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 13/03/2023 17:13 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 12/03/2023 14:05 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS TUAS Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SNF9861A

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **CARWAY LEASING & RENTAL** Company Reg No 5XXXX813K Email Address Angel@carway.com.sg Mobile Phone No (Phone) +65-83831777 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Shuttle 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 Income Insurance Limited Policy Number / Cover Note Number 5110752456-03-000025

DRIVER

Name of Driver ABDUL FATTAH BIN ZAHIT NRIC No SXXXX435F Date Of Birth 31/10/1972 Occupation Outdoor

Date Of Driving Pass 06/09/2008 Driving experience 14 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-87897274 Alt. Phone Number Email Address Angel@carway.com.sg Address **BLK 713 TAMPINES STREET 71 #02-184** Address complement Postcode 520713 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 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 13 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name DIKI Gender Male PASSENGER 2 Name **JIBBY** Gender Male **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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S)

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SML5277T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CLINTON
Contact Number	(Phone) +65-94523347
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 Vehicle Manufacturer	SHD9908G
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KENT
Contact Number	(Phone) +65-90051918
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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 Traffic Police Department for investigation.

- 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.
- 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:

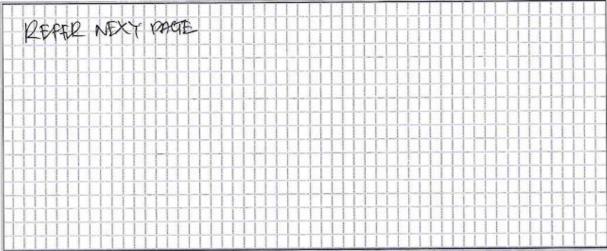
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Sign Hurse Dala Time

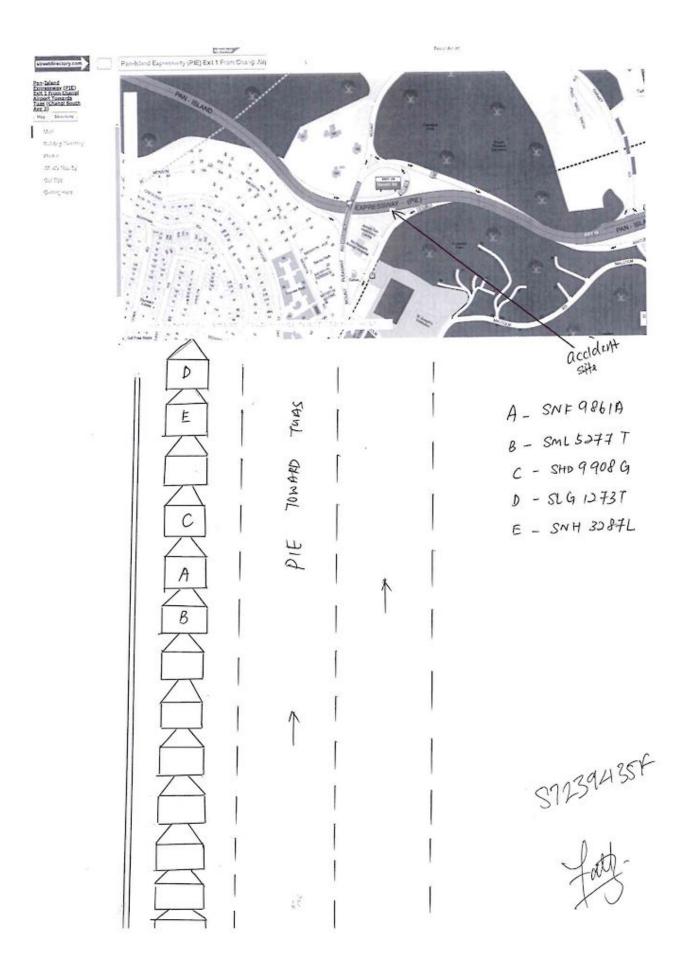
Oriver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan



1



DESERO	70	BULUE	REGIOT	T/20230312/7090	AND
MINE	w	10002	. 1744		
ACCIDEN	, ,	-man	EAHP		
HCCIDEN	(,	CIALIFINI	/ (.		
	_				

Declaration

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



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

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

2

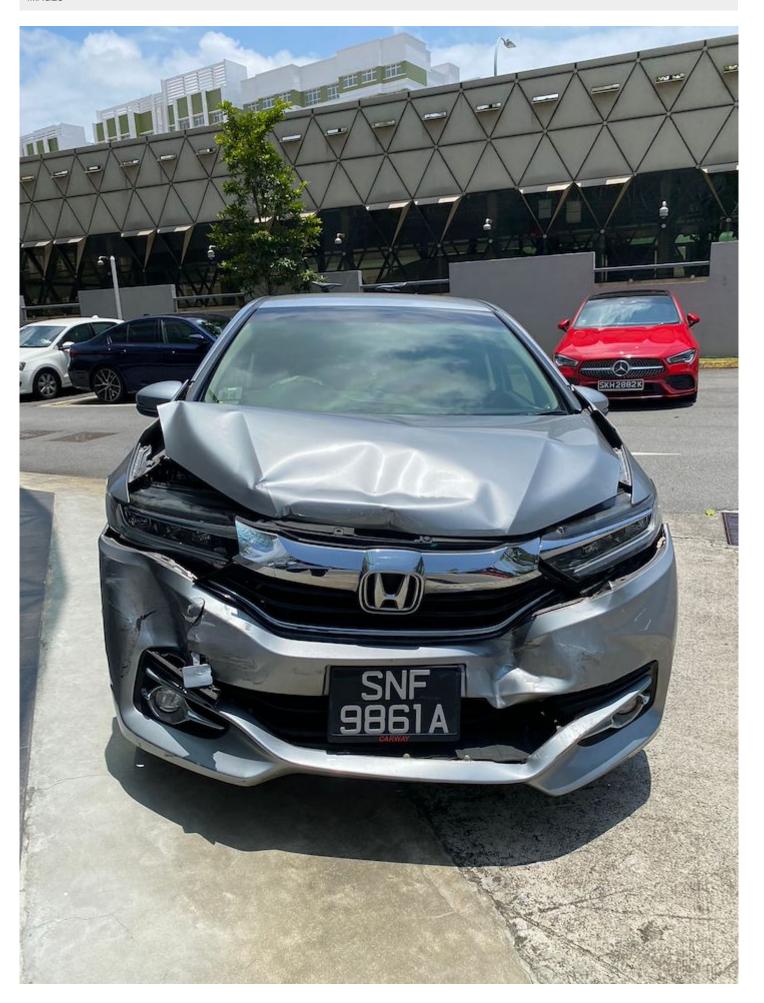
Accident Statement

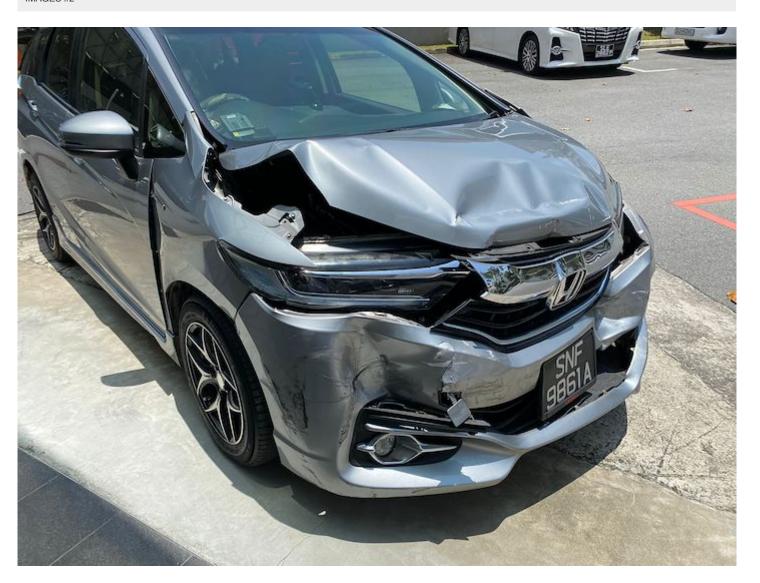
On 12nd Mar 2023 at about 1405 Hrs, my vehicle (SNF9861A) was travelling along PIE towards Tuas. The vehicles in front of me stopped and I followed suit. I managed to stop my vehicle in order to avoid the collision with the vehicle in front of me. Suddenly and without warning, a vehicle (SML5277T) hit onto the rear of my vehicle. The strong impact has caused my vehicle surge forward and collide onto the vehicle in front of me (SHD9908G). There were total 13 vehicles involved in this chain collision. The first front 2 vehicles involved in this collision (SLG1273T and SNH3287L) left the scene immediately after the accident occurs. I have 2 bicycles mounted on the bike rack at the rear of my vehicles. Those bicycles were affected and damaged in this accident. I was unable to provide all the vehicle numbers. Accident photos were taken at the scene.

