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 First Submission 26/09/2024 17:35 (SGT) Reported by **Actual Driver** Date of Accident 25/09/2024 18:16 (SGT) Exact Location of Accident Serangoon Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SKV7481C

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner BIZLINK RENT-A-CAR PTE, LTD. Company Reg No 200402911Z Email Address kenlee@bizlinkgroup.com.sg Mobile Phone No (Phone) +65-90126616 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Corolla 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 - Reporting only your vehicle? Vehicle Category Private car Transmission Auto CC 1591 Vehicle Fuel First Regisration Date Chassis no Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 0999993557-03/1220004407-02

DRIVER

Name of Driver	VANATHAIYAN CHARLES
NRIC No	S7966469C
Date Of Birth	06/07/1979
Occupation Driving Pass Date	Indoor
Driving License Pass Class	11/03/2008 3
Driving License Validity	Valid
Driving experience	16 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90112627
Alt. Phone Number	-
Email Address	vcharlesc@gmail.com
Address	13 sengkang east avenue #16-11
Address complement	-
Postcode	544805
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles?	Hirer
Vehicle Registration Number of Other Vehicle Owned by Driver	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	01 : 0 11:
Weather Conditions	Chain Collision Clear
Road Surface	Dry
	Diy
OTHER INFORMATION	
Manager forcing achieve in the distribution of the second costs.	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident	No
Was anybody injured in the Accident?	3 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	
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	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
<u> </u>	
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	CNIMO71E I
Vehicle Manufacturer	SNM8715J -

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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	GBJ417E -
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

- 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 socurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>reputiliste 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/sw 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 deline 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")

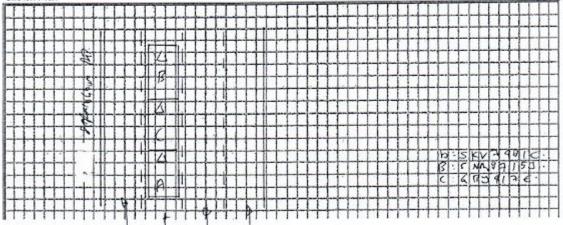
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes; and

(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

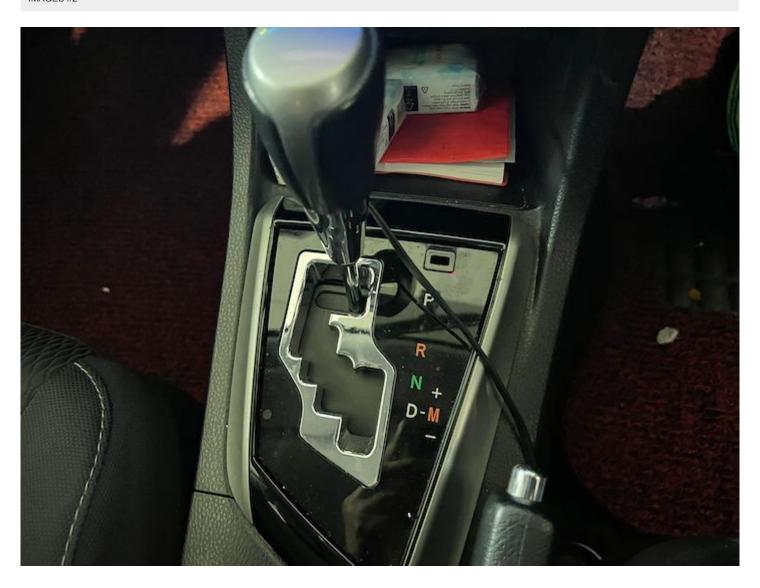
Driver's Signature (if driver is not the policyholder) / Date A Time Witnessed by Reporting Centre Personnel (Name as in NRICHD card)

