

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	15/03/2023 11:13 (SGT)
Reported by	Driver
Date of Accident	14/03/2023 08:55 (SGT)
Exact Location of Accident	ECP, Singapore
Additional Location Information	ECP TOWARDS CITY (AFTER MARINE PARADE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5444R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CARS FOR RENT (2016) PTE. LTD.
Company Reg No	2XXXXX732N
Email Address	margaret.koh@carsforrent2016.com
Mobile Phone No	(Phone) +65-69709119
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mazda
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 your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5109855704-03

DRIVER

Name of Driver	LIM TIAT TIANG
NRIC No	SXXXX098B
Date Of Birth	09/10/1949
Occupation	Outdoor

Date Of Driving Pass	17/03/1977
Driving experience	46 YEARS
Gender	Male
Mobile Number	(Phone) +65-88701770
Alt. Phone Number	-
Email Address	margaret.koh@carsforrent2016.com
Address	BLK 467A FERNVALE LINK
Address complement	#16-515
Postcode	791467
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?	Yes
Number of vehicles involved in the accident	6
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	UNKNOWN
Vehicle Category	Private car

PASSENGER 1

Name	PASSENGER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sengkang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003438999
Alt. Police Station Phone No	(Fax) +65-63438939
Police Station Address	2 Sengkang Square #01-02
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED.

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	SKH606E
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	UNKNOWN
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number	SLE1949M
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	UNKNOWN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.
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

<p>ECP Towards City Carried (Main Road)</p>	<p>Vehicle (A): SL 3 SH4R</p>
	<p>(B): SH 606E</p>
	<p>(C): KUN 00000</p>
	<p>(D): KUN 00000</p>
	<p>(E): UN 00000</p>
	<p>(F): SL 3 SH4R</p>

Describe Circumstance of the Accident

I was travelling along at ECP Towards City
(after Main Road) I was driving straight on the
right most lane. The vehicle in front of me slowed down
and stopped. Noticing that, I followed suit and slowed
down my vehicle and stopped. Out of a sudden, I felt a huge
impact from the rear which pushed my vehicle
forward and collided onto vehicle F. I alighted and
realised vehicle (B) had collided onto the rear portion
of my vehicle and it was a chain collision involving
6 vehicle in total.

Declaration

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

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)


















**SINGAPORE
POLICE FORCE**


T/20230314/2064

1 of 4

Report No. T/20230314/2064

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
14/03/2023 16:59

Vide Report No.:
G/20230314/0064

Station Diary No.:
77

Informant's Particulars

Name of Informant:
LIM TIAT TIANG

Address:
APT BLK 467A FERNVALE LINK #16-515 SINGAPORE
791467

ID Type / ID No.:
NRIC NO / S0182098B

Contact No.:
Home/Office: Mobile: 88701770

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Age: Date of Birth:
Male 73 09/10/1949

Type of Informant:
Driver

Race:
Chinese

Language:

Occupation:
Taxi driver

Driving Licence Information:
Class: Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/03/2023 08:00	Type of Location: Straight Road
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Location:

EAST COAST PARKWAY

Weather:
Clear

Road Surface:
Dry

Traffic Flow:
Two Way

Traffic Control:
Traffic Light - Working

Traffic Volume:
Heavy

Type of Collision:
Moving Vehicle Against - Parked Vehicle

Anyone conveyed by ambulance:
No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKH606E	Car	MERCEDES BENZ		Silver	Slightly Damaged	0
SLE1949M	Car	MITSUBISHI		Silver	Slightly Damaged	0
SLZ5444R	Car	MAZDA	MAZDA3 SEDAN 1.5 AT EU6	Silver	Slightly Damaged	1


**SINGAPORE
POLICE FORCE**


T/20230314/2064

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Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20230314/2064

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Sabnani Ronnie Ramesh	ID No.	S7125114D
Related Vehicle	SKH606E (Car)	Contact No.	96652050
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	Wee Song'en Shawn	ID No.	S8135950D
Related Vehicle	SLE1949M (Car)	Contact No.	96235642
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	LIM TIAT TIANG	ID No.	S0182098B
Related Vehicle	SLZ5444R (Car)	Contact No.	88701770
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

Brief Details.

