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 10/07/2023 17:57 (SGT) Reported by **Actual Driver** Date of Accident 09/07/2023 13:25 (SGT) Exact Location of Accident Near Blk 102c, Singapore Additional Location Information PUNGGOL ROAD TOWARDS TPE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SJL5236Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TRIBECAR PTE LTD Company Reg No 2XXXXX563H Email Address PAUL@TRIBECAR.COM Mobile Phone No (Phone) +65-92735778 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Vios 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 1500

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2006068103

DRIVER

Name of Driver AZIZAN B AB AZIZ NRIC No SXXXX405C Date Of Birth 13/05/1972 Occupation Indoor

Date Of Driving Pass 22/11/1997 Driving experience 25 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-96880664 Alt. Phone Number Email Address AZIZAN.B.AB.AZIZ@GMAIL.COM Address APT BLK 315B PUNGGOL WAY #02-667 S 822315 Address complement Postcode 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 Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Yes Police Station Name Punggol Neighbourhood Police Centre Police Station Phone No (Phone) +65-18006049999 Alt. Police Station Phone No (Fax) +65-64468015 Police Station Address Blk 21A Tebing Lane Singapore 828837 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN 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 SMV6544M Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LI XIANG TAO
NRIC No	SXXXX502H
Contact Number	(Phone) +65-81386276
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 Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver NRIC No Contact Number Address	GBB769G Commercial vehicle ABDUL RAHIM BIN AMIN SXXXX305C (Phone) +65-94255487 -
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 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.
- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.

Co. Reg. No: 201605563H

51 Ubi Ave 1 #03-30 Paya Ubi Industrial Park Singapore 408933

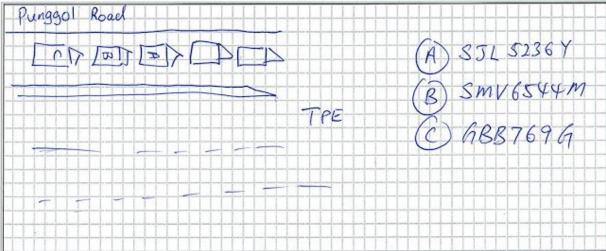
Policyholder's Signature / Date & Time

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

In Wir.

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

Sketch Plan



1

Describe Circumstance of the Accident				
Refer Police Report.				
Party Chi.				

Declaration

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

| NIDECAR PTE. LID.