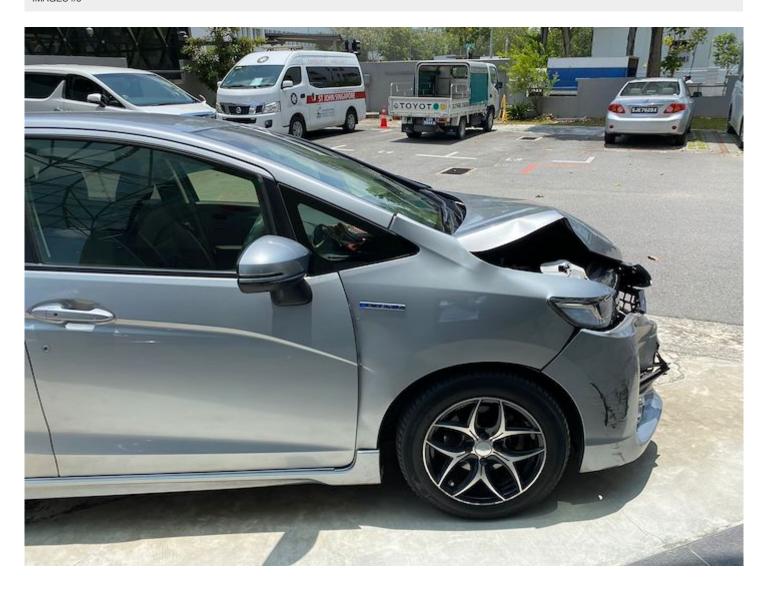
I am making a claim against third party.

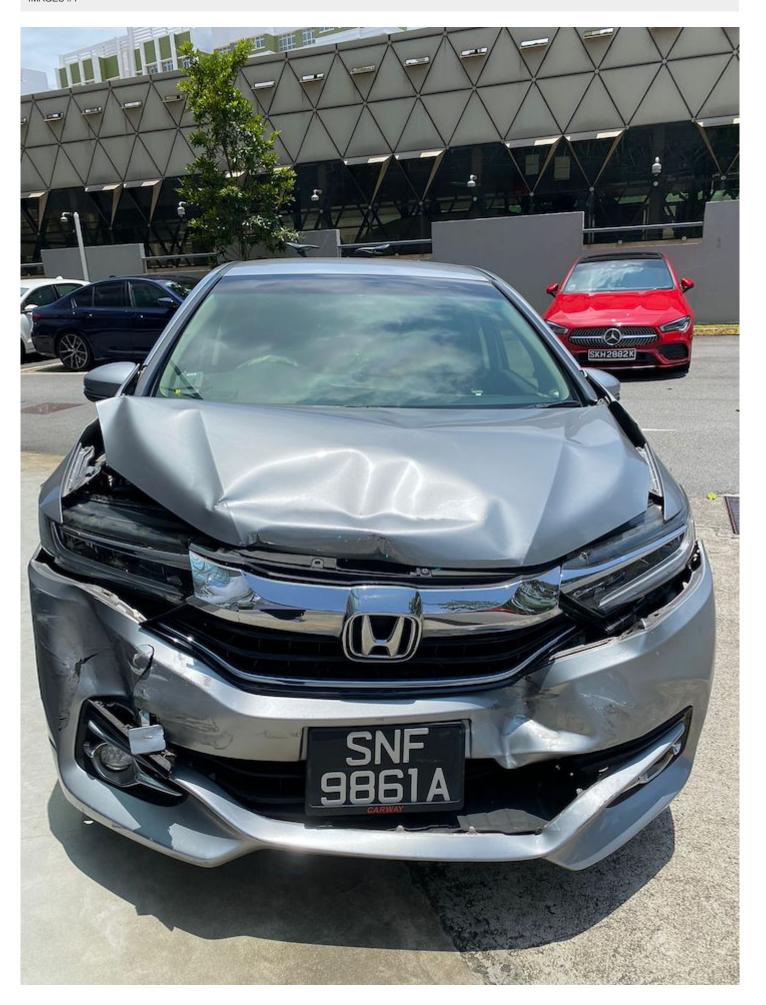
Driver's Name: Abdul Fattah Bin Zahit @ Zahit, Abdul Fattah

