

# 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 .....	05/11/2022 11:11 (SGT)
Reported by .....	Driver
Date of Accident .....	04/11/2022 07:50 (SGT)
Exact Location of Accident .....	Hougang Ave 3, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKB3550T
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	NEXT DRIVE PTE LTD
Company Reg No .....	20190644K
Email Address .....	JEZTEO1@YAHOO.COM.SG
Mobile Phone No .....	(Phone) +65-90044370
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	City
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 your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1500

### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5108070225-03-000001

### DRIVER

Name of Driver .....	KWEK WEI LEONG
NRIC No .....	S9418595E
Date Of Birth .....	02/06/1994
Occupation .....	Indoor

Date Of Driving Pass .....	27/06/2014
Driving experience .....	8 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97501000
Alt. Phone Number .....	-
Email Address .....	JEZTEO1@YAHOO.COM.SG
Address .....	BLK 483 PASIR RIS DRIVE 4 #06-467
Address complement .....	-
Postcode .....	510483
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 .....	Chain 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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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

I WAS DRIVING ALONG HOUGANG AVE 3 AND SLOW DOWN TO STOP IN FRONT TRAFFIC RED LIGHT. SUDDENLY, BEHINS VEHICLE NO. (GBL3427X) DIDN'T STOP IN TIME AND IMPACT STRONGLY TO MY BACK AND THEN I MOVE FORWRD TO HIT MY FRONT VEHICLE (SJY9254A) REAR. I HAVE A PASSENGER FEMALE IN MY CAR. I ASKED OF SHE GOT HURT OR INJURY, SHE SAID FINE. ANYWAY, I ASKED HER TO SEE DOCTOR IF SHE FEEL UNWELL AND REPORT TO COMPANY AND WORKSHOP REPORTING. I MYSELF WILL SEE DOCTOR BECAUSE I FELT UNCOMFORTABLE.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBL3427X
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	Commercial vehicle
Name of Driver .....	-
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SJY9254A
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 .....	VEHICLE C
No. Of Passenger (Including Driver) .....	-

#### INJURED PERSONS DETAILS

INJURED 1

Name of injured person .....	KWEK WEI LEONG
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SKB3550T
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



Describe Circumstances of the Accident

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I WAS DRIVING ALONG HONGKANG AVENUE 3 & SLOW DOWN TO STOP IN FRONT TRAFFIC RED LIGHT. SUDDENLY BEHIND VEHICLE NO. GBL3427X DIDNT STOP IN TIME & IMPACT STRONGLY TO MY BACK & THEN I MOVE FORWARD TO HIT MY FRONT VEHICLE NO. SJY9254A REAR. I HAVE A PASSENGER FEMALE IN MY CAR. I ASK IF SHE GOT HURT OR INJURY, SHE SAID FINE. ANYWAY I ASK HER TO SEE DOCTOR IF SHE FEELS NOT WELL & REPORT TO COMPANY & WORKSHOP REPORTING. I MYSELF WILL SEE DOCTOR BECOS I FEEL UNCOMFORTABLE.

