## **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.

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   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 First Submission 24/09/2024 18:11 (SGT) Reported by **Actual Driver** Date of Accident 24/09/2024 10:00 (SGT) Exact Location of Accident Singapore Additional Location Information SLE Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Mini

Vehicle Registration Number SKS9748L

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ENTRUST CAPITAL PTE. LTD. Company Reg No 2XXXXX130H Email Address DERRICK2277@GMAIL.COM Mobile Phone No (Phone) +65-98985518 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer

Model Cooper 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 Vehicle Fuel Petrol First Regisration Date 18/05/2015

Chassis no WMWXS520502B37524 Effective Date/Time of Ownership 18/05/2015 00:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5147415302

DRIVER

Name of Driver NRIC No Date Of Birth Occupation Driving Pass Date Driving License Pass Class Driving License Validity Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	JOEL CHIN WEN HAO SXXXX223F 07/01/1994 Indoor 30/03/2015 3 Valid 9 YEARS AND 6 MONTHS Male (Phone) +65-82232290 - JOEL_CHIN@HOTMAIL.COM APT BLK 687C WOODLANDS DRIVE 75 #11-55 - 733687 No Hirer 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 Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  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? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHED	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer	GBE2963H -

Vehicle Model Vehicle Variant	-
Vehicle Cotons	-
Vehicle Category	Commercial vehicle
Name of Driver	TAN KIM HONG
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 Gender Phone No Address	JOEL CHIN WEN HAO Male (Phone) +65-82232290 APT BLK 687C WOODLANDS DRIVE 75 #11-55
Address Complement Post Code	- 733687
Approximate Age Years Old	-
Injuries Sustained Injured person in which vehicle?	- SKS9748L
Were seat belts worn? Was this injured conveyed to hospital by ambulance?	Yes No

### SKETCH PLAN

### IMPORTANT NOTICE

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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.
- Any false reporting may be referred to the Traffic Police Department for investigation.
- 8. 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 fodgement 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

- (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.
- (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 lawress law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signs ture / Date & Time

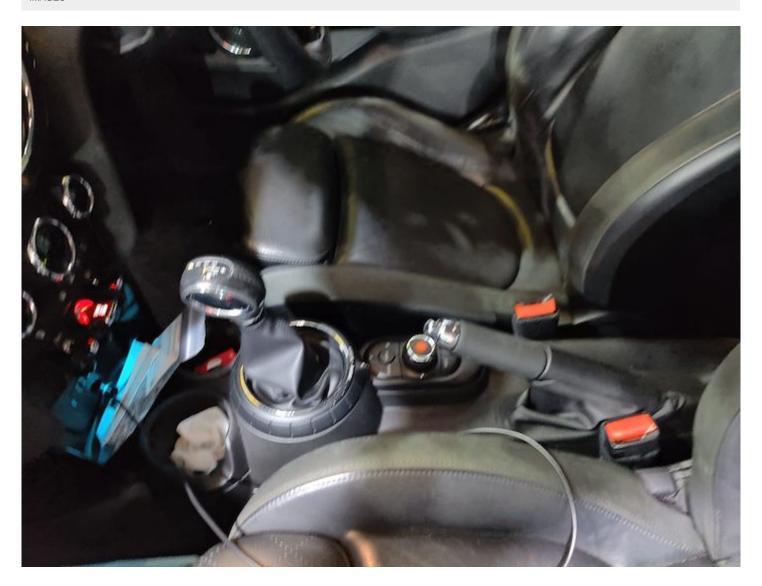
UEN: 202206130

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

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

24/9/2014 Sketch Plan M

cribe Circumstance of the Accident	
I was driving SLE at 2nd lane. Suddenly, s	t feel an impact
from behind and notice vehicle no: GBE2963H L	it into my vehicle.
both of us exchange particular then leave the	Scene.
eclaration	
We declare the presoing particulars are true in every respect.	
202200130H)	LOH
olicyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Person (Name as in NRIC/ID card)









