

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	14/03/2023 12:22 (SGT)
Reported by	Driver
Date of Accident	13/03/2023 15:15 (SGT)
Exact Location of Accident	Jln Bahar, Singapore
Additional Location Information	LAMP POST (5) TOWARDS PIE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMC896L
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD.
Company Reg No	1XXXXX399N
Email Address	aza.muhd@gmail.com
Mobile Phone No	(Phone) +65-90234582
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1317

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01009806

DRIVER

Name of Driver	MUHAMMED AZHAR BIN ABDUL RASHID
NRIC No	SXXXX240D
Date Of Birth	13/11/1977
Occupation	Outdoor

Date Of Driving Pass	11/04/2009
Driving experience	13 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90234582
Alt. Phone Number	-
Email Address	aza.muhd@gmail.com
Address	BLK 686D CHOA CHU KANG CRESCENT #02-260
Address complement	-
Postcode	684686
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	LEASING
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
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)	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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	AKY155
Vehicle Category	Commercial vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230313/2068

ATTACHMENT(S)

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	AKY155
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MOHD ZAKI BIN JAMIL
Passport No/FIN	7XXXXXXX6711
Contact Number	(Phone) +60-162214049
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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

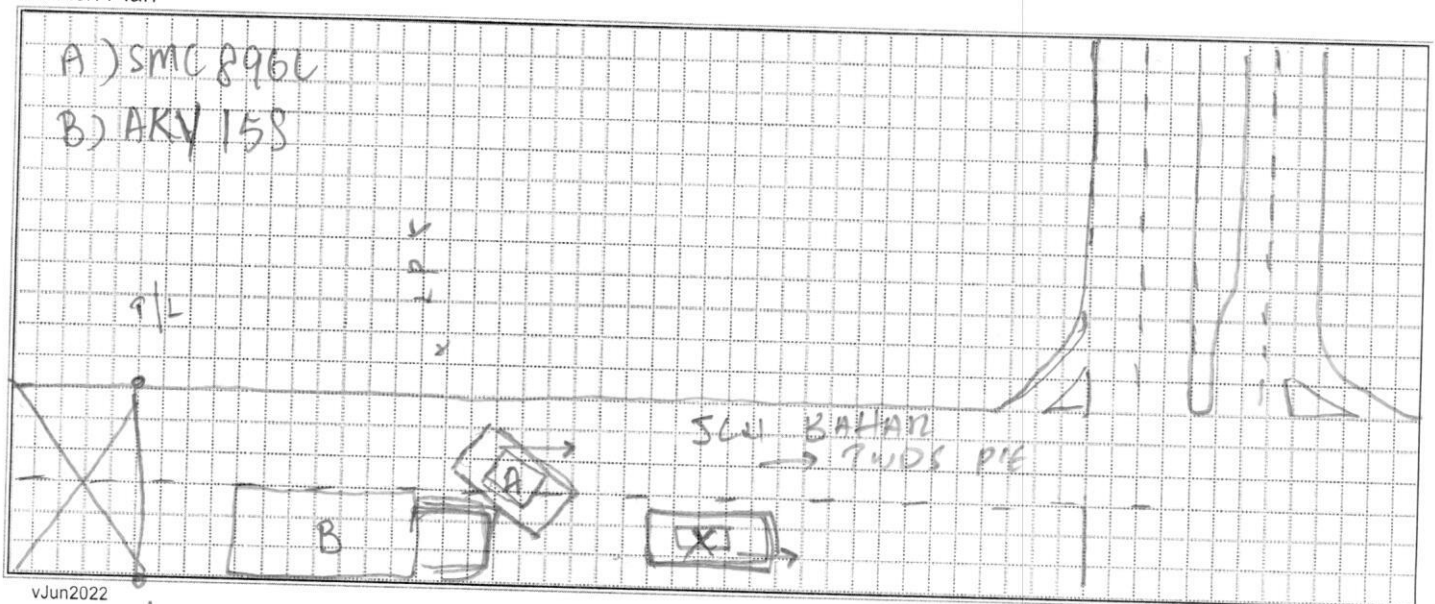
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

Sketch Plan



vJun2022

Describe Circumstance of the Accident

REFER TO POLICE REPORT 7/20230313/9068

Declaration

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

Policyholder's Signature / Date & Time

AM 14/03/2023 (1147 am)

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

14/03/2023

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



SINGAPORE POLICE FORCE



T/20230313/2068

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 3

Report No. T/20230313/2068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/03/2023 16:36	Vide Report No.:	Station Diary No.: 124
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Informant's Particulars

Name of Informant: MUHAMMED AZHAR BIN ABDUL RASHID		Address: APT BLK 686D CHOA CHU KANG CRESCENT #02-260 SINGAPORE 684686	
ID Type / ID No.: NRIC NO / S7731240D		Contact No.: Home/Office:	Mobile: 90234582
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 45	Date of Birth: 13/11/1977	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: PROJECT OFFICER		Driving Licence Information: Class: 2B,2A,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 13/03/2023 15:30	Type of Location: Straight Road
Location: Along Road 1 JALAN BAHAR				
Opposite Jurong Fire Station, Towards Tuas , Before Heavy Vehicle Carpark. Lamp Post Number: 5				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AKY155	Lorry				No Damage	0
SMC896L	Car				Slightly Damaged	0

Details of Person Involved

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



SINGAPORE POLICE FORCE



T/20230313/2068

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20230313/2068

CONTINUATION OF REPORT

Driver			
Name	MOHD ZAKI BIN JAMIL	ID No.	780302016711
Related Vehicle	AKY155 (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	MUHAMMED AZHAR BIN ABDUL RASHID	ID No.	S7731240D
Related Vehicle	SMC896L (Car)	Contact No.	90234582
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mentioned date time and location, the accident occurred when i was changing lane from left to right, no injuries at that point of time and no police is called. The purpose of me lodging this report is to safekeep myself and for insurance purposes.