Co. Reg. No: 201605563H

51 Ubi Ave 1 #03-30 Paya Ubi Industrial Park Singapore 408933

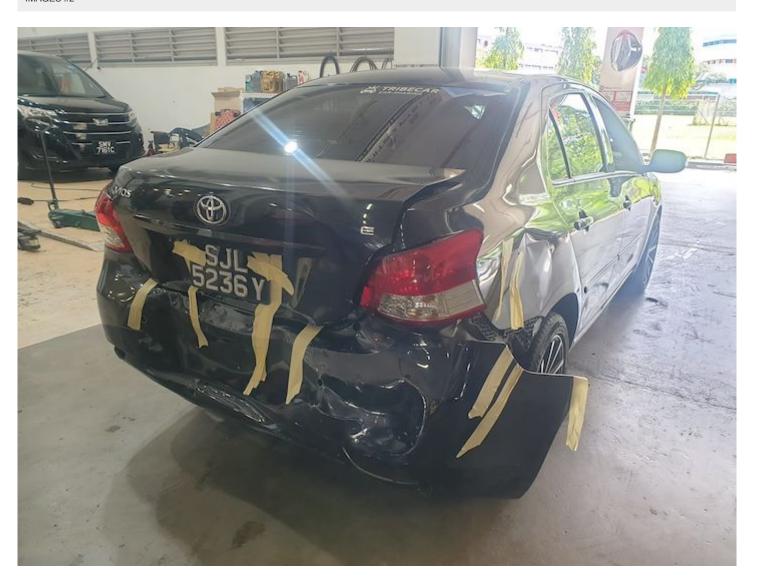
Policyholder's Signature / Date & Time

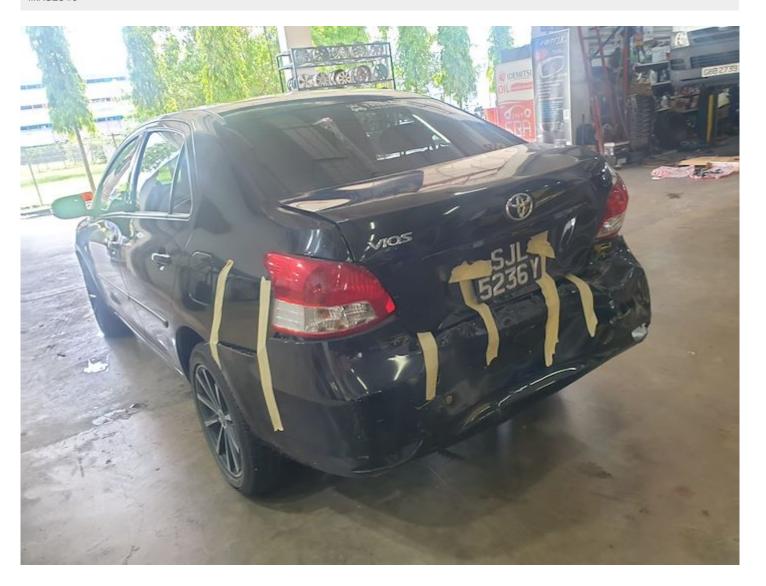
Driver's Signature (if driver is not the policyholder) / Date & Time

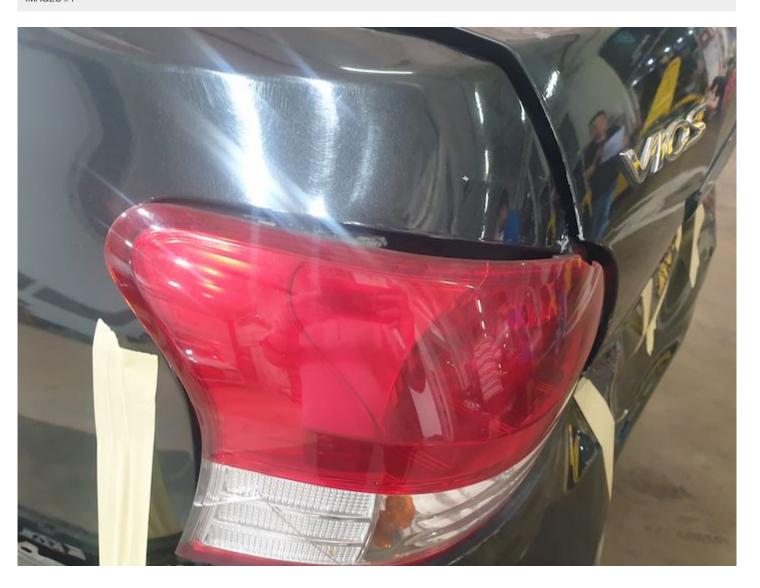
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