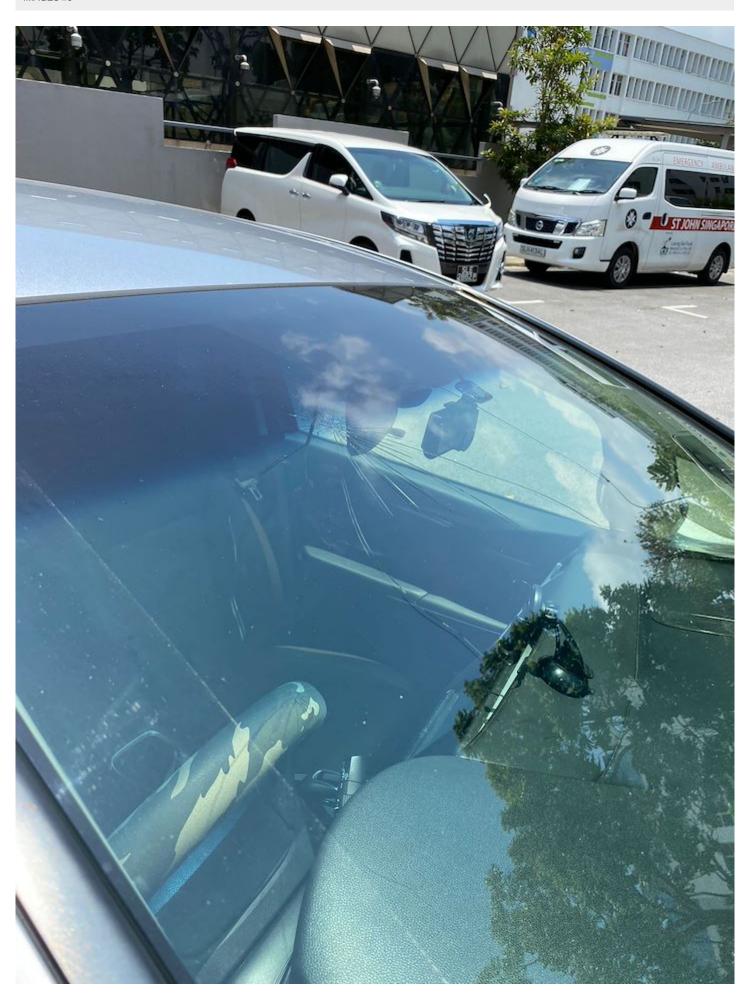
I/C: S7239435F



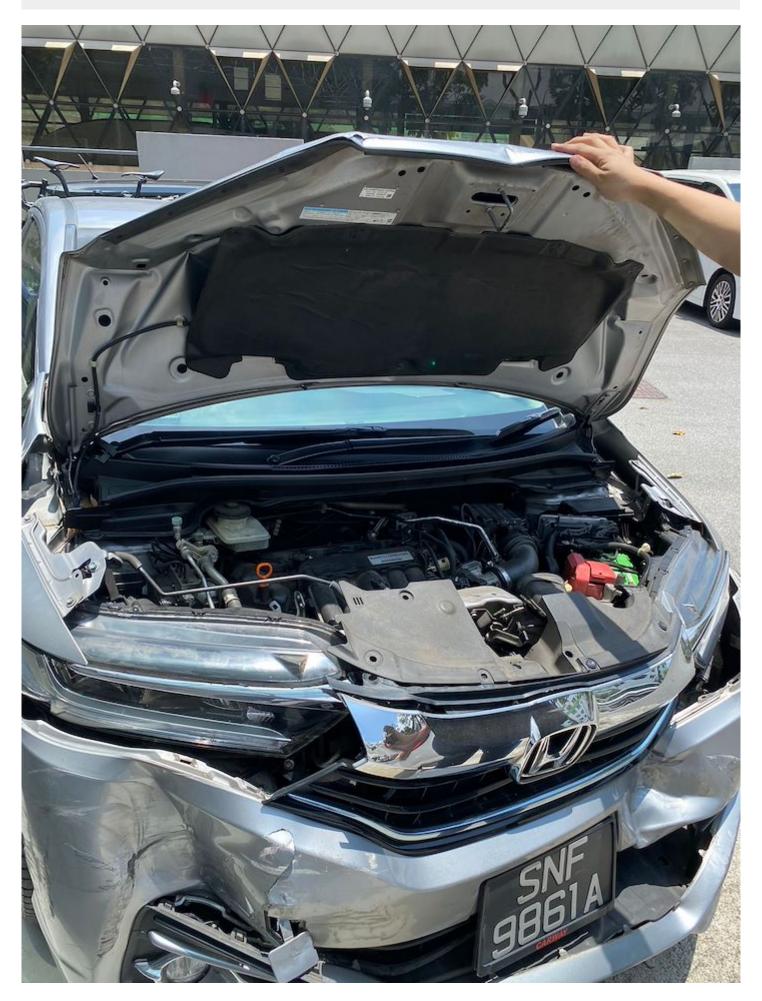






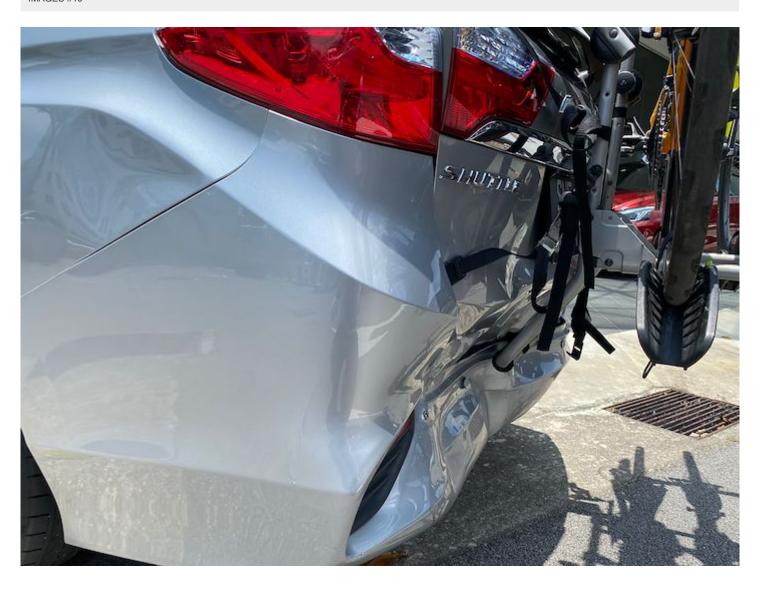


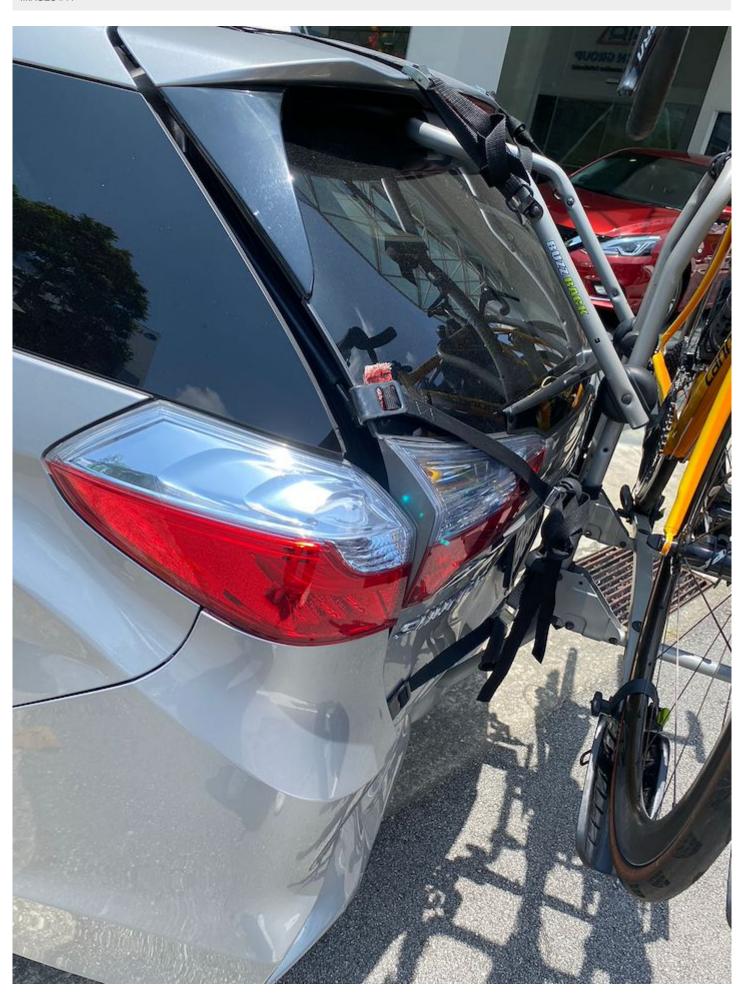


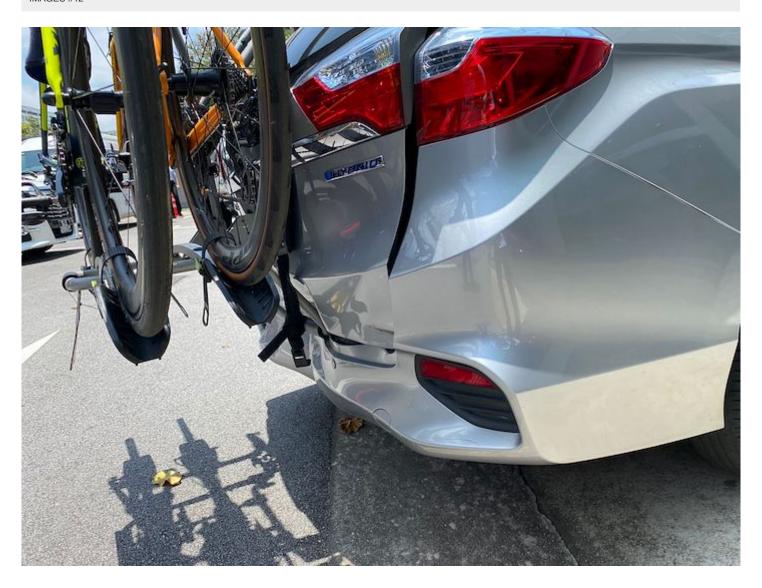


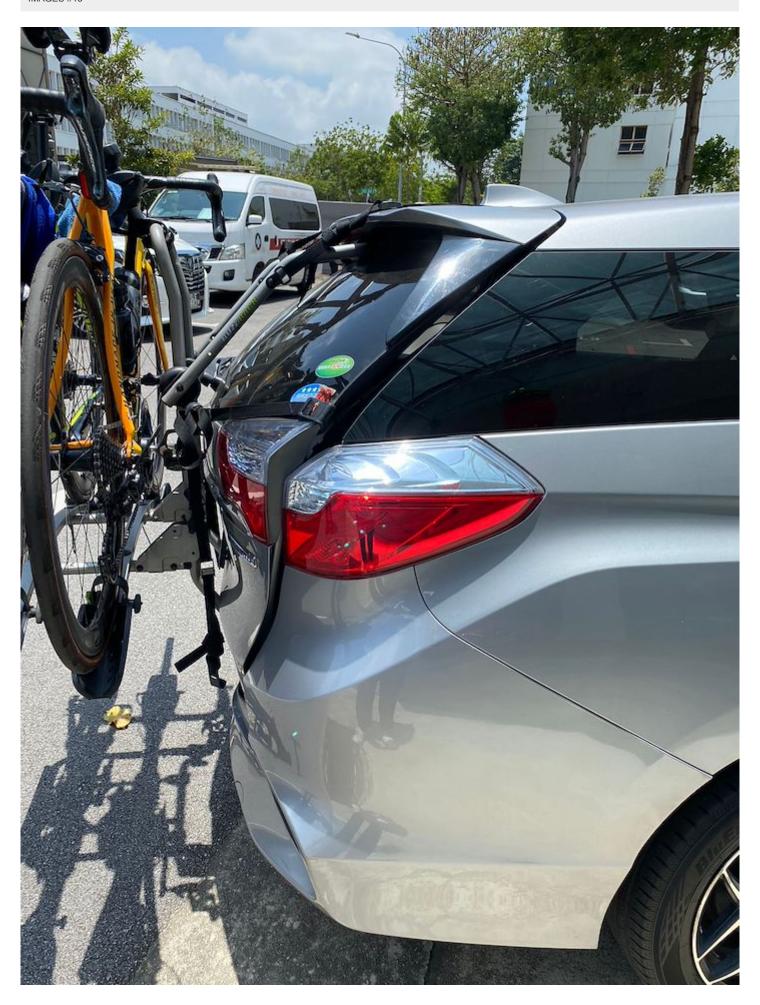


















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Report No. T/20230312/7090

1 of 4

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

	ne Report M 23 22:24	fade:	Vide Report No.: E/20230312/0105	Station Diary No.:		
Informa	nt's Partice	ulars				
	Informant: FATTAH BI		Address: 420 ANG MO KIO AVENUE 10 #12-1121 SINGAPORE 560420			
ID Type NRIC NO	/ ID No.: D / S72394:	35F	Contact No.: Home/Office:	Mobile: 87897274		
National SINGAP	ity: ORE CITIZ	EN	Email: FZAHIT@GMAIL.COM			
Sex: Male	Age: 50	Date of Birth: 31/10/1972				
Race: Malay		,	Language: English	Institution / School Name:		
Occupation: Self Employed			Driving Licence Information: Class: Date of Expiry:			

