

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	08/12/2022 13:47 (SGT)
Reported by	Driver
Date of Accident	07/12/2022 09:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE (NEAR TOA PAYOH STADIUM).
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT8656U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	JOYRIDE CAR RENTAL PTE LTD
Company Reg No	201842065H
Email Address	CARLEASING@PRECISEAUTO.SG
Mobile Phone No	(Phone) +65-94897930
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	BMW
Model	316i
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	1598

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5125466967

DRIVER

Name of Driver	ROSLIND AW MEI LING@ROSLIND BTE ABDULLAH
NRIC No	S7218489J
Date Of Birth	27/05/1972
Occupation	Outdoor

Date Of Driving Pass	14/02/2002
Driving experience	20 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-87797241
Alt. Phone Number	-
Email Address	CARLEASING@PRECISEAUTO.SG
Address	BLK 512 WELINGTON CIRCLE #14-04
Address complement	-
Postcode	750512
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	3
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)	4
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	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sembawang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005549999
Police Station Address	4 Sembawang Crescent Singapore 757633
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.T/20221207/2066.

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 SMR7208Z
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver UNKNOWN
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMY1714G
 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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ROSLIND AW MEI LING
 Gender -
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? SKT8656U
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

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.



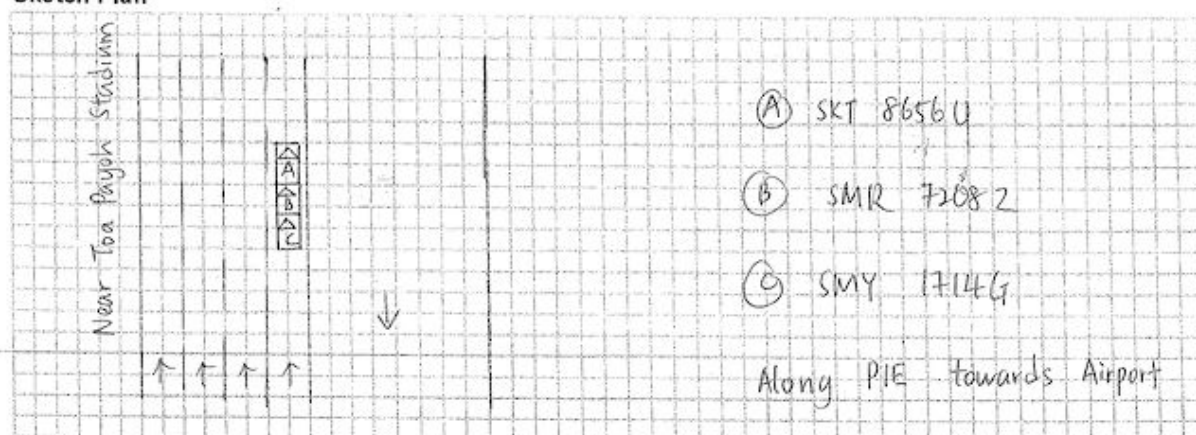
11:30am
7th Dec 2022

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 07/12/2022 @ about 0930 hrs, I was driving my rental car (SKT 8656U) along PIE towards airport with 2 passengers at right most lane. As vehicles in front of me had applied brake to stop, so I also slowing down and about to stop. Out of sudden, I felt an impact from behind and I realised that I was involved in a chain collision of 3 vehicles which is:

Veh. A : SKT 8656U

Veh. B : SMR 72082

Veh. C : SMY 1714G

The traffic police had attended to accident scene. The passenger of veh. B had conveyed to hospital by ambulance. I will seek for medical treatment as I felt very discomfort after the accident impact, and I was given 3 days of mvc.

Hence I hereto lodge this report to claim against veh. B (SMR 72082)'s insurance for my accident damages.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

























SINGAPORE POLICE FORCE



T/20221207/2066

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

1 of 3

Report No. T/20221207/2066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/12/2022 14:41	Vide Report No.: E/20221207/0055	Station Diary No.: 68
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Informant's Particulars

Name of Informant: ROSLIND AW MEI LING	Address: APT BLK 512 WELLINGTON CIRCLE #14-04 SINGAPORE 750512		
ID Type / ID No.: NRIC NO / S7218489J	Contact No.: Home/Office: Mobile: 87797241		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Female	Age: 50	Date of Birth: 27/05/1972	Type of Informant: Driver
Race: Chinese	Language: English		Institution / School Name:
Occupation: GRAB DRIVER	Driving Licence Information: Class: 3,4		Date of Expiry:

General Information of the Accident

Additional Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/12/2022 10:00	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Lamp Post Number: 795				
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Car collision involving 3 SG vehicles				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKT8656U	Car				Seriously Damaged	2
SMR7208Z	Car				Seriously Damaged	1
SMY1714G	Car				Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20221207/2066

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Report No. T/20221207/2066

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

CONTINUATION OF REPORT

Brief Details.

I am working as a grab driver.