My vehicle suffered light scratches and light dents at the front driver side of the vehicle.
My Vehicle number is SMC896L



**SINGAPORE
POLICE FORCE**



T/20230313/2068

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

Report No. T/20230313/2068

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:

J/
SGT 2 DARRYL CHONG YU
XIANG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

13/03/2023 16:36

Officer In Charge Of Case:

TP / GIA /
SI TAN JEOK LENG LESLIE
Contact No.: 65476151

Classification Of Case:

NP168

Register New Vehicle (Acknowledgement)**Vehicle Particulars**

Vehicle No.:	SMC896L		
Vehicle Type:	R10 - Private Hire (Self-Drive) Motor Car	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	FIT 1.3GF CVT
Chassis No.:	GK31317726	Engine No.:	L13B1420530
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Petrol	Passenger Capacity:	4
Engine Capacity:	1317 cc	Power Rating:	-
Maximum Power Output:	73.0 kW (97 bhp)		
Unladen Weight:	1030 kg	Maximum Laden Weight:	1305 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	26 Jun 2018	Original Registration Date:	26 Jun 2018
Manufacturing Year:	2018	Open Market Value:	\$14,859.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$2,500.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$14,859.00 (100%)
Actual ARF Paid:	\$5,000.00		

Owner Particulars

Owner Name:	HITACHI CAPITAL ASIA PACIFIC PTE. LTD.
Owner ID Type:	Company
Owner ID:	199400399N
Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block /House No.:	111
Registered Street Name:	SOMERSET ROAD
Registered Unit No.:	# 14 - 05-15

Registered
Building Name: TRIPLEONE SOMERSET

Registered Postal
Code: 238164

COE No. / Expiry
Date: 2018070101000359C / 25
Jun 2028

COE Bid Category: A - Car up to 1600cc & 97kW
(130bhp)

QP Paid: \$36,426.00

Transaction Details

Business
Transaction Ref. No.: 20180626115246656360

Business
Transaction Date: 26 Jun 2018

Business
Transaction Time: 11:52:46

Message

The above vehicle has been successfully registered.

Please note that \$31,935.00 will be deducted from your GIRO account.

ACCIDENT STATEMENT

ACCIDENT DATE: (13 / 03 / 2023) (DD/MM/YYYY), TIME: (15 : 15) (HH:MM)

LOCATION: JLN BAHAR L/P'S (TWO'S PIE)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SMC 896 L
 b) INSURANCE COMPANY: SOMPO INSURANCE
 c) POLICY NUMBER: 022MTPV01009806
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: HONDA FIT
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORK
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: ATTACH (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 199400399N CONTACT: 90234582
 c) ADDRESS: _____

* CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER

No of passenger
 (including driver)
 ()

- DRIVER
 a) NAME: MUHAMMED AZHAR (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S77312400 CONTACT: 90234582
 c) ADDRESS: BK 686D, CHOA CHU KANG CRESCENT
#02-260

* d) DATE OF BIRTH: (13 / 11 / 1977) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 11/04/2009

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: LEASING

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: NANYANG POLICE STN.

8. THIRD PARTY VEHICLE

No of passenger
 (including driver)
 ()

- a) VEHICLE NUMBER: AKY 155 MODEL: LORRY
 b) DRIVER'S NAME: MOHD ZAKI BIN JAMIL
 c) NRIC/FIN/PASSPORT: 780302016711 CONTACT: +60 016 221 4049

9. THIRD PARTY VEHICLE

No of passenger
 (including driver)
 ()

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email: =

aza.muhd@gmail.com

VIDEO

Certificate of Insurance**ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
ROAD TRANSPORT ACT 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)**

Cert No./Policy No. : D22MTPV01009806
1. Registration No. : SMC896L
2. Insured Name : MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD.
3. Commencement Date : 26 JUNE 2022 00:00
4. Expiry Date : 25 JUNE 2023 23:59
5. Coverage : Market value at time of loss - Comprehensive - ExcelDrive GOLD
6. Excess : \$900 - Section I

7. Persons or Classes of Persons entitled to drive*
Any person who is driving on the Insured's order or with their 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.
And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

8. Limitations as to use*
a) Use for the carriage of passengers or goods in connection with the Insured's business.
b) Use for social domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- 1) Use for racing, pacemaking, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

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)

Sompo Insurance Singapore Pte. Ltd.



Date/Time of Issue : 08 JUNE 2022 15:48

*Limitation rendered inoperative by section 8 of the Motor Vehicles (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.

IMPORTANT NOTICE

1. Insureds are hereby warned that under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicles without a valid policy of insurance under the Act.
2. Insureds are further warned that on the sale of a motor vehicle or if for any reason the Insurance is terminated during its currency, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189)
3. The Policy will cease to be valid once the motor vehicle has been sold to another person. It is not transferable to a new owner of the Vehicle.
4. Please note that this insurance is subject to the premium being paid and received in full by the Company (a) before the inception date where the Policy is to be issued to an Individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances.
5. Insurance coverage under this Policy is subject to the terms and conditions as stipulated in the Motor Insurance Policy

Intermediary Code & Name : 11H13200 & MITSUBISHI HC CAPITAL ASIA PACIFIC PTE. LTD. CI Code: 26F 34FJDLLS441_11ZA