

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	06/03/2023 17:54 (SGT)
Reported by	Driver
Date of Accident	04/03/2023 16:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 5 TOWARD CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF4610P
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	RABBIT CAR RENTAL PTE LTD
Company Reg No	201916547M
Email Address	tabatha@shariot.com
Mobile Phone No	(Phone) +65-90581132
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	VEZEL 1.5X HYBRID CVT ABS D/AIRBAG 2WD
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
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	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2002215280

DRIVER

Name of Driver	KOH KENG NGUAN
NRIC No	S1832374E
Date Of Birth	31/10/1967
Occupation	Outdoor

Date Of Driving Pass	21/09/1993
Driving experience	29 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83339543
Alt. Phone Number	-
Email Address	robinkoh67@gmail.com
Address	899C WOODLANDS DRIVE 50 #09-292 (S) 732899
Address complement	-
Postcode	-
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 - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	-

PASSENGER 1

Name	PASSENGER
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 WITH 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	SLZ5614S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	POON HANG WEE
NRIC No	S6807267J
Contact Number	(Phone) +65-92379837
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KOH KENG NGUAN
Gender	Male
Phone No	(Phone) +65-83339543
Address	899C WOODLANDS DRIVE 50 #09-292 (S) 732899
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	GRACE CLINIC & SURGERY - 3 DAYS MC
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

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.
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6 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.



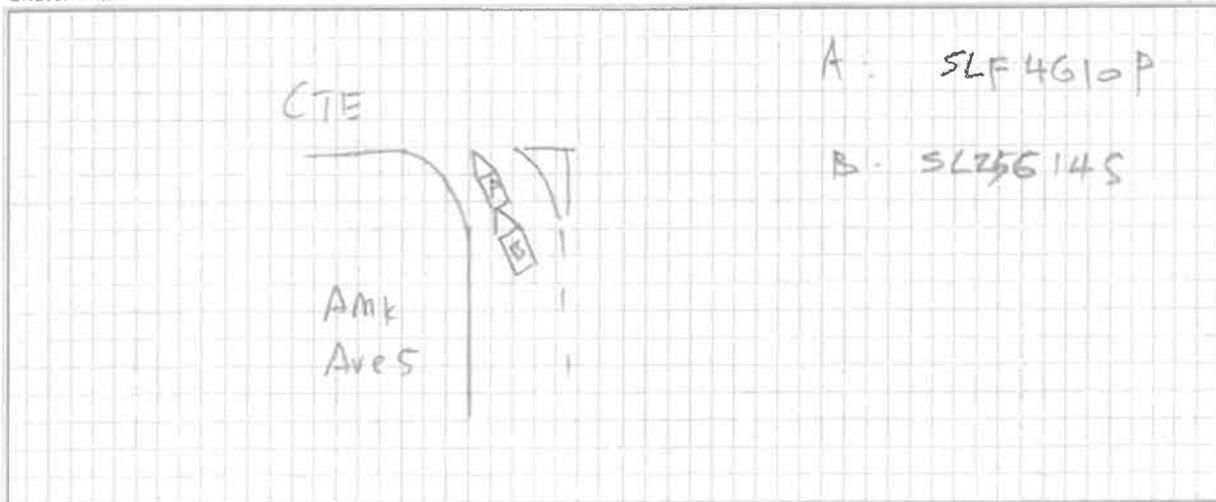
Policyholder's Signature / Date & Time

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



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

Sketch Plan



Describe Circumstance of the Accident

Refer attached Police Report

Note: Please note that your insurer may have 14days time frame for you to submit an own damage claim under your own 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



