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 22/11/2022 11:27 (SGT) Reported by Driver Date of Accident 22/11/2022 09:10 (SGT) Exact Location of Accident TPE, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mazda

Vehicle Registration Number **SLQ6866Y**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner LION CITY RENTALS PTE LTD Company Reg No 201504621K Email Address LCRARC@LIONCITYRENTALS.COM.SG Mobile Phone No (Phone) +65-97587434 Alternative Phone No (Office) +65-62525525

VEHICLE PARTICULARS

Manufacturer

Model 3 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

No - Claiming third party your vehicle? Vehicle Category Private car

Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Policy Number / Cover Note Number 22-MN000277-R00

DRIVER

Name of Driver MUHAMMAD JASTIN BIN HATTA NRIC No S8633880G Date Of Birth 18/11/1986 Occupation Outdoor

Date Of Driving Pass 14/07/2008 Driving experience 14 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-97587434 Alt. Phone Number Email Address LCRARC@LIONCITYRENTALS.COM.SG Address 707 HOUGANG AVENUE 2 #06-83 Address complement Postcode 530707 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? 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 22/11/2022 AT AROUND 0910HRS, I WAS DRIVING VEHICLE A (SLQ6866Y) ALONG TPE EXPRESSWAY HEADING TOWARDS CHANGI. A VEHICLE AHEAD OF ME SUDDENLY JAMMED BRAKE BUT I MANAGED TO SLOW DOWN AND STOP IN TIME DUE TO MAINTAINING SAFE DISTANCING. UNFORTUNATELY, VEHICLE B (SNB441J) WHICH WAS TAILGATING ME, TRIED TO SWERVE OUT BUT UNSUCCESSFUL. AS A RESULT, THE FRONT RIGHT PORTION OF VEHICLE B COLLIDED ONTO THE REAR LEFT PORTION OF VEHICLE A. NOBODY WAS INJURED AND NO OTHER VEHICLES INVOLVED. 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 SNB441J

Toyota

Wish

Accident report SJ0G22BM000A

Vehicle Manufacturer

Vehicle Model

Vehicle Variant
Vehicle Colour

Vehicle Category	Private car
Name of Driver	YEAU LIAN KOK
NRIC No	S7182438A
Contact Number	(Phone) +65-83741686
Address	-
Address complement	_
Postcode	-
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must 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 Formby 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.
- 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)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho 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;
- (ii) 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

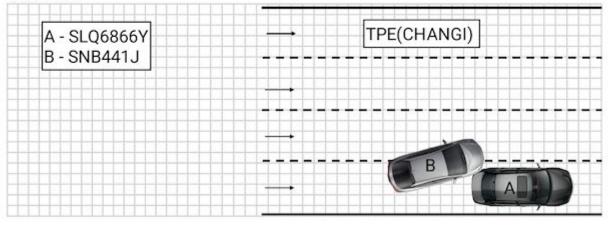
Signature (If driver is not the policybolder) / Date

Driver's Signature (If driver is not the policyholder) / Date & Time 22/11/2022 1015HRS

FLASH ACCIDENT CONTROL REPORTING OFFICER
FRO SUFIYAN

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

ON 22/11/2022 AT AROUND 0910HRS, I WAS DRIVING VEHICLE A (SLQ6866Y) ALONG TPE EXPRESSWAY HEADING TOWARDS CHANGI. A VEHICLE AHEAD OF ME SUDDENLY JAMMED BRAKE BUT I MANAGED TO SLOW DOWN AND STOP IN TIME DUE TO MAINTAINING SAFE DISTANCING. UNFORTUNATELY, VEHICLE B (SNB441J) WHICH WAS TAILGATING ME, TRIED TO SWERVE OUT BUT UNSUCCESSFUL. AS A RESULT, THE FRONT RIGHT PORTION OF VEHICLE B COLLIDED ONTO THE REAR LEFT PORTION OF VEHICLE A. NOBODY WAS INJURED AND NO OTHER VEHICLES INVOLVED.

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &

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

22/11/2022 1015HRS

FLASH ACCIDENT

Witnessed by Reporting Centre Personnel







