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Owner / Driver: (	Tel:
Policy No:(, ) Period; (	· ' ) Cover Type: ( )
Confirmed by 1'( Insured/Onvertiability: ( %) [Note But Stand	Dales Plantes )
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	1 HO( )   Towing Co:(
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2) QC Cheek/ Port Kepatr Inspection (	
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#### 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 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 aforesaid.

ACCIDENT STATEMENT
12/06/2018 16:04
11/06/2018 15:40
10 KAKI BUKIT RD 2 ( FIRST EAST CENTRE S417868 )
SINGAPORE
DETAILS OF OWN VEHICLE
SJU2015R
AUTOBAHN RENT A CAR PTE. LTD.
201607970Z
SUPPORT@TRIBECAR.COM
(LOCAL) +65-92252893
OFFICE-92252893
TOYOTA
WISH 2.0 AUTO
WORK
NO
THIRD PARTY
PRIVATE HIRE
NTUC INCOME INSURANCE CO-OPERATIVE LTD
COMPREHENSIVE
NO
5079864471-02

SUPPORT@TRIBECAR.COM

			-
 m	rs.	/e	м

Cover Note Number

EMail Address

Name of Driver	TERENCE LUI DUN KAI
NRIC No	S9323726I
Date Of Birth	06/07/1993
Occupation	OUTDOOR
Date Of Driving Pass	02/07/2012
Driving Experience	5 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92252893
Fax Number	
Contact Number	OTHERS-92252893

BLK 408B FERNVALE ROAD Address

#14-18

Postcode 792408

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - RENTAL

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

### General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

NO

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

#### Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

TAXI

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHB5946H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver HO WEI SENG NRIC/Passport Number S1648966B

Contact Number

Address

Postcode

Insurance Company Name

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.
- 2. 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.
- 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.
- 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.
- 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.
- 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:
  - 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.
- (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:
  - 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.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 11/06/2018

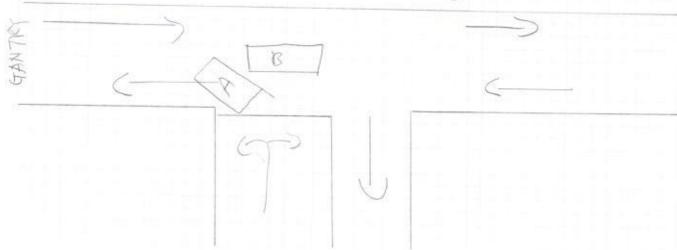
17:00

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

SKETCH PLAN

A-SJUZOISR B-SHB5946H



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11th Tune 2018, I was driving vehicle 4 (STU 2015R) exiting towards the gentry
as seen in the diagram. I have confirmed that there is no vehicle incoming to my direction
and proceed to make a left turn. Suddenly, I saw vehicle B (SHB 5946H) coming at
high speed and hit my vehicle.
925

