



# 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 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	04/10/2022 14:11 (SGT)
Reported by	Driver
Date of Accident	29/09/2022 11:20 (SGT)
Exact Location of Accident	Jln Kayu, Singapore
Additional Location Information	CARPARK
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBH393A

### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Company Reg No	2XXXXX041W
Email Address	car.rental@sianghock.com.sg
Mobile Phone No	(Phone) +65-98792002
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	L200 DOUBLE CAB 2.4 MT
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2442

### INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099191MFCV/19

### DRIVER

Name of Driver	TEH KHENG SIANG
NRIC No	SXXXX7871
Date Of Birth	03/04/1959
Occupation	Outdoor

Date Of Driving Pass .....	26/08/1981
Driving experience .....	41 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-98739900
Alt. Phone Number .....	-
Email Address .....	car.rental@sianghock.com.sg
Address .....	21 PUNGGOL FIELD
Address complement .....	#03-14
Postcode .....	828749
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	LEASING
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 .....	No Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### 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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT

#### 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 .....	SML4968P
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**

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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.

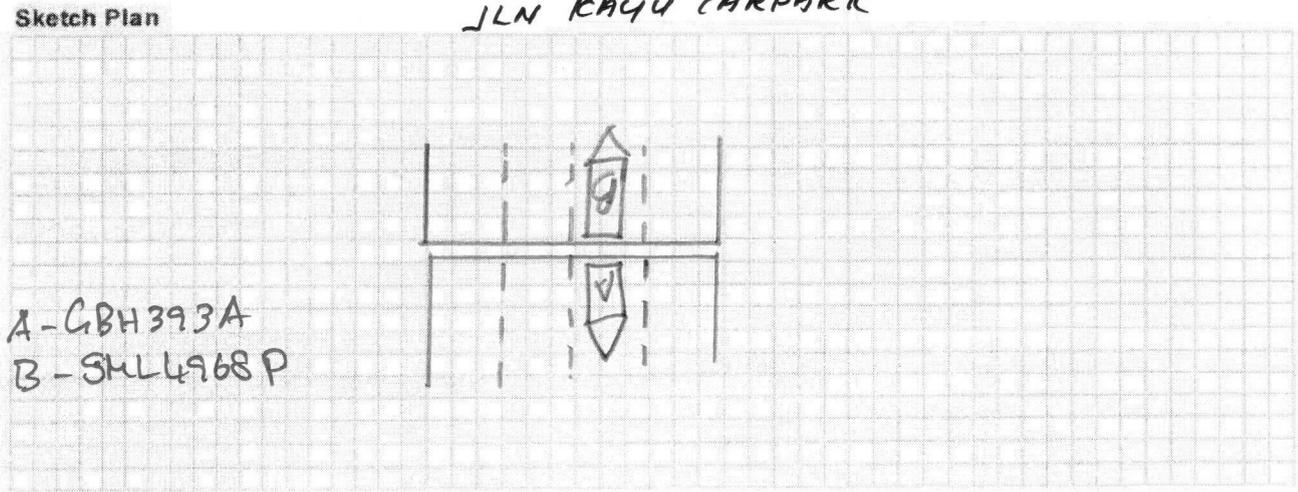


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

JLN KAYU CARPARK



**Describe Circumstances of the Accident**

AS ATTACHED

**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 Personnel

*shym 04/10/12*

Name : Teh Kheng Siang  
NRIC : S13537872

I reserve and park my vehicle GBH 393A into the public carpark lot at Jalan Kayu at around 11:20am on 29 Sep 2022 with the help of the reversing beeper.

When I came back, I notice a dent of the other vehicle boot behind my vehicle. As I am not sure the dent was caused by me, and I did not feel any connection, I am reporting this to be on the safe side. There was not damaged to my vehicle.



29 Sep 2022  
3:00 pm.

29/09/22

CI ✓

ACCIDENT STATEMENT

ACCIDENT DATE: (29/09/2022)(DD/MM/YYYY), TIME( 11 : 20 )(HH:MM)

LOCATION: JALAN KAYU CAR PARK.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBH393A
- b) INSURANCE COMPANY: MS FIRST CAPITAL.
- c) POLICY NO: D-22099191MFCV/19.
- d) POLICY TYPE: (COMPREHENSIVE/THIRD PARTY/THIRD PARTY FIRE & THEFT)
- e) MAKE/MODEL: MIT L200
- f) TYPE: (SALOON/COUPE/MPV/VAN/LORRY/MOTORCYCLE/OTHERS)
- g) VEHICLE CATEGORY: (PRIVATE/COMMERCIAL/MOTORCYCLE)
- h) PURPOSE OF USING AT TIME OF ACCIDENT: RENTAL LEASING.
- i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE : (YES/NO)
- IF NO, PLEASE STATE (THIRD PARTY CLAIM/REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: ROBINSON CAR RENTAL Pte Ltd (MALE/FEMALE)
- B) NRIC/FIN/PASSPORT: 200414041W CONTACT: 9879 2002
- C) ADDRESS: 21 JALAN MASJID S 418946

\*CONTINUE TO 3.D IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- A) NAME: TEH KHENG SIANG (MALE/FEMALE)
- B) NRIC/FIN/PASSPORT: S13537871 CONTACT: 98739900
- C) ADDRESS: 21 PUNGGOL FIELD #03-14 SINGAPORE 828749
- D) DATE OF BIRTH: ( ) / ( ) / ( ) (DD/MM/YYYY)
- E) OCCUPATION : (INDOOR/OUTDOOR)
- F) YEARS OF DRIVING EXPERIENCE : 42 Y 61 M

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: RENTAL LEASING.

5.A) WEATHER CONDITION: (CLEAR/ RAINING/OTHERS ) B) ROAD SURFACE : (DRY/WET/OTHERS )

6. WAS ANYBODY INJURED: (YES/NO) 7. REPORTED TO POLICE : (YES/NO) IF YES PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

8. THIRD PARTY VEHICLE:

- A) VEHICLE NO: SML4968 P MODEL: \_\_\_\_\_
- B) DRIVER'S NAME : \_\_\_\_\_
- C) NRIC.FIN PASSPORT NO.: \_\_\_\_\_ CONTACT: \_\_\_\_\_

9. THIRD PARTY VEHICLE:

- A) VEHICLE NO: \_\_\_\_\_ MODEL: \_\_\_\_\_
- B) DRIVER'S NAME : \_\_\_\_\_
- C) NRIC.FIN PASSPORT NO.: \_\_\_\_\_ CONTACT: \_\_\_\_\_

**CERTIFICATE OF INSURANCE**

ORIGINAL

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)

Type of Policy. : COMMERCIAL VEHICLE - FLEET  
Type of Cover. : Comprehensive  
Certificate No. : D-22099191MFCV/19  
Vehicle No / Chassis No : GBH393A / MMCJJKL20GH238121  
Name of Insured : ROBINSON CAR RENTAL PTE LTD  
Period Of Insurance : 01.04.2022 To 31.03.2023  
Insured Estimated Value : Market Value At Time Of Loss  
Financial Institution : MV CREDIT PTE LTD

EXCESS : AS INDICATED BELOW - ALL EXCESS AMOUNTS ARE SUBJECT TO GST

**Authorised Driver\***  
ANY AUTHORISED DRIVER

**Persons or classes of persons entitled to drive\***

- (1) Whilst the vehicle is being used in connection with the Insured's business:-  
(a) Any person provided he is in the Insured's employ and is driving on their order or with their permission.  
(2) Whilst the vehicle is being used for social, domestic or pleasure purposes:-  
(a) Any person who is driving on the Insured's order or with their permission.

For drivers with more than 1 year driving experience and/or not less than 21 years of age

Excess : S\$1,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)  
S\$2,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)  
S\$1,000.00 on Section I & II separately (for Staff)

For drivers with less than 1 year driving experience and/or less than 21 years of age

Excess : S\$3,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)  
S\$4,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)  
S\$2,000.00 on Section I & II separately (for Staff)

\* 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.

**Limitations as to use\***

Use in connection with the Insured's business.  
Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.  
Use for social, domestic and pleasure purposes.

The Policy does not cover:-

- (1) Use for racing, pace-making, reliability trial or speed-testing.  
(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.  
(3) Use for the carriage of passengers for hire or reward.

\* 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 headings.

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)

MS First Capital Insurance Limited  
(Approved Insurers)

LILIA/D0067/MZ301A9

  
\_\_\_\_\_  
Authorised Signature

Issued at Singapore on 01.04.2022