

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 20/03/2023 16:08 (SGT)
Reported by Driver
Date of Accident 17/03/2023 21:21 (SGT)
Exact Location of Accident 56 New Upper Changi Rd, Singapore 461056
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNF7063A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner VINCAR LEASING & RENTAL PTE LTD
Company Reg No 2XXXXX828K
Email Address HOUSETEAM3299@GMAIL.COM
Mobile Phone No (Phone) +65-91266754
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Alphard
Variant ALPHARD 2.5X CVT
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 car
Transmission Auto
CC 2493

INSURANCE COMPANY

Name of Insurance Company Etiqa Insurance Pte Ltd
Policy Number / Cover Note Number M0033012

DRIVER

Name of Driver LIM HENG KEE (LIN XINQI)
NRIC No SXXXX920E
Date Of Birth 09/07/1981
Occupation Indoor

Date Of Driving Pass	27/11/2002
Driving experience	20 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91266754
Alt. Phone Number	-
Email Address	HOUSETEAM3299@GMAIL.COM
Address	116A JALAN TENTERAM
Address complement	#27-533
Postcode	321116
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)	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	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE SKETCH PLAN BY DRIVER

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	SJS703L
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) -

SKETCH PLAN**IMPORTANT NOTICE**

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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.



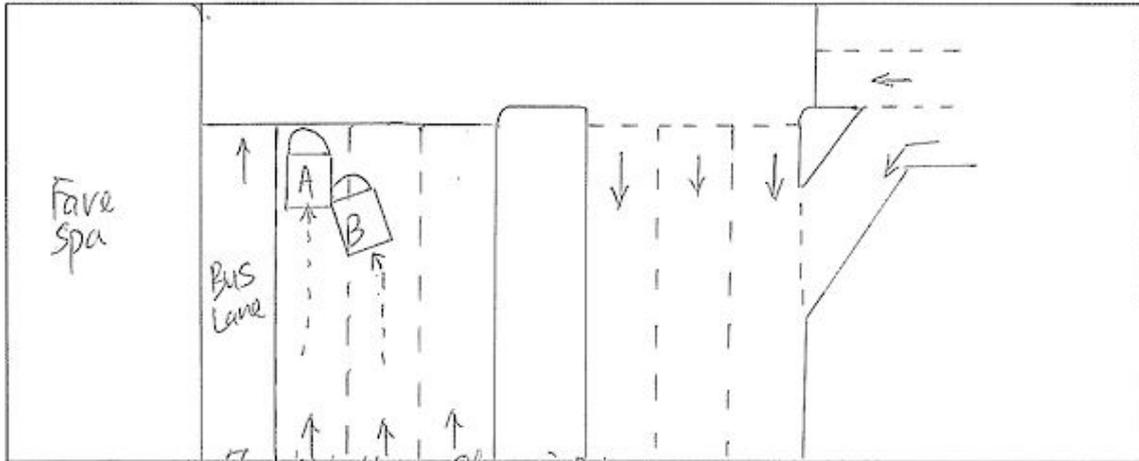
 Policyholder's Signature
 Date & Time:

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

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

Date of accident: 17/03/2023 Time: 21:21 Location: 56 New Upper Changi Rd
 My Vehicle A: SNF 7063A Vehicle B: SJS 703L Vehicle C: -

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/03/2023 @ 21:21 hours: I was driving at 56 New Upper Changi Rd. Suddenly vehicle B: SJS 703L change lane and collided into my vehicle A: SNF 7063A and caused my right rear portion damaged. We alighted and exchanged particulars. No one was injured.

- Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks: Please forward a copy of my efile accident report to:
 My workshop:  ary.chua@aw.sg
 Email address & myself:
 Email address: Housefean3299@gmail.com

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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


 Policyholder's Signature
 Date & Time:

 20/3/2023
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:


 Reporting Centre Personnel's Signature
 Name: Zila
 Ah Lim Motor Company
 NRIC/FIN No.:























VINCAR

VEHICLE LEASING AGREEMENT

This **VEHICLE LEASING AGREEMENT** ("Agreement") is made on the date specified in the Schedule as Agreement Date.

Between **VINCAR LEASING AND RENTAL PTE. LTD.** (UEN 201414828K), a company incorporated in Singapore and having its registered office at No. 1 Chang Charn Road, #05-02, OC Building, Singapore 159630 (the "Owner") of the one part; and

COGNOSPHERE PTE. LTD. (NRIC No. 202124361E), residing at 6 RAFFLES QUAY, #14-02, SINGAPORE 048580, SINGAPORE 449301 (the "Hirer") of the other part.

AGT No. VCR/2022/029 Page 1 of 17
VEHICLE LEASING AGREEMENT

VINCAR LEASING AND RENTAL PTE. LTD.
(CO. REG. NO. 201414828K)
www.vincar.com.sg

ADMIN OFFICE
1 Chang Charn Road 05-02/03 OC Building S159630
T 6474 1119 F 6479 1911



eTiQa

Insurance

INTERVIEW FORM

Name (Driver): Lim Hong Kee

Policy No: M 6033012

Vehicle No: SNF 7063A

Place of Accident: 56 New Upper Changi Rd

Insured Driver's relationship with Insured: personal used

Drink Driving of Insured and/or Insured Driver: No

No of passenger(s) in Insured vehicle: No

Injury to Insured and/or Insured driver, please indicate which hospital: No

Third Party Vehicle No (if any): SJS 703L

No of passenger(s) in Third Party Vehicle: 02

Injury to Third Party driver and/or passenger(s), please indicate which hospital: -

Type of collision and the extensiveness of the damages to all vehicles/Third Party property involved: Change lane

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement): -

Traffic Police report (enclosed) Yes / No

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)

20/3/2023
 Driver (Name & Signature) / Date
 I, affirmed the above information is given to my best knowledge

Zila 20 MAR 2023
 Attended by (Name & Signature) / Date

Workshop Name: Zila
Ah Lim Motor Company

Etiqua Insurance Pte Ltd
 One Raffles Quay
 #22-01 North Tower
 Singapore 048583

T +65 63360477
 F +65 63392109

www.etiqua.com.sg
 Company Reg. No. 201339050

Member of  Maybank Group



M2400
70000267
Cov. Type: Comprehensive

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) • MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE No. M0033012

- | | | | |
|--|-----------------------------------|---------------|-----------------------------|
| 1. Index Mark and Registration Number of Vehicle | SNF7063A | | |
| 2. Name of Policyholder | Vincar Leasing and Rental Pte Ltd | | |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 16/11/2022 | | |
| 4. Date of Expiry of Insurance | 31/07/2023 | | |
| 5. Persons or Classes of Persons entitled to drive | | Engine No | : 2AR2373209 |
| | | Chassis No | : AGH300305725 |
| | | Hire Purchase | : Maybank Singapore Limited |

(A) THE POLICYHOLDER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS 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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER:
(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(ii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

* Limitations 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 bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

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).

GOPLTY 07/12/2022 16:11:46



For and on behalf of Etiqa Insurance Pte. Ltd.
Approved Insurer


Authorised Signature