On 7th Dec 2022 at about 0904hrs. I received a trip order and picked up a couple from 190 Westwood Ave to Terminal 3 Departure- Changi Airport.

As I was driving along PIE on the 1st lane. I was slowing down coming to a stop. Me and both my passengers suddenly felt a bump on the rear of the vehicle.

I went down to make a check and saw 3 vehicles involved in the accident including my vehicle (SKT8656U). I then make a check on both my passengers and they informed that they were fine.

I went to make a check on vehicle (SMR7208Z). I saw the driver holding onto his chest with his hands and the lady passenger holding her back seems like they are in pain. Both driver and passenger were conscious. The lady passenger inform me that she will be calling for ambulance.

I went to make a check on vehicle (SMY1714G). I saw that the lady driver was in shock when she was coming out of the vehicle. Lady driver was conscious. I asked the lady driver if she was ok. She mentioned that she was just in shock.

My grab company called me and asked me what happened as my vehicle is station for a period. I then called my rental car company (Precise Auto, Auto bay kaki bukit) and they told me to take pictures of the damages and vehicles involved.

I made a check on my vehicle. Both my left and right rear of the vehicle was damaged which resulted me unable to close the car booth.

Ambulance came and conveyed both passenger and driver from vehicle SMR7208Z conscious. Police attended to me took my in-car camera SD card for investigation. I was issued NP 323 and was advised by TP officer to lodge a police report within 24 hours regarding this matter.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999



T/20221207/2066

3 of 3

Report No: T/20221207/2066

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

L /

SGT 2 TEO JIA XIAN NIGEL

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

07/12/2022 14:41

Officer In Charge Of Case:

TP / GIT /

STAFF SGT SYED MUHAMMAD ISA BIN

OMAR ALHABSHEE

Contact No.: 65476187

Classification Of Case:

NP168



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: 5125466967

Cover : Third Party

- | | |
|---|------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SKT8656U |
| Chassis Number | : WBA3A16040NS38893 |
| 2. Name of Policyholder | : JOYRIDE CAR RENTAL PTE LTD |
| 3. Effective Date of Insurance | : 14 Jan 2022 |
| 4. Expiry Date of Insurance | : 13 Jan 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	: DICKSON CAPITAL PTE LTD
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 : DICKSON INSURANCE AGENCY PTE. LTD. (00000573832)

Date of Issue : 14 Jan 2022 14:41 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

JOYRIDE CAR RENTAL PTE LTD
 UEN: 201842065H
 1 Kaki Bukit Avenue 6 #02-34 Autobay@Kaki Bukit
 S(417883)
 TEL: 67457367

RA NO : RA 524
 DATE : 05-09-2022

Rental Agreement

Vehicle Number	Make/Model	Usage	Salesman
SKT 8656 U	BMW 316I 1.6	PHV	Zhen Rui

HIRER'S PARTICULARS		DRIVER'S PARTICULARS	
Name: ROSLIND AW MEI LING @ROSLIND BTE ABDULLAH		Name: ABDUL RASHID BIN ABDUL AZIZ	
Address: BLK 512 WELLINGTON CIRCLE #14-04 Singapore 750512		Address: BLK 512 WELLINGTON CIRCLE #14-04 Singapore 750512	
Email:		Email:	
Telephone (HP): 87797241		Telephone (HP): 89235889	
Telephone (Home):		Telephone (Home):	
NRIC No.: S7218489J		NRIC No.: S7921883J	
Date of Birth:		Date of Birth:	
Driving Experience:		Driving Experience:	
Insurance Excess: 3000 (OD) 3000 (TP)		Insurance Excess: 3000 (OD) 3000 (TP)	
Insurance Excess with CDW: (OD) (TP)		Insurance Excess with CDW: (OD) (TP)	

RENTAL CHARGES	
Hours(s) @\$ /Hour	
Day(s) @\$ /Day	
Week(s) @\$ /Week	
Month(s) @\$ /Month	
Collision Damage Waiver (CDW)	
Malaysia Entry Charges	
Others:	
Total:	
Security Deposit:	
Grand Total:	

SECURITY DEPOSIT REFUND	
Security Deposit Refund:	
Mode of Refund:	
Recipient Signature:	
Date:	

VEHICLE CONDITION CHECK	
<p>I/We declare that the above particulars are true and correct in every respect and have checked the vehicle and affirm that there are no other defects besides those listed in the diagram above. I/We understood the terms and conditions of the hire agreement printed overleaf.</p>	
Signature of Hirer	Date:

Date Out: 05-09-2022	Date In: 05-03-2023
Time Out: 02:00pm	Time In: 02:00pm
Mileage at Pickup:	Mileage on Returning:
Fuel Level at Pickup: Empty	Fuel Level on Returning:
Hire period expires on 05-03-2023 at 02:00. If unexpired, rental period will be calculated based on 24 hour timeframe from the time of collection of vehicle.	
Surcharge of fuel will be at \$50 per tank. There will be no refund for excess fuel upon return of vehicle	