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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 Authorised 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 ability.
- 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.

	ACCIDENT STATEMENT
Date Of Report	19/03/2018 20:35
Date Of Accident	16/03/2018 18:00
Exact Location Of Accident	JUNCTION OF LIM CHU KANG LANE 1/NEO TIEW RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLF983P
Insured/Policyholder	
Name Of Registered Owner	MOTORWAY CAR RENTALS PTE LTD
Co Reg No	199902927C
Email Address	KEE_W@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96882344
Alternative Phone No	OFFICE-96882344
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	WISH
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093336938
Cover Note Number	
Driver	
Name of Driver	KEE WEE HOCK
NRIC No	S7224444C
Date Of Birth	18/07/1972
Occupation	INDOOR
Date Of Driving Pass	09/02/2001
Driving Experience	17 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96882344
Fax Number	· Burn burner over the Author DAT 京都 等 India
Contact Number	OTHERS-96882344

KEE_W@HOTMAIL.COM

Address

BLK 102 WOODLANDS AVENUE 5

#04-05

Postcode

739011

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own Vehicle

.

100

Insurance Company of Driver's Own Vehicle

-

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 this accident?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s)

400

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

10

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

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

Was there any audio recorded?

...

any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGQ9871X

Vehicle Make/Model/Colour

Details Of Properties

KIA

Vehicle Category

PRIVATE CAR

Name of Driver

MOHAMMED ABDILLAH BIN ABDUL RAHIM

NRIC/Passport Number

S8112052H

Contact Number

Address

1001023

Postcode

Insurance Company Name

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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. The 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 lodgment 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.
- 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, involces, 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 actident 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyhol 47 3 Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Beporting Centre Personnel Signature
Name:
NRIC/FIN No.: COLD

CLF 983P DESCRIBE CIRCUMSTANCES OF THE ACCIDENT ON 16 TH MARCY IS @ 1 FOOVERS. TRAVELLINE Along Lim Cylu King TONORSE Junition of NEO TIEN AUM 1 stopped AT THE T- JUNGEN TO GIVE WAY VEHICLE comiNY From MY RIGHY THE VEHICLE BEELIND DIDN'T STOP. ON TIME AN (SGQ 9871X) HIT MY REAL PIDE OF MY VEHICLE (SLF 983 p THE Accident courts by DEAR CAR JAMAGED AND NO INJUNED FOR DUTY partees DECLARATION I/We decision the appearing particulars are true in every respect. Repairing Centre Personnel's Signature
Name:
NHIC/FIN No.: POSK! NOTAB Policyholder son Driver's Signature Date & Time: (if driver is not the policyholder) Date & Time: FORMAN THIS THROUGH AT

SKETCH PLAN

The premium on this policy has	not been collected.			
Accident MT/0986728	Name of the last o			
	5093336938	Vehicle No.	SLP983F	GST Registration No.
Policyholder Name	MOTORWAY CAR RENTALS FTE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	drivo PREMIUM	Loading
Contact No.(Mobile)	96882344	Contact No.(Office)		Contact No.(Home)
Email Address KFK	Law Account about	Special Remark		eCode
	@ No Yes	TCA	G No Yes	eCode Reason
NCD Protection	. No.	NCD Entitlement(%)	b	Private Hire
Accident Details	CALL SEASON SERVICES			
Report Date	20/03/2018 10:08	Accident Report Within 24 hrs.	Yes	Accident Type
Date of Accident	16/03/2018	Time of Acodent his min	LR:00	Country of Accident
Reporting Centre	TELEPERATURE CONTROL OF THE STATE OF	Drange Force		JCM No.
Accident Location	JUNCTION OF LIM CHU KANG LANE 1/NO	O TIEW RD		
♥ Henefits				
□ Excess	1 (25c/2002 to 8)	winds we make		
Jwn damage Excess	1,900.00	Additional Excess	0.00	Windscreen Excess
Innamed Driver Excess		Outside Singapore OD Excess	1,000.00	
hird Party Excess	0.00	Outside Singapore TP Excess	9.70	
 GST Registered Inform 				
ST Registered ST Registration No.	Ves 199902927C		GST Registration Date	01/08/1999
todification History	196997977		GST Status Venified	Yes
SOLUTION DESIGNATION				
Policyholder Mailing Ad	dress			
ddress 1	1094 LOWER DELTA ROAD	Address 2	MOTURWAY BUILDING	Address 3
ddress 4		Address Type	Singapore address	Post Code
Init Na		Related Pulicy Number	5093337471	Post Code
OI Driver Info		Assertable Company	Composition of the Composition o	
river Name	Unnamed Driver	Driver Type	Unnamed Driver	
nnamed driver Name	KEE WEE HOCK	Driver NRIC	57229444C	Driver DOB
egister Data of Driver License	09/02/2001	Driver Age	45	Driving Experience
ontact Nu.(Mobile)		Contact No. (Office)		Contact No.(Home)
difrese 1	102 WOODLANDS AVENUE 5	Address 2	#04-05 BELLEWOODS	Address 3
ddness 4		Address Type	Foreign address	Point Code
HE No.	04-05			
oes he own a Singapore egistered car?	Yes & No	Driver Vehicle No.	SLF983P	Driver Insurer Company
				Source Company
eclaration				
reattralyser or Blood Test eading?	0 mg	Any injury?	Yes S No	
odification History				
Claim DOS CO-MX New	à			
iann Type •	OD-MX •	Insured Name	MOTORWAY CAR RENTALS PTE	Insured NRJC
intact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)
nell Address	rent@motorwaysarrentals.com	Of Vehicle Number	SLESSOP	TP Vehicle Number
sim Description	SLF983P / SGQ9871X ON 16 Mar 2018	Analysis (State of State of St		
eferred Workshop Contact		Insured Liability *	Not at Fault.	Name of Preferred Warkshop
quire Firedisation	Ves •			99000
te Registered	20/03/2018 10:14	Profesered Repair Option Claim Clase Date	Preferred Workshop, Name unknown *	GIA report
port Taken By	ROSLI WAHAB			Date Received
Print AX letter	THE REAL PROPERTY.	Workshop Repairer		Total Loss but Repaired
Attachment			Save Submit	
9				
cident No.	MT/0986728	Claim No.	901	
st Doc. Received				
DE PARE MECENARA	W YES NO	Upload Date	20/03/2018 10:15	