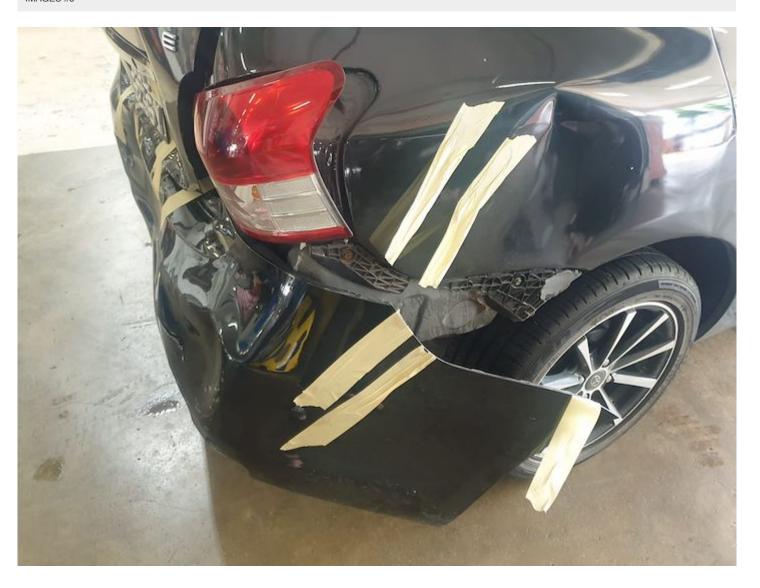
2





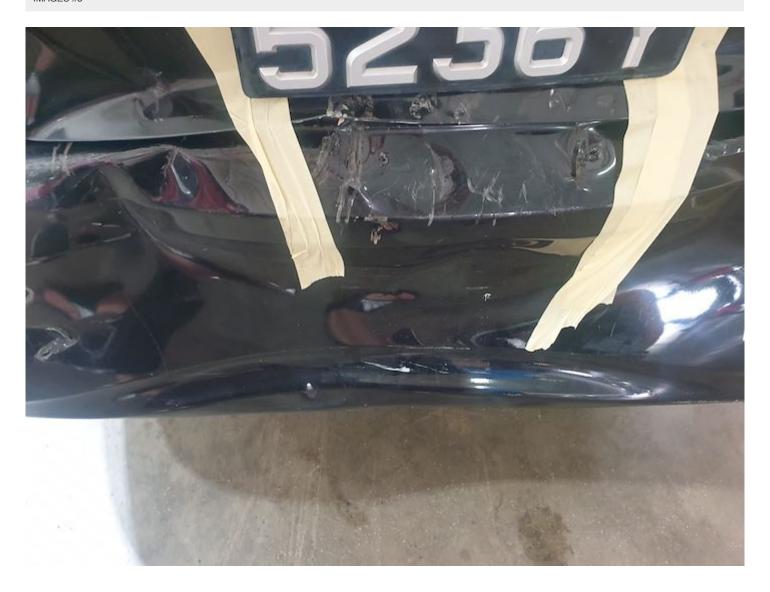






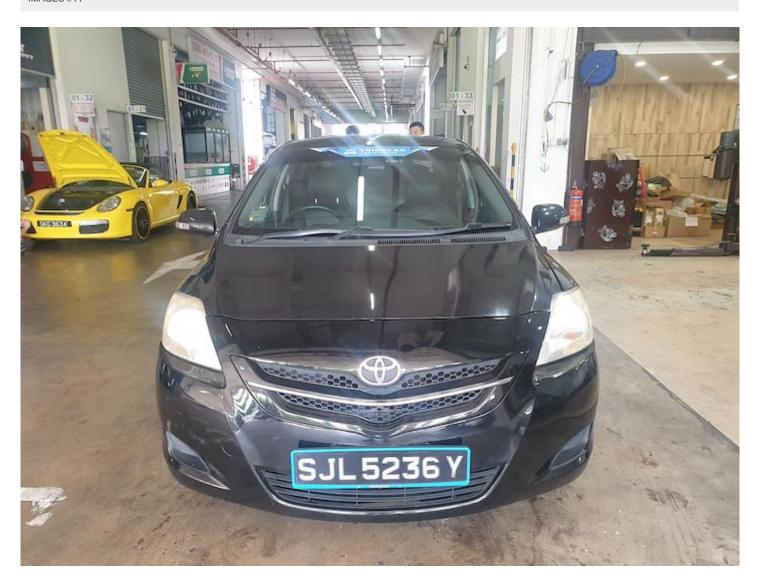






















1 of 4

Report No. T/20230710/2041

Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

		ACCIDENT	Vide Report No.: Station Diary No.		
Date/Time Report Made: 10/07/2023 14:02		lade.	T/20230709/2061	30	
			1/20200100/2001		
Informa	nt's Particu	ulars	_		
Name of Informant: Address: AZIZAN B AB AZIZ APT BLK 315B PUNGGOL WAY #02-667 822315			WAY #02-667 SINGAPORE		
ID Type / ID No.: NRIC NO / S2206405C		05C	Contact No.: Home/Office: Mobile: 96880664		
Nationality: SINGAPORE CITIZEN		EN	Email:		
Sex: Age: Date of Birth: Male 51 13/05/1972			Type of Informant: Driver		
Race: Malay			Language: English		
Occupation: Unemployed			Driving Licence Information: Class: 3 Date of Expiry:		