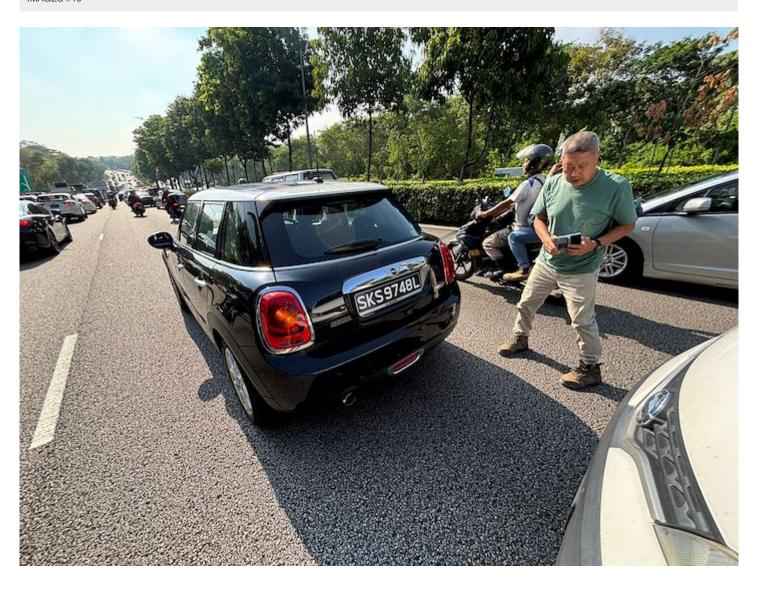


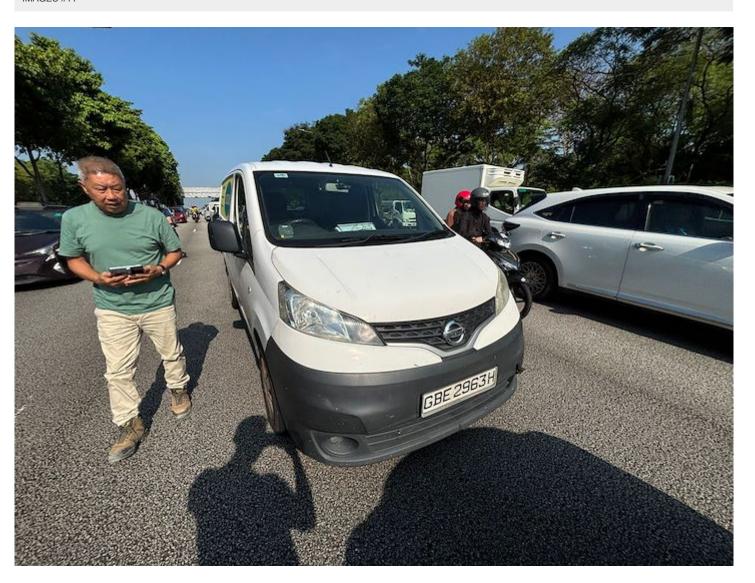












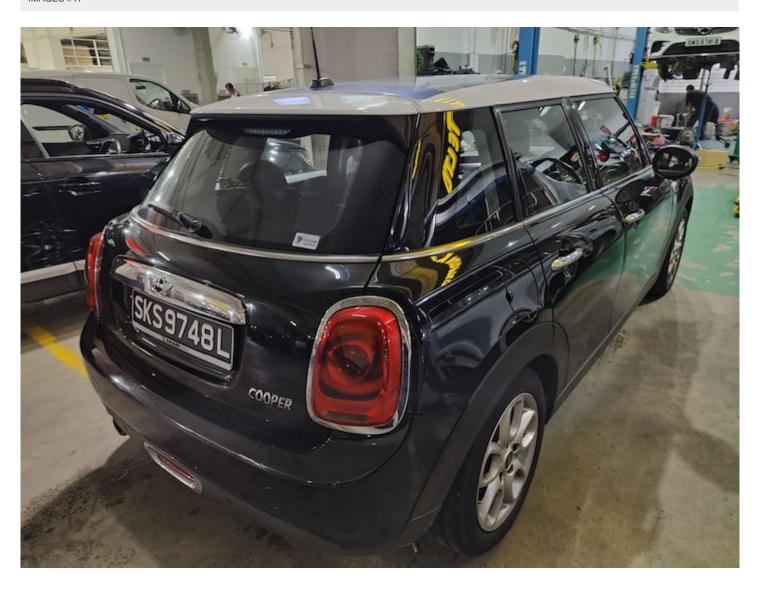












# ENTRUST CAPITAL PTE LTD

6 month contract

Main Office: 1 Kaki Bukit Road 1, #01-44 Enterprise One, Singapore 415934 Tel: +(65) 6909 7277 Fax: +(65) 6909 5595

