

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 18/10/2022 17:58 (SGT)
Reported by Both
Date of Accident 06/09/2022 15:45 (SGT)
Exact Location of Accident Jln Buroh, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMP9518B

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner ALPINE CAR RENTAL PTE LTD
Company Reg No 1XXXXX483E
Email Address james.chua@alpinecarrental.com.sg
Mobile Phone No (Phone) +65-88181638
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Opel
Model Zafira
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1364

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5112296399-03

DRIVER

Name of Driver BURCZIK FELIX
Passport No/FIN GXXXX584T
Date Of Birth 30/05/1990
Occupation Outdoor

Date Of Driving Pass	26/02/2020
Driving experience	2 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91121150
Alt. Phone Number	-
Email Address	james.chua@alpinecarrental.com.sg
Address	BLK 2 INTERNATIONAL BUSINESS PARK
Address complement	#12-11
Postcode	609930
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	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	3
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

REFER TO SKETCH PLAN ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	MEMORY CARD WITH POLICE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNF904U
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

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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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

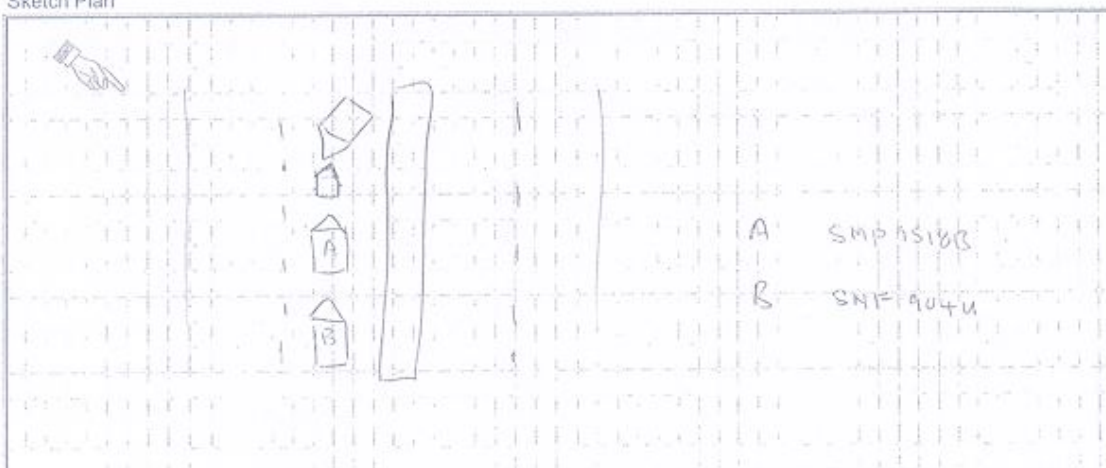
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

I was 2nd in line at the Intersection from West Coast Road into Jalan Buncuh on the right lane

When the light turned green 2 traffic started moving. Right after the intersection the car in front suddenly stopped, where I had to brake hard. The driver car SMF 9044A bumped into back of my vehicle SMF 9518B.

After the car in front of me moved lanes I saw, the reason of stopping was a white mercedes SOE 61880 was driving against the flow of traffic coming from Buncuh Lay toward West Coast highway.

I have reported the incident to Officer Faerul at the scene under report no D/2022 09 06 / 0074.
The SO card is with TP

Declaration

I/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
(Name as in NRICAD Card)





















ALPINE CAR RENTAL PTE LTD

GST REGISTRATION NO. : M2-0094320-1



MAIN : COMPANY REG NO - 1990034:
SINGAPORE
TEL:65532122 FAX:65531911

HIRING AGREEMENT : REN-19HA00139R

DATE : 28/02/2019

PLEASE QUOTE THIS NUMBER IN ALL PAYMENTS AND CORRESPONDENCE

VEHICLE				CORPORATE HIRER	
Vehicle No	: SMP9518B			Co. Name	: LOGWIN AIR + OCEAN SINGAPORE PTE LTD
Model	: Zafira Tourer 1.4 A			Co. Addr.	: BLK 2, #12-11 INTERNATIONAL BUSINESS PARK THE STRATEGY TOWER 1 Singapore 609930
Change Over 1	: Date : Initial :			Co. Person	: Tel :
Change Over 2	: Date : Initial :				

NAMED DRIVER

Name	Address	Office Tel	Residence Tel	Occupation	P.P./I.C No.	Nationality
Date of Birth	Place of Birth	Dr. Licence No.	Expiry Date	Country of Issue	Remark	

LOGWIN AIR + OCEAN

CHECK OUT	DATE / TIME	: 29/07/2020 2:00:00PM	PETROL LEVEL OUT	: 4/8 tank	OUT(KM)	: 0.00
CHECK IN	DATE / TIME	:	PETROL LEVEL IN	: Empty tank	IN(KM)	: 0.00
METHOD OF PAYMENT	: CHEQ			KM DRIVEN	: 0.00	