MotorWay Car Care Centre Pte Ltd

(CO. REG NO.: 20000-0606-) 1094, Lower Delta Road, Motorway Building, Singapore 169205 Tel: (65) 6468 2200 Fax: (65) 6273 5535

Website: www.motorway.com.sg

ACCIDENT STATEMENT FORM

Please attach this form together with Driver IC, driving license and Insurance Certificate.

Date of Accident: 16, 03, JOHR Time TO ACCIDENT TO ACCIDENT TO ACCIDENT TO ACCIDENT TO ACCIDENT TO ACCIDENT TO ACCIDENT.
Time of Accident: 79001180 am (om) noon
French marting of Assidents The Time OF Lim CHU KANG LANT I NEW TIEN AS
Exact Location of Accident :
Rotell of Communiciate - Rollinsholder
Detail of Owlf Vehicle - Policyholder
Name of registered Owner : Motorway Car Rentals Pte Ltd
NRIC / FIN / Passport number : 199902927C
Address: 1094 Lower Delta Road, Motorway Building (S) 169205
H/P: <u>64682200</u>
Fax: <u>62735535</u>
Vehicle Particulars
Vehicle Registration Number: SEF 943 P
Vehicle Registration Number: 70 Y 1870 MSH
Purpose was being used at time of accident: Private use / Commercial use / Hire & reward
Action to be taken for repair your vehicle: Third party claims Own damage claims Reporting only
Insurance Company
Name of Insurance Company: Liberty Insurance / Tokio Marine Insurance
Type of coverage: Comprehensive / Third Party Fire & Theft / Third party only
Policy number : :
Details of Own Vehicle - Driver
Name of Driver:
NRIC / FIN / Passport number: P + 244 4 444
Date of Birth: 18 18 7 72
Occupation: PROJECT MARGER
Date of driving pass: 09/0/ 300/
Date of driving pass: 09/0/ 300/ Address: [0] NHSPANDS AND \$ #04-05 ((751610)
HIP: GARRADKY
Email: ICEL_NC Lotmail.com
Relationships of the Driver with the Insured : Hire & reward
TOT ON SERVER WITHOUT CONTRACT
Information Of The Accident (Please circle)
Injuries even if slight : Yes (No)
Any Material or property-damaged: Yes No
Weather conditions Clear / Raining / Drizzling
Road surface: Wet Arr
Was the accident reporting to the police : Yes / No
Was notice of intended prosecution given : Yes No If Yes, against to
Ol person.

www.motorway.com.sg



MotorWay Car Care Centre Pte Ltd (CO. REG NO.: 20000-0606-) 1094, Lower Delta Road, Motorway Building, Singapore 169205 Tel: (65) 6468 2200 Fax: (65) 6273 5535 Website: www.motorway.com.sg