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

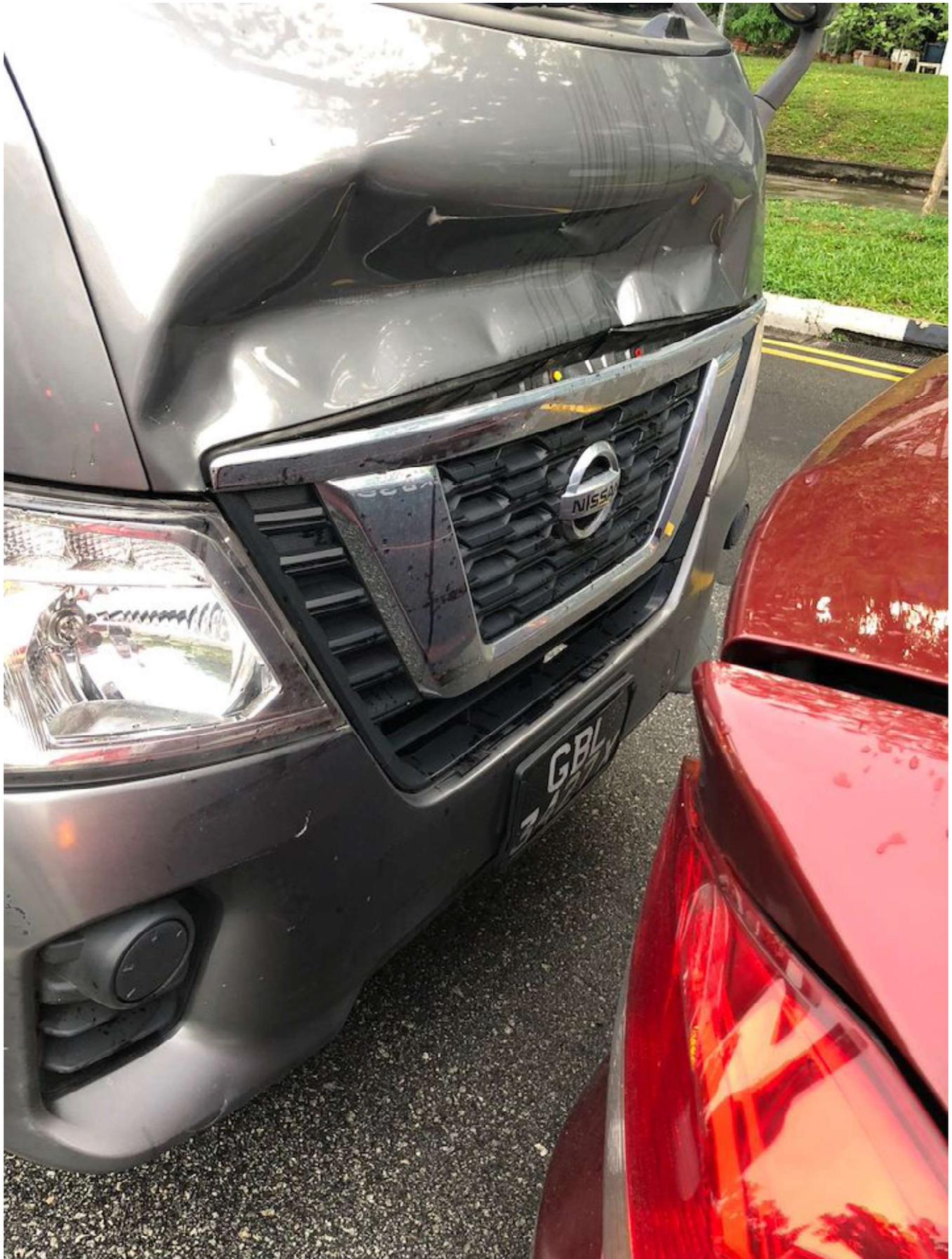
Witnessed by Reporting Centre Personnel





























### 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)  
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5108070225-03-000001 **Cover :** Third Party

1. Index mark and Registration Number of Vehicle : **SKB3550T**  
 Chassis Number : MRHGM26509P020384
2. Name of Policyholder : NEXT DRIVE PTE. LTD.
3. Effective Date of Insurance : 08 Mar 2022
4. Expiry Date of Insurance : 07 Mar 2023
5. 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 his/her 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 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.
6. Limitations as to Use#  
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : CH INSURANCE AGENCY PTE. LTD. (00000615369)  
 Date of issue : 01 Mar 2022 19:04 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive



REG NO. 201902644K

## VEHICLE RENTAL AGREEMENT

DRIVER'S PARTICULARS			
NAME: Kwek Wei Leong		NRIC/FIN/PASSPORT NO.: S9418595E	
ADDRESS: Blk 483 Pasir Ris Drive 4 #06-467 S(510483)		CONTACT NO: 97501000	
		LICENSE PASS DATE: 27/06/2014	
PERSONAL DETAILS (DRIVING HISTORY)		CIRCLE ACCORDINGLY If YES, please specify:	
A) Have you been convicted or have you any prosecution pending for any motoring offence or licence suspended or endorsed?		<input checked="" type="radio"/> NO <input type="radio"/> YES	
B) Have you been involved in any motor accident(s) in the past 3 years?		<input checked="" type="radio"/> NO <input type="radio"/> YES	
C) Have you been refused, declined motor insurance or had increased premium terms imposed?		<input checked="" type="radio"/> NO <input type="radio"/> YES	
<p>I hereby warrant the truth of the above statements and I declare that I have not withheld any information whatever which might lead in anyway to increase the risk of NEXT DRIVE PTE LTD or influence the acceptance of this proposal. I agree that this proposal shall be the basis of the contract between me and NEXT DRIVE PTE LTD and I further agree to be bound by the terms and conditions of NEXT DRIVE PTE LTD which I have seen and read or have had the opportunity to see and read. I further declare that my personal details and driving record do not render me ineligible to hire.</p> <p>ACCEPTANCE OF TERMS AND CONDITIONS OF HIRE. The terms and conditions mentioned on the front and reverse hereof form an integral part of this contract. By signing this contract, I confirm having clearly read and understood and will give my unconditional approval to the stipulations of these terms and conditions.</p>			
		SIGNED <i>hwy</i>	DATED 15/06/2020
VEHICLE DETAILS			
VEHICLE NO.:	SKB3550T	MAKE & MODEL:	Honda City 1.5L i-VTEC Auto
ENGINE NO.:	L15A71809473	CHASSIS NO.:	MRHGM26509P020384
DATE & TIME OUT:	15/06/2020 1530 HRS	FUEL LEVEL:	MILEAGE: 180590 KM
DATE & TIME DUE:		FUEL LEVEL:	MILEAGE: KM
EXTENDED FROM:		EXTENDED TO:	HRS
EXTENDED FROM:		EXTENDED TO:	HRS
ACTUAL RETURN:		FUEL LEVEL:	MILEAGE: KM
  		TOOLKIT	Y / N REMARKS:
		SPARE TYRE	Y / N REMARKS:
		FRONT REC. CAM	Y / N BRAND:
		REAR REC. CAM	Y / N BRAND:
		HEADUNIT	Y / N BRAND:
		MEMORY CARD	Y / N REMARKS:
COST OF HIRE			
MONTHLY RATE:	\$ 1,200.00	TOTAL:	
RENTAL PERIOD:	1 Year	\$	
EXTENSION RATE:	\$ 1,200.00	TOTAL:	
EXTENSION PERIOD:	1 Year	\$	
INITIAL DEPOSIT:	\$ 500.00	15/06/2020	
ADVANCED PAYMENT:	\$ 1,200.00	15/06/2020	
KEY	TOTAL: \$ 1,700.00 <i>Payment to Next Drive 15/6/2020</i>		
A = DENT	I confirm that I have read understood and agree to be bound by the terms and conditions printed overleaf.		
B = SCRATCH			
C = SCUFF			
D = BROKEN			
E = CRACKED			
F = CHIPPED			
I confirm that the condition of the received vehicle is as indicated in the image above:		SIGNATURE (HIRER):	SIGNATURE (LEASOR):
<p>I agree to be fully responsible for and will pay immediately on demand the full amount for a non-recoverable insurance excess of:</p> <p>SGD\$5000.00 for drivers above 21 year old with minimum 2 years of driving experience</p> <p>SGD\$3000.00 for drivers below 21 year old with less than 2 years of driving experience,</p> <p>for damage done to vehicle resulting in total loss, or for third party claim arising from the event of an accident in Singapore; and double the amount should the incident occur in Malaysia.</p>		<i>hwy</i>	

reg\_nextdrive\_200319.doc

1 TAMPINES NORTH DRIVE 1, #03-25 T-SPACE, SINGAPORE 528559