RENTAL AGREEMENT

Name / Company : NRIC / I	JENNO: Joel Chin Wen		Date: 27 08 3-24
Contact No : Email Address	: 82232200	HOO MPIC: 59401	223F
Address: 687 c Wo	odlands Drive 76 #11	\$5 (0)777199	
remote tro./ colour:	SKS9748L/Black	Make / Model:	
Pick-up Date/Time :	27 8 2021 @ 5:70m	Return Date/Time :	Mini cooper
Milleage Upon Collection:	104 883 LM	Milleage Due for 1st Servicing :	26/2/2025
Overseas Usage :(YES)/ NO	John only. motinton	If Yes,	
2nd Name Driver : YES (NO)		Security Deposit Payment: \$\frac{1}{2},200	
nerung Deposit Amount / Oata .		Rental Payment: \$ 2.200	

ENTRUST CAPITAL PTE LTD referred to as ("our Company") & Above Mentioned NAME / COMPANY referred to as ("the Renter")

The above stated Vehicle is insured for use on Engapore read only. Using of the Vehicle outside of Engapore territory is strictly prohibited, unless approved by our company with an addition of the property of the strictly prohibited, unless approved by our company with an addition of the property. The short is shorted to the senter's possession and is driven within or outside of Engapore, the Renter shall be held fully responsible for any, but not limit to rehicular accident,

- The use of the Vehicle during the period from the date of taking over until the termination date of this agreement or the neturn date of the Vehicle by Renter, shall be under the full responsibility of
- the sensor the above mentioned named or authorised driver(s) lafare allowed to use the Vehicle, in any orcumstances that another driver spart from the named/authorised driver a found using the vehicle, our Company reserve the right to repossess the vehicle and the Senter shall be held full responsibility for any, but not finited to whicle accident, damages, fire or theft caused to this vehicle.

  Should the Vehicle be involved in any traffic violation or parking offence during the contract period, Benter must pay immediately all fines and any fary imposed by the government or any
- S. Upon claiming the Vehicle insurance, the Renter/Driver stated above shall be liable to pay an excess of 5 # £ 0.30 \* to our company.

  S. It any point of time if the Vehicle breakdown due to driver's negligence. Examples flat battery, birs puncture, amony period tank or any other breakdown due to maintenance wear and tear due to that failed to send the Vehicle to our appointed workshop upon our Company request, a nominal fee of \$540.00 (on weekdays \$13 m to 50m) or \$5100.00 (on weeklands \$12 m do 50m) or \$51000.00 (on weeklands \$12 m do 50m) or \$510
- charge to the Renter, For loss of car key & key lods, charges will be subject to the car model.

  The Renter must take note of the Vehicle engine temperature, any overheating due to dinier's negligence, repair and miscellan eous costs will be borne by the Renter. Should there be any overheating due to dinier's negligence, repair and miscellan eous costs will be borne by the Renter. Should there be any overheating due to what he will be due to wear & tear or vehicle breakdown, the Renter is to report to our Company mismediately. No repairs are to be done exhibition our Company especially to find the Renter is talk that may be contained as unauthorised by our Company, our Company reserve the right to repossess the vehicle. Renter is failed to pay a companies on the Vehicle due to Renter's fault, payment of the repair cost must be made to our Company immediately, unless any other alternative arrangement is made.

  Our Company shall not be responsible for loss of or damage to personal beingings and the content therein (including any valuable, even if our Company has been informed) during storage or the Vehicle, the fivel level must be the same as when the Vehicle initially collected. Otherwise, a service fee of \$30.00 on top of the fivel to be fivelled up will be charged to the Renter respectively.

- 13. The Renter shall undertake to pay the advance monthly rent on/before of every month, during the contract period. In the event of Renter default in the payment to our Company, Renter agreed.

  13. The Renter shall undertake to pay the advance monthly rent on/before of every month, during the contract period. In the event of Renter default in the payment to our Company, Renter agreed.
- 13. The Renter shall undertake to pay the advance monthly rent anybefore of every month, during the contract period, in the event of Renter default in the payment to our Company, Renter agreed with our Company has without prior notice given, to seize and take possession of the vehicle, in whatever place the Vehicle may happen to be. Renter shall indemnify our Company fluidy and immediately for the repossession fee of \$200.00 and an adminifie of \$60.00, respectively. Our Company reserve the right to impose a face threst of \$300.00 and \$400.00 and \$400.0
- and the amount will be deducted from the security deposit. Should the amount be larger than the security deposit, the Renter has to top-up the amount and pay our Company immediatory -poin return of
- the Vehicle.

  13 The Renter agrees to Indemnity our Company against all actions claims demands proceeding costs or expenses damages loss and facilities whatspever arrangibut of any breach by the Renter of any

I have read and agreed to all the Terms and Conditions herein,

Name: Joel Chin Wen Hao	Signature :
NRIC : 59401223F	