Details of Other Vehicle / Property 1			III-EANNI	25-25 MARIN PROMISE 11999
Vehicle Registration Number: 590 98	71 x			
Vehicle Make and Model : K/A	- V		14110	A KINDSON
Vehicle Make and Model: KIA Name of Driver: Monane ABDI	LLAH BIN ABDU	1	P.A	4/1
NRIC / FIN / Passport number : 38//3053	Н			
Address :	W			
H/P:				
H/P : Insurance Company Name : N Tu C				
Details of Other Vehicle / Property 2				
Vehicle Registration Number :				
Vehicle Make and Model:				
Name of Driver :				
NRIC / FIN / Passport number :				
Address :				
Insurance Company Name :				
Details of Witness (if any)				
Name XII				
Address :				
H/P:				
Email:				114
Details of Injuried Person 1 (If any)				
NameNT				
Andress:				_
Injuries sustained : Injured person in which vehicle :				
Injured person in which vehicle :		7.		
Was injured conveyed to hospital by ambalance	Yes / NO			
Details of Injuried Person 2 (If any)				
Name				
Address :				
Injuries sustained :				
Injured person in which vehicle :		-		
Was injured conveyed to hospital by ambalance	Yes / NO			
I / Wo doeless the ferroris				
I / We declare the foregoing particulars are true in	n every respect			
Policyholder's signature :	Date and time :	1	1	@
(2) 310	a second			
Driver's signature:	Date and time :	1	1	@
		ALC: Y		





KEE WEE HOCK

Race CHINESE Date of birth 18-07-1972 Country of Birth SINGAPORE

+300921

NRE No. S7224444C

Date of Jeaus

14-10-2008

APT BLK 102 WOODLANDS AVENUE 5 #04-05 SINGAPORE 738011 NRIC No: \$7224444C Date: 10/02/20

Date: 10/02/2018



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Class 3

30 Aug 1995 09 Feb 2001

Class 4

Motorcycies =< 200 cc
Motor cars with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight >< 2500kg
Motor vehicles which are constructed to carry load
or passengers and the unladen weight >< 2500kg
Motor vehicles which are not constructed to carry
load or passengers and the unladen weight >< 7250kg

04 Mar 2011

Licence No:57224444C

NP 428A

Orange Force no: 6789 5000



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY	RISKS AND	COMPENSATION)	ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY	RISKS AND	COMPENSATION)	RULES, 1960
ROAD TRANSPORT ACT, 1987 (M	ALAYSIA)		

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5093336938

Cover I drivo PREMILIM

1. Index mark and Registration Number of Vehicle

: 5LF983P

Chassis Number

ZGE206029611

2. Name of Policyholder

MOTORWAY CAR RENTALS PTE LTD

3. Effective Date of Insurance

25 Oct 2017

4. Expiry Date of Insurance

24 Oct 2018

5. 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.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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

EXCESS (SECTION 1)	551,000
EXCESS (SECTION 2)	N/A
WINDSCREEN EXCESS	5\$100
ADDITIONAL EXCESS	N/A
UNNAMED DRIVER EXCESS:	PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	NO.
EXCESS WAIVER	NO NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	N/A
NAMED DRIVER (Z)	N/A
HIRE PURCHASE COMPANY	DBS BANK LTD
SUM INSURED	MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: MOTOR-WAY CREDIT PTE LTD (00000614920)

Date of Issue

10 Aug 2017 11:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Transfer Of Vehicle Ownership (Acknowledgement)

Vehicle Details

Vehicle No.:

SLF983P

Vehicle Type:

R11 - Private Hire (Self-Drive) Station Wagon/Jeep/Land Rover

Vehicle Scheme:

Normal

Vehicle Make:

TOYOTA

Vehicle Madel:

WISH 1.8X A

Chassis No.:

ZGE206029611

Engine No.:

2ZR1715922

Motor No.: Propellant:

Petrol

Passenger Capacity: 6

Trailer Chassis No.: -

Engine Capacity:

1797 cc

Power Rating:

Unladen Weight:

1350 kg

Maximum Laden Weight

1735 kg

Primary Colour:

IU Label No.:

Black

Secondary Colour:

1126541332

Output:

Maximum Power

105.0 kW (140 bhp)

First Registration

Date:

Original Registration

12 Aug 2016

12 Aug 2016

Date:

Manufacturing Year 2016

Open Market Value: \$19,085.00

PARF Eligibility:

Yes

Minimum PARF

\$9,542.00

No. of Transfer:

Benefit: Actual ARF Paid:

\$19,085.00

Owner Particulars

Owner Name:

MOTORWAY CAR RENTALS PTELTD

Owner ID Type: Owner ID:

Company 199902927C

1094

Registered Address

Private Residential (Condo Apt or House) / Shopping / Office Complexes

Type:

Registered

Block/House No.:

Registered Street

Name:

Registered Unit No.: -

Registered Building

MOTORWAY BUILDING

LOWER DELTA ROAD

Name:

Registered Postal

169205

Code:

COE No/Expiry Date: 2016030103001130Z / 11 Aug 2026

COE Bid Category: B - Car above 1600cc or 97kW (130bhp)

QP Paid:

\$38,610.00

Transaction Details

Business Transaction 20171025140812773599

Ref. No.: Business Transaction 25 Oct 2017

Business Transaction 14:08:12

Time:

Message

Vehicle has been successfully transferred to MOTORWAY CAR RENTALS PTE LTD (199902927C).

Please note that \$11.00 will be deducted from your GIRO account.