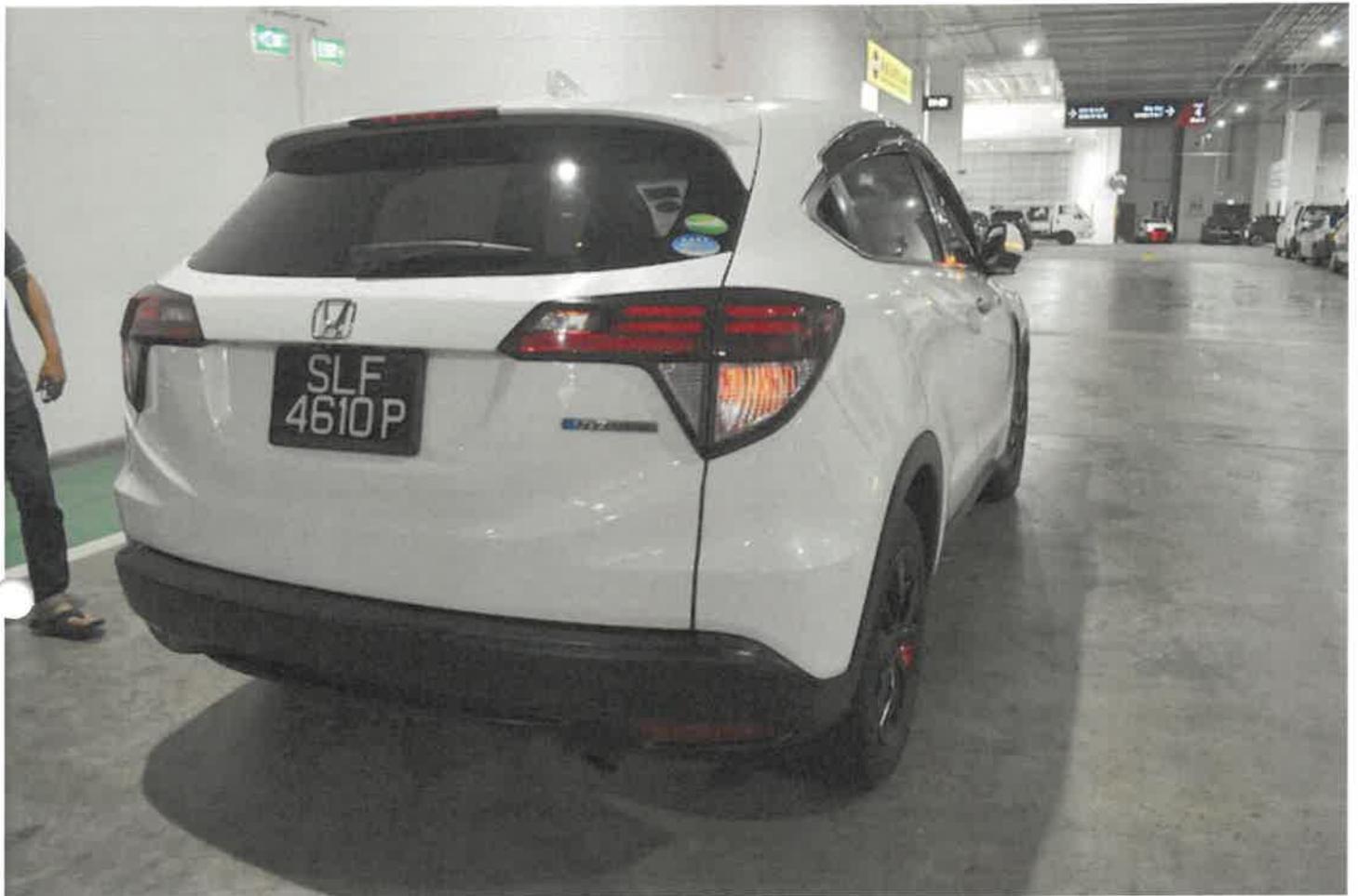
Driver's Signature (if driver is not the policyholder) / Date & Time



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











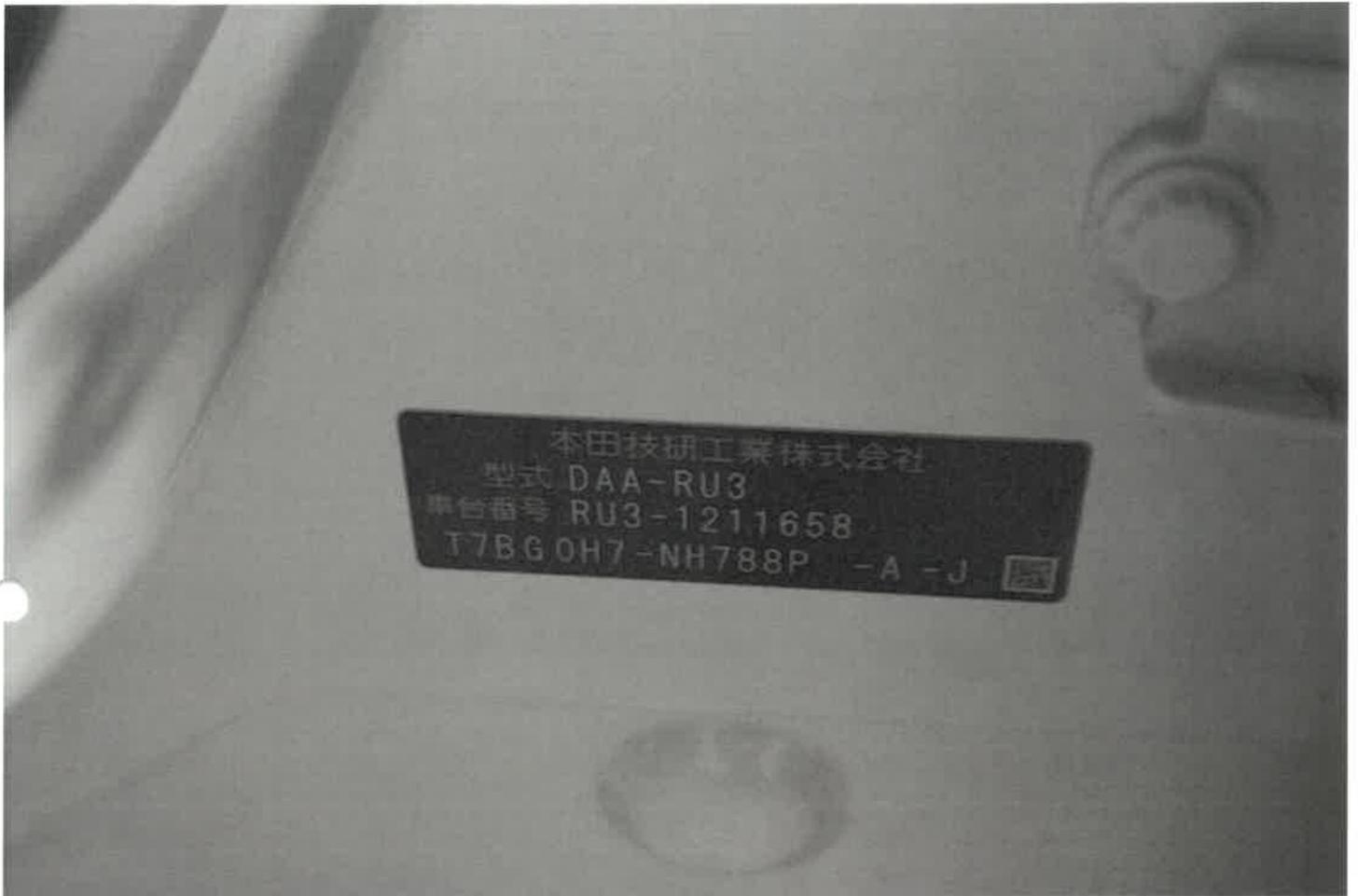

















**SINGAPORE
POLICE FORCE**


T/20230306/7062

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

1 of 3

Report No: T/20230306/7062

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/03/2023 14:46		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: KOH KENG NGUAN			Address: 899C WOODLANDS DRIVE 50 #09-292 SINGAPORE 732899		
ID Type / ID No.: NRIC NO / S1832374E			Contact No.:		Mobile: 83339543
Nationality: SINGAPORE CITIZEN			Email: robinkoh67@gmail.com		
Sex: Male	Age: 55	Date of Birth: 31/10/1967	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3,4,5		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/03/2023 04:10	Type of Location: Slip Road towards CTE
Location: ANG MO KIO INDUSTRIAL PARK 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLF4610P	Car	HONDA	Vezei	White	Slightly Damaged	1
SLZ5614S	Car	TOYOTA	Sienta	Blue		0



**SINGAPORE
POLICE FORCE**



T/20230306/7062

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

2 of 3

Report No T/20230305/7062

CONTINUATION OF REPORT

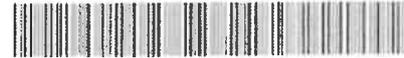
Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KOH KENG NGUAN	ID No.	S1832374E
Related Vehicle	SLF4610P (Car)	Contact No.	83339543
Hospital/Clinic	GRACE CLINIC & SURGERY	Class of Driving Licence & Expiry	Class: 3,4,5 Date of Expiry: NIL
Date	06/03/2023	Date	06/03/2023
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	POON HANG WEE	ID No.	S6807267J
Related Vehicle	SLZ5614S (Car)	Contact No.	92379837
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3,4 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

I am driving along Ang Mo Kio Avenue 5, turning into a slip road to enter CTE.
I was stationary in the slip road as there are on-going vehicles passing by, while I was waiting for the road to be clear for me to enter, a vehicle suddenly knock into the rear of my vehicle.
My vehicle carplate: SLF4610P
3rd party carplate: SLZ5614S



**SINGAPORE
POLICE FORCE**



T/20230306/7062

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

3 of 3

Report No: T/20230306/7062

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.
Signature Of Interpreter: Not applicable	Date/Time: 06/03/2023 14:46
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No : 65476204	Classification Of Case:

NP168



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number	: SP2002215280
Date of Issue	: 07 July 2022
Coverage	: COMPREHENSIVE - AUTHORISED WORKSHOP
Policyholder	: RABBIT CAR RENTAL PTE. LTD.
Finance Company	: HAMILTON CAPITAL PTE LTD
Period of Insurance	: 01 July 2022 To 30 June 2023 (both dates inclusive)
Registration Number	: SLF4610P
Chassis Number of Vehicle	: RU31211658

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 or to whom the vehicle is hired.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
 (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
 (c) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by any person to whom the vehicle is hired and for use within Singapore only.

* Limitation rendered inoperative by Section 8 of 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.

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
 (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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).

07 July 2022
 Issue Date


 Hikmah Raisi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: _____ Vehicle Registration No: SLF4610P

Name (as shown in NRIC): RABBIT CAR RENTAL PTE LTD NRIC/PIN/Passport No: _____

(* Vehicle Driver/Policyholder) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 90581132

Email Address: _____

Date of Accident: 04/03/2023 Time of Accident: 0410hrs

Place of Accident: ANG MO KIO AVE 5 TOWARD CTE

Insurance Company: ALLIANZ INSURANCE SINGAPORE PTE LTD

(B) ADDITIONAL INFORMATION /AMENDMENTS:

 The above-mentioned accident and would like to include additional information or amendments:

To amend date of accident should be 04/03/2023.

RABBIT CAR RENTAL PTE LTD
Policyholder / Actual Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):

PERFECT MOTOR
2 Defu South Street 2
#04-06
FINAL REPAIR BILL

Rabbit Car Rental Pte Ltd

29/03/2023

459 Macpherson Road, Singapore 368177

Vehicle Registration Number: **SLF4610P**

To supply necessary parts and labour to repair the above vehicle at a lump sum of **\$1,950.00**

Rental Invoice

Rabbit Car Rental Pte Ltd
459 Macpherson Road
Singapore 368177
ATTN: ADMIN & FINANCE

Tax Invoice No:
A 3336 R

Dated:
23/03/2023

Delivery Note:

Terms of Payment:
Due upon receipt

Supplier's Ref:

Other Reference:

Buyer Order (PO) No:

PO Dated:

Customer Details

KOH KENG NGUAN (S1832374E)
BLK 899C WOODLANDS DRIVE #09-292
Singapore 732899
Phone No:

S.No	Product	Description	Qty	Price (SGD)	Amount (SGD)
1	SLF4610P	REPLACEMENT CAR (SNG4287K, Kia Niro Hybrid) RENTAL PERIOD FROM 07/03/2023 to 20/03/2023, 14 DAYS	1	1,360.80	1,360.80
Sub Total (SGD)					1,360.80
Total (SGD)					1,360.80

Amount in Words

One Thousand Three Hundred Sixty and Eighty cents Singapore Dollar (SGD)

Company's REGN NO: **201916547M**
Company's GST: **201916547M**

For Rabbit Car Rental Pte Ltd

Declaration:

We declare that this Standard Rated Invoice shows the actual price of the goods described and that all particulars are true and correct.

Billed by: Rabbit Car Rental Pte Ltd

NOTES:

Notes

Enquire Vehicle's Insurance Particulars

Enquire Vehicle's Insurance Particulars (As At 06 Mar 2023 / 16:10:00)

Vehicle Insurance Details

Vehicle No.:

SLZ5614S

Make Description/Model:

TOYOTA / SIENTA HYBRID 1.5X CVT

Insurance Company Name:

INDIA INT'L INS PTE LTD

Business Transaction Reference No.:

20230307090400558547

Please retain the business transaction reference number for Enquire Vehicle Owner Details (if required).

Save as PDF

OK →

Print



Thank you

You have successfully logged out.

Your last login date and time was 07 Mar 2023, 09:03:33.

To return to ONE.MOTORING, please click [here](#)

For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

S/No.	Asset Type	Asset ID	Transaction Type	Transaction Amount(\$)	Log Date/Time
1	Vehicle	SLZ5614S	18.19 Enquire Veh Owner Info (Others) by Law Firm	26.75	07 Mar 2023 / 09:04:00