General Infor	mation of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/03/2023 15:40	Type of Location:	
Location: PAN ISLAND	EXPRESSWAY				
Weather:		Road Surface:		Road Speed Limit:	
Traffic Flow:		Traffic Control:	c Control: Traffic		
Type of Collis	ion:		1	Anyone conveyed by ambulance: Yes	

Details of V	1	1100				Total Control
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SNF9861A	Car					2

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





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20230312/7090

CONTINUATION OF REPORT

Driver		The state of the s			19929	The Bloom by Marin
Name	ABDUL FATTAH B	IN ZAHIT		ID No.		S7239435F
Related Vehicle	SNF9861A (Car)			Contact	No.	87897274
Hospital/Clinic	NIL			Class o Driving Licence Expiry		Class: NIL Date of Expiry: NIL
Date	NIL Date			1	NIL	
No. of Days granted Medical Leave			Degree o	f s	Slight	

Brief Details.

On the stated date and time, I was driving SNF9861A along PIE(Tuas) together with 2 friends, Dikizukairi and Najib, on board my vehicle.

All three of us were belted.

Just slightly after Stevens Road exit, the vehicles in front suddenly came to a stop.

I slammed on my brakes and managed to come to a stop in time just behind the red taxi right in front of me.

However, immediately after I had come to a complete stop, multiple impacts hit my vehicle's rear causing my vehicle to propel forward and hitting the front vehicle several times.

The impacts were huge and my body lurched forward due to the impact.

Upon alighting, I realised that I was involved in a 8 car chain collision involving:

SLU7136T

SHD9908G

SNF9861A

SML5277T

SJH5445G

SKQ3903E

Unknown

Unknown

where mine was the 3rd vehicle.

I also noticed a man lying on the ground injured. However, I am unsure which vehicle the man had come out from.

There were another 2 vehicles (SNG3287L & SLG1273T) in front of SLU7136T, which were involved in the accident, but left the scene shortly after assessing the damage to be insignificant.



T/20230312/7090

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20230312/7090

CONTINUATION OF REPORT

Traffic Police and ambulance arrived. The man lying on the ground was conveyed to hospital via ambulance.

Later the same day, I started to feel aches over multiple areas of my body caused by the impact of the accident.

I will monitor my condition and decide whether to seek treatment.

As of now, I am unsure if my friends sitting in my vehicle were injured due to the accident.

I am lodging this report as per the traffic police's advice.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 4 of 4 Report No. T/20230312/7090

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

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

Date/Time:
12/03/2023 22:24

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD AFIQ BIN RAHMAT
Contact No.: 65476171

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

Classification Of Case:

Classification Of Case:

NP168

CARWAY LEASING & RENTAL

53 Ubi Avenue 1 #03-01 Paya Ubi Industrial Park, Singapore 408934 R.O.C No: 53264813K

會 6744 0777

Make / Model:

丢 6744 2377

RENTAL	/ HIRE AGREEMEN	T No:	CLR - 220219
dal.	Vehicle No:	IU No:	7

1128242350 SNF 9861 A HONDA SHUTTLE HYBRID 1.5G DRIVER'S PARTICULARS (if different from Hirer) HIRER'S PARTICULARS : ABDUL FATTAH BIN ZAHIT @ ZAHIT, ABDUL FATTAH Name Name : BLK 713 TAMPINES STREET 71 #02-184 Address Address 520713 Email Telephone (HP) 8789 7274 Telephone (HP) (0): NRIC / FIN No NRIC / PP / ROC : \$7239435F Occupation Occupation Nationality : SINGAPOREAN Nationality D.O.B : 31 OCT 1972 D.O.B Driving Lic No : S7239435F Driving Lic No Driving Experience: **Driving Experience:** CHARGES 1) I, the Hirer, agreed to hold whatever responsibilities for any damage(s) caused by vehicular accident, traffic offence(s) and/or 47,520.00 1,980.00 Month @ 55 Month (s) any other penalty(les) in connection with the use of the said 0.00 Month @ 5\$ Month (s) vehicle during the period when it is in my custody. 0.00 Week SŚ Week (s) @ \$\$ Accident / Theft Excess Liability (At Fault - Direct / Conflict Cases) Note ** (Monthly rental cycle = 30 Days) TP \$\$ 2,000.00 : Own \$\$ 2,000.00 Singapore TP \$\$ 4,000.00 1,960.00 : Own S\$ 2,000.00 Malaysia SŚ (Refundable) Advanced Deposit Winscreen Excess: S\$ 400 0.00 S\$: M'sia Usage Additional Rental Payable 3) The vehicle can only be used within Singapore ONLY, PENALTY 0.00 : Additional Driver Surcharge 5\$ Others of \$\$80.00 / day will be imposed for unauthorised usage to M'sia. 47,520.00 5\$ Subtotal SMOKING IS STRICTLY PROHIBITED IN THE VEHICLE. -1,960.00 SŚ Less Security Deposit In the event of smoking, cleaning fees of \$150,00 will apply. 5\$ 0.00 Less Advanced Rental Late Charge of \$50/week will be imposed for all late payment. 0.00 Total remaining Rentals payable for - 23Mths I/We declare that the above particulars are true and SS Weekly Rental Due on Every : correct in every respect and I/We have read and understood * Hirer / Driver shall be fully responsible for ALL cost incurred if the the terms and conditions of the hire agreement printed overleaf. insurance company repudiated liability or rejected any claims raised. Terms & Conditions: A) The Hirer is OBLIGED to fulfil/complete the full Rentals stated in this Rental / Hire Agreement. Should there be any early termination by the Hirer, the Hirer shall pay ALL remaining Rentals in this Hire Agreement and Signature of Driver / Date return the vehicle to the Owner. (if different from Hirer) B) If the Hirer fail to pay any Rental under this Hire Agreement between Owner within seven (7) days of its becoming due or shall commit a breach of contract under this Hire Agreement, the Owner may terminate this Hire Agreement thereupon or any timewithin seven (7) days thereafter by notice in writing to the Hirer. On the termination by the Owner, the Hirer should return the vehicle to the Owner and shall pay all the remaining Rentals stated in this rental / Hire Agreemment. Date In: 22-Aug-22 Date Out: Time In: Hrs Time Out: Hrs Collection-Self-Delivery Self-Collection Delivery-Hrs. at 11-Aug-24 Hire period expires on:

22/8/20:

Late return fee of \$15.00 (min per hourly block) is chargeable for late return more than 15 mins.



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: 5110752456-03-000025

: SNF9861A

1. Index mark and Registration Number of Vehicle Chassis Number

: GP71207742

2. Name of Policyholder

: CARWAY LEASING & RENTAL

Cover : drivo CLASSIC

3. Effective Date of Insurance

: 22 Aug 2022

4. Expiry Date of Insurance

: 21 Aug 2023

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) : \$\$2,000 EXCESS (SECTION 2) · \$\$1.500 : \$\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS REPAIR AT OWNER'S PREFERRED WORKSHOP : NO : YES INSURE WITH COE : NO NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER : N/A PRIMARY DRIVER : N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2)

: TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

HIRE PURCHASE COMPANY SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

: INSMART (INSURANCE) AGENCY PTE LTD (00000615165)

Date of Issue

: 10 Jun 2022 13:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