On 14/03/2023 about 0835hrs, I was driving my vehicle bearing SLZ5444R along ECP towards city. I was driving on the right most lane and the vehicle in front of mine bearing SLE1949M had slow down and stopped. Noticing that, I follow suit and slowed down my vehicle and stopped. Out of a sudden, I felt an impact from the rear of my vehicle which causes my vehicle to collide with vehicle SLE1949M. I alighted my vehicle to make a check and I realized that another vehicle SKH606E collided with my vehicle and it was a chain collision involving 6 vehicles. Due to the collision, my vehicle rear was dented in and the front of my bumper was slightly damaged.



**SINGAPORE
POLICE FORCE**



T/20230314/2064

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Report No. T/20230314/2064

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

CONTINUATION OF REPORT

I exchange particulars with the person involved and I left the scene due to my passenger was rushing for work.

About 0945hrs, I received a phone from TP and they informed me that I would required to lodge a police report and they provided me with a incident number ref: G/20230314/0064

**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999



T/20230314/2064

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Report No. T/20230314/2064

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
F /
SGT 2 Kang Yue Leng

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SI MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

NP168

Signature Of Informant:

Date/Time:
14/03/2023 16:59

Classification Of Case:



CARS FOR RENT (2016) PTE LTD
10 Kall Bukit Ave 4 #09-02 Premier @ Kall Bukit Singapore 415874
Tel: 6970 0119 Fax: 6970 9981
Website: www.carsforrent2016.com

No: E 17343
E2012065

RCG/GST No: 201609732N

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULAR Name: (as in VC) <u>Lim Tian Liang</u> NRIC/PASSPORT No: <u>S0182098B</u> Date of Birth: <u>01/04/71</u> Address (Res): <u>B11-467A Fernvale Link</u> <u>#11-515 (S) 791427</u> Driving Licence No: <u>518498B</u> D/L Type: <u>Local</u> / International Issue Date: _____ Tel: (C) _____ HP <u>88761770</u> Company Name: _____ Company UEN: _____ Company Address: _____		Vehicle No: <u>S225444R</u> Replace Veh No: _____ Mileage out: _____ Make & Model: <u>Mazda 3</u> <input checked="" type="radio"/> Auto / <input type="radio"/> Manual OUT Date: <u>01 Dec 20</u> Time: <u>1500</u> HIRE PERIOD: <u>3 months</u> OWN DAMAGE CLAIM Excess S\$ <u>2000</u> THIRD PARTY CLAIM Excess S\$ <u>1500</u>													
ADDITIONAL DRIVER'S PARTICULARS Name: (as in VC) _____ NRIC/PASSPORT No: _____ Date of Birth: _____ Address (Res): _____ Driving Licence No: _____ D/L Type: Local / International Issue Date: _____ Tel: (C) _____ HP _____		CHARGES Daily @S _____ per day Weekly @S <u>370</u> per week Monthly @S _____ per month Others @S _____ Delivery Service _____ GST _____ SUB-TOTAL \$ _____													
VEHICLE CHECK LIST D - DENTS S - SCRATCHES A - ACCIDENTS RIGHT FRONT TOP LEFT BACK		PETROL LEVEL <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Out</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> <tr> <td>In</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> </table> EXTENSION _____ Misc. _____ GST _____ TOTAL CHARGES _____ Rented out by: <u>Lim</u> Hirer's Signature: _____ Addition Driver's Signature: _____		Out	E	1/4	1/2	3/4	F	In	E	1/4	1/2	3/4	F
Out	E	1/4	1/2	3/4	F										
In	E	1/4	1/2	3/4	F										

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/ credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CARS FOR RENT (2016) PTE LTD in connection with this agreement is true.

*** IMPORTANT**

- ONLY PERSON ABOVE 22 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN ABOVE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CARS FOR RENT (2016) PTE LTD.

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FOLDING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CARS FOR RENT (2016) PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	HIRER'S SIGNATURE
				<u>deposit \$370 (NETS)</u>	<u>[Signature]</u>



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, 1999 (MALAYSIA)

Certificate Number: S106855704-03-000065

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : S1Z5444R
 Chassis Number : JM68N22A8H016600
 2. Name of Policyholder : CARS FOR RENT (2016) PTE. LTD.
 3. Effective Date of Insurance : 01 Jun 2022
 4. Expiry Date of Insurance : 31 May 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)	: S\$1,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH CODE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: GENIE FINANCIAL SERVICES PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

(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 : KHC HOLDINGS PTE. LTD. (00000613934)
 Date of Issue : 25 May 2022 12:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive