

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 16/01/2023 14:38 (SGT)
Reported by Driver
Date of Accident 15/01/2023 20:00 (SGT)
Exact Location of Accident Woodlands Ave 2, Singapore
Additional Location Information BEFORE JUNCTION WOODLANDS AVE 1 TWDS WOODLANDS AVE 5
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMS5875E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner PRIME CAR LIMO PTE LTD
Company Reg No 201826883W
Email Address SUPREMELEASINGSG@GMAIL.COM
Mobile Phone No (Phone) +65-86836000
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Prius
Variant ALPHA
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 1800

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5119549919-02-000049

DRIVER

Name of Driver AZMAN BIN ABDUL KUMAR
NRIC No S6808044D
Date Of Birth 16/03/1968

Occupation	Outdoor
Date Of Driving Pass	01/03/2008
Driving experience	14 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81121416
Alt. Phone Number	-
Email Address	SUPREMELEASINGSG@GMAIL.COM
Address	BLK 526 WOODLANDS DRIVE 14 #05-457
Address complement	-
Postcode	730526
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 - Change/cross lane
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)	3
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	ROHZILAH
Gender	Female

PASSENGER 2

Name	NURAZILAH
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20230116/7006.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJL477B
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 B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

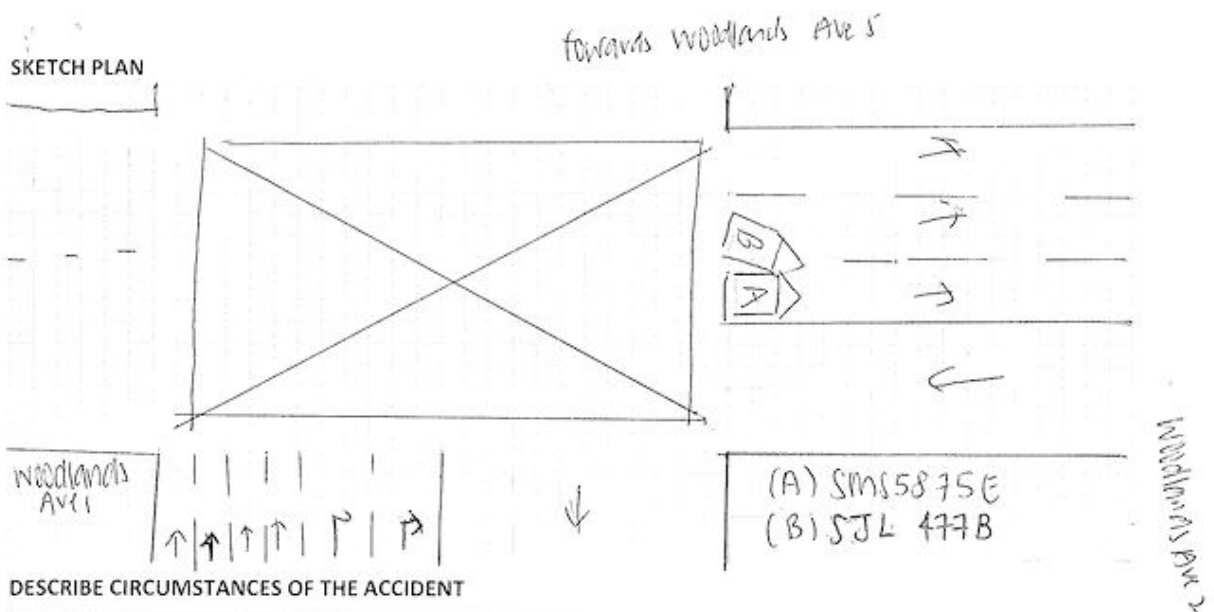


Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

I hereby authorise SME Motor Pte Ltd to send my
Accident report to my workshop _____
via email / fax
Signature: _____



Attached -

7/20230116/7206

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:























**SINGAPORE
POLICE FORCE**



T/20230116/7006

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20230116/7006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/01/2023 11:01	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: AZMAN BIN ABDUL KAHAR			Address: 526 WOODLANDS DRIVE 14 #05-457 SINGAPORE 730526		
ID Type / ID No.: NRIC NO / S6808044D			Contact No.: Home/Office: Mobile: 81121416		
Nationality: SINGAPORE CITIZEN			Email: azmankahar92@gmail.com		
Sex: Male	Age: 54	Date of Birth: 16/03/1968	Type of Informant: Driver		
Race: Malay			Language: English	Institution / School Name:	
Occupation: PRIVATE HIRER			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

General Information: Of the Accident:				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/01/2023 20:00	Type of Location: X-Junction
Location: junction of Woodlands Avenue 2 and Woodlands Avenue 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJL477B	Car					0
SMS5875E	Car					2

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230116/7006

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20230116/7006

CONTINUATION OF REPORT

Driver			
Name	AZMAN BIN ABDUL KAHAR		ID No. S6808044D
Related Vehicle	SMS5875E (Car)		Contact No. 81121416
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 15/01/2023 at about 2000 hours at before junction of Woodlands Avenue 2 and Woodlands Avenue 1 towards Woodlands Avenue 5. I was travelling on the extreme right lane at along woodlands avenue 2 towards woodlands avenue 1. Suddenly, a vehicle (B) from my left veered into my lane without cautious and without checking his blind spot and hit onto the left portion of my vehicle (A) causing damages to my vehicle. After the impact, the vehicle (B) ran away and I gave chase and managed to stop him at the nearby carpark. I have 2 passengers onboard my vehicle.

