

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	01/06/2023 12:47 (SGT)
Reported by	Actual Driver
Date of Accident	31/05/2023 09:30 (SGT)
Exact Location of Accident	Upper E Coast Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB6065X
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KH LEASING PTE LTD
Company Reg No	201611813C
Email Address	kahupleasing@gmail.com
Mobile Phone No	(Phone) +65-96566588
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private hire
Transmission	Auto
CC	1795

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D23MFL0000823

DRIVER

Name of Driver	MOHAMMED ALI S/O MOHAMED YUSUFF
NRIC No	S7437982F
Date Of Birth	26/09/1974
Occupation	Outdoor

Date Of Driving Pass	30/11/2004
Driving experience	18 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91846985
Alt. Phone Number	-
Email Address	kahupleasing@gmail.com
Address	BLK 60 GEYLANG BAHRU
Address complement	#02-3309
Postcode	330060
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?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	N.A
Gender	Female

PASSENGER 2

Name	N.A
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Rochor Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002949999
Alt. Police Station Phone No	(Fax) +65-63918583
Police Station Address	11 Kampong Kapor Road Singapore 208678
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER ATTACHED SKETCH PLANS AND POLICE REPORT.

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	SLG9735A
Vehicle Manufacturer	Honda
Vehicle Model	Vezei
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHUA WEE KANG
-	S8013399E
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	CHUA WEE KANG
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	REFER POLICE REPORT.
Injured person in which vehicle?	SLG9735A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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.

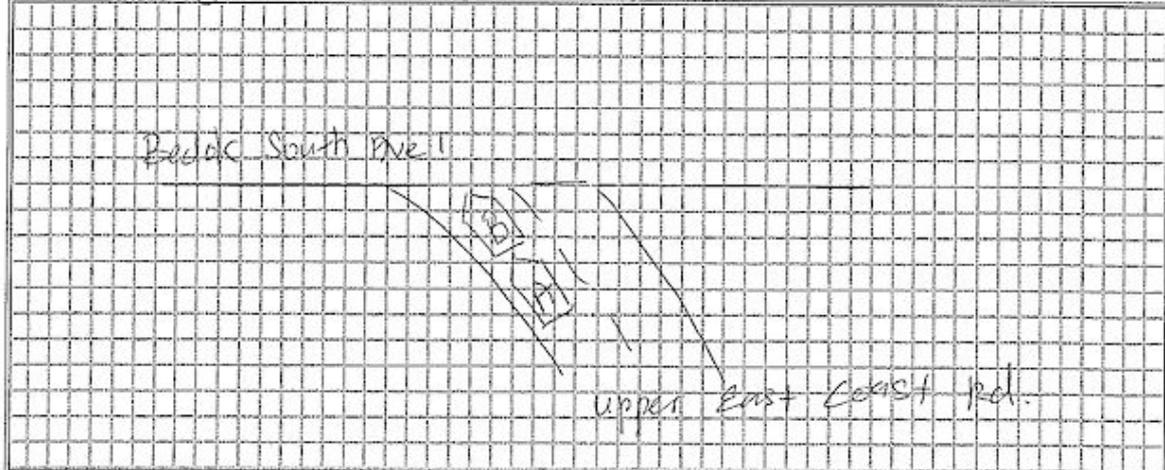
8. Consent under the Personal Data Protection Act (PDPA)

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)
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Sketch Plan (A) SLB 6065 X (B) SLG 9735A



Describe Circumstances of the Accident

Refer police report
T/20230531/2040

Claim OD Claim Third Party Claim OD/TP at other workshop Reporting Only

Please forward a copy of my efile accident report to:
My workshop : KCH
Email address :
Myself email :

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

Declaration

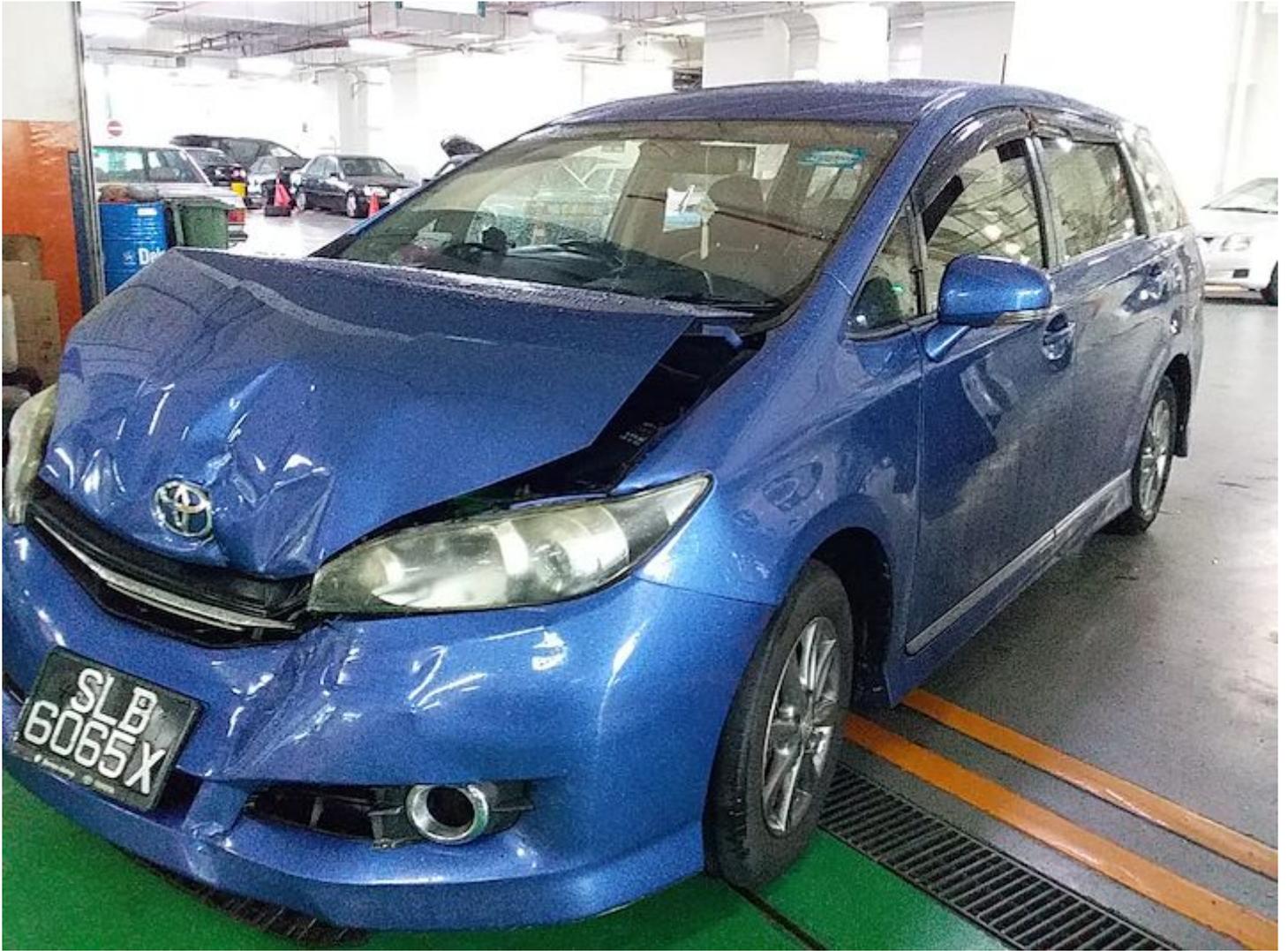
I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel























**SINGAPORE
POLICE FORCE**



T/20230531/2040

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20230531/2040

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/05/2023 13:57	Vide Report No.: G/20230531/0067	Station Diary No.: 81
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Informant's Particulars

Name of Informant: MOHAMMED ALI S/O MOHAMED YUSUFF			Address: APT BLK 60 GEYLANG BAHRU #02-3309 SINGAPORE 330060		
ID Type / ID No.: NRIC NO / S7437982F			Contact No.: Home/Office: Mobile: 91846985		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 48	Date of Birth: 26/09/1974	Type of Informant: Driver		
Race: Indian			Language:		
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 31/05/2023 09:35	Type of Location: SLIP ROAD
Location: UPPER EAST COAST ROAD			
Weather: Clear		Road Surface: Dry	
Traffic Flow:		Traffic Control:	Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLB6065X	Car	TOYOTA	MCARNO	Blue	Seriously Damaged	2
SLG9735A	Car	HONDA			Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20230531/2040

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20230531/2040

CONTINUATION OF REPORT

Driver			
Name	MOHAMMED ALI S/O MOHAMED YUSUFF	ID No.	S7437982F
Related Vehicle	SLB6065X (Car)	Contact No.	91846985
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
Driver			
Name	CHUA WE CHENG, WILLIAM	ID No.	S8013399E
Related Vehicle	SLG9735A (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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 31/05/2023 at around 0938hrs, I was driving my vehicle, SLB6065X along Upper East Coast Road. The road led to left turn to a slip road into Bedok South Avenue 1. My vehicle reached the slip road, which had 2 lanes. My vehicle was on the left lane. There was a vehicle in front of me at the slip road. The lane along Upper East Coast Road was clear and I moved my vehicle forward without stopping, as I believed that the vehicle SLG9735A also continued moving forward. However, SLG9735A had stopped, and my vehicle ended up colliding into the rear of SLG9735A.

At the point of the collision, I was carrying 2 passengers, and both of them informed they were not injured. As such, I refunded them their trip cost from my own pocket and the passengers left.

Police were called and attended, for incident G/20230531/0067. Subsequently, ambulance was called. The other vehicle had 1 passenger along with the driver. I noted that the driver of the other vehicle was conveyed by ambulance, however the other passenger was not. As of now, I do not feel any pain.

As a result of this collision, the front bonnet of my vehicle has sustained damage.

I was given a case card along with an IO named Esmond.



**SINGAPORE
POLICE FORCE**



T/20230531/2040

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20230531/2040

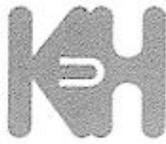
CONTINUATION OF REPORT

Signature of Officer Recording The Report: A / SGT 2 MUHAMMAD AMZATH KHAN	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / GIT / SGT 2 PHUA TIAK YEE Contact No.: 65476200	

Signature Of Informant:	
Date/Time: 31/05/2023 13:57	
Classification Of Case:	

NP168





KH LEASING PTE LTD

261A Upper Thomson Road, Singapore 574388 Tel: 6458 9997 Fax: 6453 1234
Co Reg No: 201611813C GST Reg No: 201611813C

VEHICLE RENTAL AGREEMENT

No. 9162

Date: Thursday, 15 Dec 2022

Person-in-Charge: LWY

1) Hirer's Particulars:

I/We: MOHAMMED ALI S/O MOHAMED YUSUFF

NRIC/Passport/RC/RB No: *****982F

Tel: 91846985

Address: Apt blk 60 Geylang Bahru #02-3309 s330060

I hereby agree to hire the undermentioned vehicle from the owner: **KH Leasing Pte Ltd**. Owner and Hirer have agreed and understood all the terms and conditions on both sides of this agreement and signifies acceptance upon signing

Name of Driver(s) in full: MOHAMMED ALI S/O MOHAMED YUSUFF

Date of Birth: 26-09-1974

NRIC/Passport No: *****982F

Driving License No: *****982F

Driving License Issue Date: 30-11-2004 HP: 91846985

Country of Issue: Singapore

Bank: _____

Account No.: _____

Name of Additional Driver(s) in full: _____

Date of Birth: _____

NRIC/Passport No: _____

Driving License No: _____

Driving License Issue Date: _____

Country of Issue: _____

Bank: _____

Account No.: _____

2) Vehicle Details:

Vehicle No: SLB6065X

Make and Model: TOYOTA WISH 1.8 CVT

Engine No: _____

Chassis No: _____

Date, Time and Mileage on Collection: 15-12-2022 (date) 3:50 PM (time) _____ (mileage)

Date, Time and Mileage upon Return: _____ (date) _____ (time) _____ (mileage)

3) Period of Lease:

For 25 week(s) days/weeks/months 15-12-2022 ("Commencement date") to 08-06-2023 ("Lease period")

4) Rental Charges:

Amount:

_____	Days Rate @ \$	_____	/ day
<u>25</u>	Weeks Rate @ \$	<u>504.00</u>	/ week
_____	Months Rate @ \$	_____	/ month
_____	(refundable) Deposit \$	<u>500.00</u>	

Remarks:

DEP \$500 TRF FRM 8901 SLF4788K
15/12/2022

Payment on every: Thursday

Interest rate of 1.5% will be charged on overdue payments.

- Note**
- : Hirer unconditionally agrees to pay \$2500 comprising excess payable and compensation to owner for impact of claim on future motor insurance premiums.
 - : Hirer is responsible for the first \$2500 excess (Section 1) and \$2000 excess (Section 2) for collision/damage to KH Leasing Pte Ltd (including windscreen) plus loss of earnings while damaged vehicle is under repair.
 - : No insurance coverage for driver below 22 and/or above 65 years old and for with driving experience less than 2 years and below.
 - : Please check radiator water and engine oil daily.
 - : Extra charges are required for those vehicles that run out of petrol, lost key and etc.
 - : This vehicle is used within Singapore only. Our insurance does not cover Malaysia
 - : The contract will become recurring unless it is otherwise stated.
 - : KH has the right to disclose all personal data to another party.

Remark: All payments received are GST inclusive.

Hirer's Signature



Authorized Signature

Bank Transfer to UOB Current A/C: 314-306-253-6 KH LEASING PTE LTD
DBS Current A/C: 015-904882-9 KH LEASING PTE LTD