CHECKED OUT BY : SPENCER WEE CHECKED IN BY : CHECKED BY : 29/07/2020

COLLISION DAMAGE WAIVER

ACCEPT CDW EXCESS	DECLINES CDW EXCESS
\$ per accident	\$ per accident
SIGNATURE :	SIGNATURE :

PERSONAL ACCIDENT INSURANCE

ACCEPTS PAI	DECLINES PAI
SIGNATURE :	SIGNATURE :

CHARGES

No.	Desc.	Bill From	Bill To	Qty.	Qty. Uom.	Price	Price Uom.	total Amount (@\$)
1	RENTAL-MTHLY	29/07/2020	30/12/2022	1.00	MTH		MTH	
Remarks : EXCESS AT \$5 200.00 PER ACCIDENT/DAMAGE IN SINGAPORE				SUBTOTAL		:		
EXCESS AT \$51000.00 PER ACCIDENT/DAMAGE IN MALAYSIA				LESS DISCOUNT		:		0.00
FELIX BURCZIK				TOTAL		:		
				GST @ 7.00%		:		
				TOTAL AMOUNT WITH GST @ 7.00%		:		
PRE-PAYMENT				DOWNPAYMENT AND DEPOSIT		:		0.00
				AMOUNT REFUNDED/DUE		:		

Invoice No : Rec No :

IMPORTANT: The vehicle will not be insured after the expiry of the hire period and in case of any accident the HIRER will be liable for all consequences. For extension of rental please inform us at least 24 hours before the expiry time and payment for extension of rental will have to be made within 24 hours. Late charges at 1/5 (one fifth) of the daily rate of rental for each hour exceeding the time for return of the Vehicle will be imposed (i.e. a full day rental will be charged if the 16 hr is 5 or more hours late returning the vehicle). Any vehicle not returned within 24 hours will be reported as stolen. HIRER is responsible for all parking & traffic violations and missing items.

HIRER'S DECLARATION: I agree to the terms and conditions above and as set out and in declare that all information given on this form are true and accurate. I opt to pay by credit card and my signature here is to be deemed to have been on the application credit card voucher.

Privacy Consent: I/we (LOGWIN AIR + OCEAN SINGAPORE PTE LTD) hereby consent to the collection, use, disclosure and processing of my/our personal data in accordance with the terms and conditions governing the products and/or services for herein.

ALPINE CAR RENTAL PTE LTD

Managers on Behalf of

OWNER

SIGNATURE FOR REFUND

HIRER

COMPANY STAMP



FEEDBACK ON ROAD USERS

Traffic Police
Singapore Police Force
10 Ubi Avenue 3
Singapore 408865
Tel No: 6547 0000
Fax : 6547 4749

Date/Time Report Made
29/9/2022 5:08 pm



Submission Number: 20220929-0051
Public Violation Report No.: APV/22/21334

Informant Name BURCZIK FELIX	Email Felix.burczik@logwin-logistics.com
ID Type / ID No. G3843584T	Contact No. 91121150
Date / Time Of Violation 6/9/2022 3:45 pm	Location Of Violation JALAN BURUH

Video URL

Description of Incident

I was 2nd in line at the intersection from West Coast Road into Jalan Buruh on the right lane. When the lights turned green & traffic started moving. Right after the intersection the car in front of me suddenly stopped, where I had to break hard. The driver behind me bumped into my car (SNF904U). After the car in front of me moved lanes I saw, that the reason of the stop & the accident was a white Mercedes. The driver was driving against the flow of traffic coming from Boon Lay towards West Coast Highway. In order to avoid a head on collision the car in front of me stopped. I got out of the car & tried to stop the driver as he was the reason of the traffic accident. At first he lowered his window & talked to me, but it seemed to be disoriented or influenced by something (maybe alcohol?). After I told him to stop he tried to flee the scene. He drove passed our cars and stopped another time at the intersection. So the driver of SNF904U & I tried to stop the driver again, but he decided to finally flee the scene. He crossed the intersection while the traffic from Jalan Buruh into West Coast Road/West Coast Highway was green, causing further cars to stop to avoid another collision. I called the police to reported the incident to Officer Faezal once he arrived at the Scene under Report Number D/20220906/0074. Office Faezal confiscated the Memory Card of my Dash Cam as evidence. The driver of SNF904U is also witness of this incidence.

Vehicle Involved			
S/N	Vehicle No	Colour	Make
1	SDE6188D	White	Mercedes Benz

Independent Eyewitness				
S/N	Name	ID No	Contact No	Email
NO DATA FOUND.				

Items submitted or uploaded	
S/N	File Name
1	568983B1-3446-4B36-87E7-591DF017D39B.jpeg
2	trim.500B9A5B-60DB-4FFE-93DF-6C40DF680027.MOV

Page 1 of 2

DRIVING BEHAVIOUR FEEDBACK REPORT



Report Number: 20220929-0051

Public Violation Report No.: APV/22/21334

Signature Of Informant:

The identity of the person making this report has been
authenticated by SingPass. No signature is required.

Page 2 of 2