Type of Attended by Police		Drink Drive: No	Date/Time of Accident: 09/07/2023 01:25	Type of Location Straight Road
Location: TAMPINES E	EXPRESSWAY			
Weather: Raining		Road Surface: Wet		
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB769G	Pick-up Truck				Seriously Damaged	2
SJL5236Y	Car				Seriously Damaged	
SMV6544M	Car				Seriously Damaged	7.5



T/20230710/2041

Police Station Of Origin: Punggol N.P.C

Report No. T/20230710/2041

2 of 4

151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

CONTINUATION OF REPORT

Any Pedestrian I	wolved: No				
		doctrion	Cross	sing: NA	
No. of Pedestrian	is injured. NIL	Use of Pe	uesmar	Closs	sing, IVA
Passenger	AND THE PROPERTY OF THE PARTY O	DINI AZIZANI	ID No.		T0218105Z
Name	MUHAMMAD ZIKRY IZZANIQ	BIN AZIZAN	ID No.		102181052
Related Vehicle	SJL5236Y (Car)		Contact No.		92238972
Hospital/Clinic	PINNACLE FAMILY CLINIC (NORTHSHORE PLAZA 1)			of g ce & Date	Class: NIL Date of Expiry: NIL
Date Treatment	10/07/2023	Date Disc	harge 10/07/2023		7/2023
	ted Medical Leave 03	Degree of			
Driver	1 44	203.000	3-1		
Name	AZIZAN B AB AZIZ	ID No.		S2206405C	
Related Vehicle	SJL5236Y (Car)			ct No.	96880664
Hospital/Clinic	PINNACLE FAMILY CLINIC (NORTHSHORE PLAZA 1)			of g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	10/07/2023	Date Disc	harge	10/07	/2023
	ted Medical Leave 03	Degree of			
Passenger					
Name	MUHAMMAD RIZKY IZZANIQ BIN AZIZAN		ID No.		T0633112I
Related Vehicle	SJL5236Y (Car)			ct No.	96458864
Hospital/Clinic	PINNACLE FAMILY CLINIC (NORTHSHORE PLAZA 1)			of g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	10/07/2023 Date Disc			printers and the second	/2023
	ted Medical Leave 03	Degree of			

Brief Details.

On 9 July 2023 at about 1.25pm, I was travelling along the Punggol Road slip road merging into TPE. As there was heavy traffic, there were about 3 stopped cars in front of me. I also came to a stop. During the stop, I felt a bang at the back of my rental car. Upon alighting I saw that there was a chain collision involving 3 cars. I then moved my vehicle to a road shoulder to avoid blocking other vehicles from passing. After the move I start to take photo and video of the accident. There was a tow truck that is at the location and they called for ambulance. However, traffic police was also activated. After the traffic police attended to me, I then drive my vehicle to the workshop for repairs.





Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 4 of 4 Report No. T/20230710/2041

CONTINUATION OF REPORT

Signature of Officer Recording The Report: F / SGT 3 LAI TECK YONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2023 14:02
Officer In Charge Of Case: TP / GIT / SI MUHAMMAD FARHAN BIN MOHAMED Contact No.: 65476224	Classification Of Case:

NP168





Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 3 of 4 Report No. T/20230710/2041

CONTINUATION OF REPORT

The purpose of doing this report again is because after the accident, I felt pain at my back and went to clinic to see doctor and was given 3 days of MC. There were 4 passengers in my vehicle and most of them felt pain and went to see the doctor immediately.



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 : SP2006068103 Date of Issue : 30 May 2023 : THIRD PARTY ONLY Coverage Policyholder : TRIBECAR PTE. LTD.

Finance Company 9 .

Period of Insurance : 27 May 2023 To 26 May 2024 (both dates inclusive)

Registration Number : SJL5236Y

Chassis Number of Vehicle : MR053HY9305083040

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
- * 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.
- (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

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).

30 May 2023

Issue Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000154 NEWSTATE STENHOUSE (S) PTE LTD

Excess

: Section 1: Own Damage Section 1: Windscreen NA Section 2: Liabilities to Third Parties 2,000.00 SS

Allianz Insurance Singapore Pte, Ltd. (UEN 201903513C

79 Robinson Rocks (#99-01 | Singapore 0x8897 | Tell + o5 671.1 3365 | Website lower officing sq.