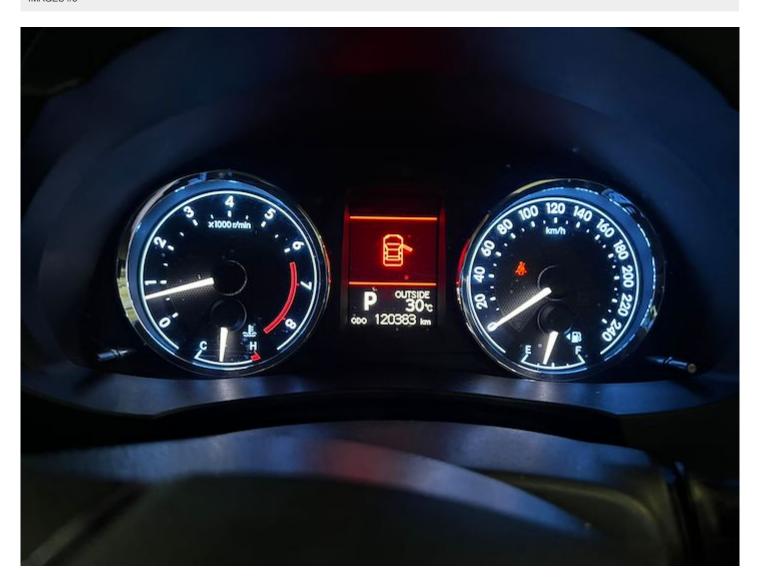
Sketch Plan



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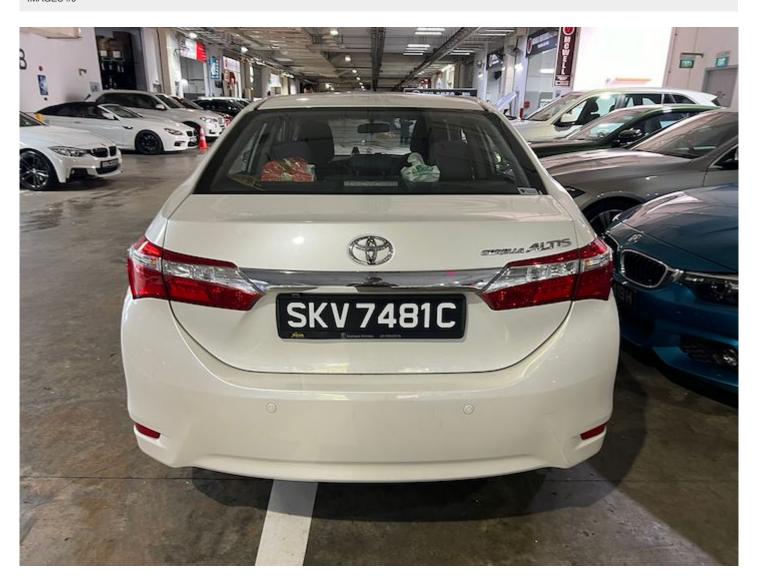














RENTAL AGREEMENT NO: 19438

UEN: 200402911Z

THE SCHEDULE

VEHICLE DETAILS	AND STREET, ST
VEHICLE NO: SKV7481C	SHOWS THE ARTHUR ACCOUNTS
CONTRACT REF: KI/GC-23/102	
MAKE/MODEL: Toyota Altis 1.6A	
DIRECS PARTICULARS	
COMPANY/INDIVIDUAL NAME: Gr	Committee of the Commit
UEN/NRIC: 200719663E	contract Construction Fie Ltd
ADDRESS: 175A Bencoolen Stree	x #08-12 Burlington Square S(189650)
TELEPHONE +65 6297 0388	EMAIL:
PERSON IN CHARGE. Ms. Beny Che	ng
DRIVER'S DETAILS	
NAME: Vanathaiyan Charles	the transfer while personal property
The state of the s	nue #16-11 Singapore 544805
TELEPHONE: +65 9068 2101	
NRIC/PASSPORT NO: S7966469C	
DATE OF BIRTH: 06/07/1979	
SEX: Male	
DRIVING LICENCE NO: \$7966469C	
ISSUE/PASS DATE: 11/03/2008	
EXPIRY DATE: .	
COUNTRY OF ISSUE: Singapore	
ADDITIONAL DRIVER'S DETAINAME.	II.S
ADDRESS	
TELEPHONE:	
NRIC/PASSPORT NO	
DATE OF BIRTH:	
SEX(MF):	
DRIVING LICENCE NO:	and the second s
ISSUEPASS DATE.	
EXPIRY DATE:	
COUNTRY OF ISSUE:	

RENTALLEASING	Company of the second second	0. 包括中国		
DATE OUT: 29/09/202	23 0	DATE IN		
TIME OUT: -	1	TIME IN		
MILEAGE OUT: -				
ESTIMATED DATE OF	RETURN: 28/09/2024	@2359hrs		
INSURANCE EXCESS:	SINGAPORE: 1,200.00	MALAYSI	A:2,500.00	
WINDSCREEN EXCESS	PER CLAIM. 150.00	PETROL L	EVEL Full	
MODE OF PAYMENT		W		
O CREDIT CARD	O PAYNOW TI	O CASH	О отнек	
CHARGES	No Service	THE PARTY	C. Salara	
Rental SS	Per day X	Days		
55	Per week X	Weeks		
\$\$ 1,6	00.00 Per month X	12 Months	19,200.00	
MALAYSIA USE SS.	Per day X	Days	N.A.	
22	Per month X	Months	N.A.	
CDW INSURANCE: SS	Per day X	Days	N.A.	
DELIVERY CHARGES			N.A.	
COLLECTION CHARGE	s		N.A.	
			Television in the	
		SUB-TOTAL	19,200.00	
	GOODS & SERVICES	TAX (GST) 8%	1,536.00	
	TOTAL AMOU	ONT PAYABLE	20,736.00	
PAYMENT BY HIRE	RATIONE			
RENTAL AMOUNT			1,728.00	
DEPOSIT	1,600.00			
TOTAL AMOUNT PAID			3,328.00	
OPTION TO PURCH	ASE (IF APPLICABL	B)	医生物学	
OWNER'S PURCHASE P	RICE		N.A.	
OPTION TO PURCHASE	PRICE		N.A.	
SALES PERSON	All the second		Valletone	
NAME: Ken Lee				
TEL: +65 9689 1621				

REMARKS

Malaysia use surcharge will be applied upon maturity of rental contract. Malaysia insurance covers up to Kuala Lumpur and no replacement car in Malaysia. No smoking, pets and durians.

PERSONAL DATA PROTECTION

The Hirer is aware that by signing the Agreement, the Owner will access and be in possession of personal data of the Hirer. By signing this Agreement the Hirer consents to the use of such personal data as deemed necessary for the operation and effectiveness of this Agreement. The Owner agrees to such use of personal data as is reasonable for the purposes of this Agreement. The Personal Data Protection Policy of the Owner can be found on the Owner's website at www.bialinkgroup.com.sg

I have read and agree to the terms and condition of this agreement If I have presented a charge/credit card for payment, I agree that all amount payable under this agreement and for parking and traffic infringements may be billed to that account and my signature below will be considered to have been made on the charge-credit card voweter. All information I have given "BirLink Rent-A-Car Pie Ltd" in connection with this agreement is true.

PHV Strictly Prohibited Full liability for any violations 24-HOUR ROADSIDE ASSISTANCE 9012 6616

Hirer's Signature / Co's Starner

62 Ubi Road 1, #01-09 Oxley Bizhub 2 Singapore 408734 Tel: 6285 6616.