Vehicles involving in the situation:

(A)SMS5875E

(B)S JL477B



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20230116/7006

3 of 3

Report No. T/20230116/7006

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
RASHIDAH BINTE AZMAN
Contact No.: 65476902

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
16/01/2023 11:01

Classification Of Case:



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: 5119549919-02-000049

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **SMS5875E**
 Chassis Number : ZVW400035308
2. Name of Policyholder : **PRIME CAR LIMO PTE LTD**
3. Effective Date of Insurance : **15 Oct 2022**
4. Expiry Date of Insurance : **14 Oct 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	: DBS BANK 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 : **HL SUNTEK INSURANCE BROKERS PTE. LTD. (00000690672)**
 Date of Issue : **29 Oct 2022 14:16 hrs**

For INCOME INSURANCE LIMITED

Chief Executive



PRIME CAR LIMO

61 Ubi Avenue 2 #01-03
Automobile Magamart, Singapore 408898.
Tel: 6747 9400 Fax: 6444 3900
BRN: 201826883W

NO: 0338

VEHICLE NO SMSS8858		MAKE/MODEL TOYOTA PRODS MPV		CC		CHECK OUT/ IN DATES	
HIRER / DRIVER'S PARTICULARS						VEHICLE DATE OUT 25/1/2022	
NAME: AZMAN BIN ABUL KAHAR						VEHICLE ACTUAL DATE IN	
ADDRESS: 526 WOODLANDS DRIVE 14 #05-457						AGREED DATE OF RETURN	
(S) 730526						COLLISION DAMAGE WAIVER	
						NOTE: FURTHER EXCESS OF S\$2000.00 SHALL APPLY IN ADDITION TO THE AMOUNT STATED IN THIS AGREEMENT SHOULD THE NAME OF DRIVER BE ANY PERSON WHO IS LESS THAN 25 OR MORE THAN 25 YEARS OF AGE WITH LESS THAN 3 YEARS OF DRIVING EXPERIENCE	
NON-WAIVERABLE EXCESS PER INCIDENT							
HOME NO.	480847	D.O.B.	16031968	SINGAPORE		2,500.00	
MOBILE	81121416	DUR	11041995	MALAYSIA		3,500.00	
IC NO.	S68080440	COUNTRY		TOTAL LOSS		10,000.00	
LICENSE NO.	001576440	COUNTRY		SIGNATURE			
EXPIRY DATE							
ADDITIONAL DRIVER						PERSONAL ACCIDENT INSURANCE (PAI)	
NAME:						ACCEPTS PAI []	
ADDRESS:						DECLINES PAI [X]	
(S)						PREMIUM: \$	
						SIGNATURE	
RENTAL CHARGES							
HOME NO.		D.O.B.		DAILY @ S\$	x NO OF DAYS A MTH	\$68 x 12	
MOBILE				MONTHLY @ S\$		\$2675	
IC NO.		COUNTRY		PETROL		Excess Refund	
LICENSE NO.		COUNTRY		PARKING			
EXPIRY DATE				GST @ 7%			
REMARKS						TOTAL	
\$68 + \$2 12 month contract. Depos + \$200 + \$500 + \$50 x weekly FRONT WINDSCREEN EXCESS \$200 Start 25/1/2022 End 25/1/2023 M30 RON 95 Petrol 7 Days Rental Recovery (Lease)						DEPOSIT S\$	
						PRE-PAYMENT S\$	
						MODE OF PAYMENT	
CREDIT CARD []							
CASH []							
NETS []							
OTHERS []							
NAME							
CARD NUMBER							
EXPIRY DATE						CVV:	

I HEREBY AGREE TO ABIDE BY THE TERMS AND CONDITIONS STATED ON THIS AGREEMENT AND THE ACCOMPANYING VEHICLE RENTAL CONTRACT

FULL LIABILITY WILL BE IMPOSED ON THE HIRER SHOULD THE VEHICLE BE DRIVEN TO MALAYSIA WITHOUT OUR KNOWLEDGE. VEHICLE MUST NOT BE USED FOR ANY ILLEGAL OR IMMORAL ACTIVITIES.

SIGNATURE OF HIRER

PRIME CAR LIMO PTE LTD