT (CAP 189 OF THE REVISID EDITION). REPUBLIC OF SINGAPORE).

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC DE SINGAPORE)

MOTOR VEHICLES (THIRD PARTY RISAS AND COMPENSATION) RULES 1960 OR ANY AMENOMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREO

Certificate Number : SPMF1000000534 Date of Issue : 20 April 2022

: COMPREHENSIVE - AUTHORISED WORKSHOP Coverage

Policyholder : BIZTEK LEASING

: HONG LEONG FINANCE Finance Company

: 12 April 2022 To 11 April 2023 (both dates inclusive) Period of Insurance

Registration Number : SLT1387E Chassis Number of Vehicle : ZYX102069999

## 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
- Provided that the person driving is permitted in accordance with the licensing prother 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 in operative 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 here by 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)

20 April 2022

Issue Date

Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code

0000156 GENRIVER FINANCIAL PTE LTD

Allianz Insurance Singapore Pte. Ltd. | DEN 20190 19130

79 Robinson, Road #09-01 | Singapore 668897 | Tel: +65-6714-3369 | Website, www.alianz.sy