## DECLARATION

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

Policyholden Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time: 11/06/2018 17:00 Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Certif	ficate of Insurance
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA) Cover: drivo CLASSIC  1. Index mark and Registration Number of Vehicle Certificate Number: 507986451-02 Cover: drivo CLASSIC  1. Index mark and Registration Number of Vehicle Cartificate Number: 507986451-02 Cover: drivo CLASSIC  1. Index mark and Registration Number of Vehicle Cartificate Number: 507986451-02 Cover: drivo CLASSIC  1. Index mark and Registration Number of Vehicle Cartificate Number: 507986451-02 Cover: drivo CLASSIC Cover: dr	
Certificate Number: 5079864471-02	
<ol> <li>Index mark and Registration Number of Vehicle Chassis Number</li> <li>Name of Policyholder</li> <li>Effective Date of Insurance</li> <li>Expiry Date of Insurance</li> <li>Persons or Classes of Persons entitled to drive#         <ul> <li>(a) The Policyholder.</li> <li>(b) Any other person who is driving on the Policyl Provided that the person driving is permitted in the Motor Vehicle or has been so permitted an enactment or regulation in that behalf from driving in the person driving is permitted and person driving in the person driving is permitted and person driving in the person driving is permitted and person driving in the person driving is permitted and person driving in the person driving in the person driving is permitted and person driving in the person driving is permitted and person driving in the person d</li></ul></li></ol>	: SJU2015R : JTDGJ20WX05001400 : AUTOBAHN RENT A CAR PTE. LTD. : 26 Apr 2018 : 25 Apr 2019  holder's order or with his/her permission. in accordance with the licensing or other laws or regulations to drive and is not disqualified by order of a Court of Law or by reason of any riving the Motor Vehicle.
<ul> <li>(a) Use for racing, pace-making, reliability trial or s</li> <li>(b) Use for the carriage of goods (other than samp</li> <li>(c) Use for any purpose in connection with the Mo</li> <li># Limitations rendered inoperative by Section 8 s</li> </ul>	les) in connection with any trade or business, tor Trade.
EXCESS (SECTION 1)	: \$\$3.500
ASSET V 시간에 하시되어 점심하다 경기에 가지 않는 후 보는 모든	(SEC 9079) AND SO TO
UNNAMED DRIVER EXCESS	
REPAIR AT OWNER'S PREFERRED WORKSHOP	
NCD PROTECTION	
EXCESS WAIVER	
	10.00
SUM INSURED	
Agency : HAMILTON AUTOHUB PTE, LTD. (0	ate relates is issued in accordance with the provisions of the Motor oter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
THE CONTRACTOR OF THE CONTRACT	Im
Authorised Officer	Chief Executive

# ACCIDENT STATEMENT

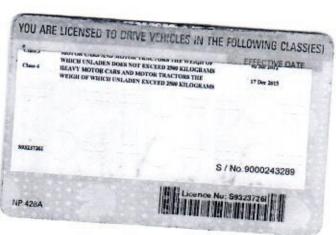
+ ne/D	DENT DATE: (11,6,2018) (DD/MM/7YYY), TIME: (5.40) (HH:MM)	
LOCAT	MON: 10 Kaki bukit Rd 2 (First East Contre (5417 A)	0
	80	
1.	DETAILS OF VEHICLE SJU2015 R	
	a) VEHICLE NUMBER.	
	DINSURANCE COMPANY:	
	C)POLICY NUMBER:	
	AIPOLICY TYPE: (COMPREHENSIVE / THIRD FARTY / THIRD	
	e)MAKE & MODEL: (MAN / LORRY / MOTORCYCLE / OTHERS)	
	-IVEUICIE CAIPLIUKI, IF NIVOLE / O	
	THE PER YOUR COWN INJURATION TO THE PER YOUR PROPERTY OF THE PER YOUR P	
	IF NO, PLEASE STATE (THIRD PARTY CLAIM) THE	
2.	INSURED / POLICY HOLDER (MALE / FEMALE)	
	AINAME:	
	b)NRIC/FIN/PASSFORT:	
	c) ADDRESS:	
990	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	
the of passenge		
The second secon	(a)NAME: 92252895	
Conducting driver	bjnric/fin/Passport:CONTACT	
	CJADDRESS:	
	THIRD OF BIRTH! / /I(DD/MM/YYYY)	
20	ODCUPATION: (INDOOR / OUTDOOR)	i
	DATE OF DRIVING PASS - THE INSURED'S COMPANY? (YES INO) HITCELL	
4	MAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) HITCELL .	
5	THE CONDITION: ICLEAR / RAINING / OTTER	
	BIROAD SURFACE: (DRY / WET / OTHERS	
6	LOCADORIED TO POLICE LIES (INVI)	
1	IF YES, PLEASE STATE WHICH POLICE STATION:	
g	3. THIRD PARTY VEHICLE SHB5946 HMODEL:	
L is all to real the	a) VEHICLE NUMBER: STEET CENG	
1.	DRIVER'S NAME: TO W.	
N	P. THIRD PARTY VEHICLEMODEL:	
J. Jan . 1 . 1. (2.11)	d) VEHICLE NUMBER:MODEL: e) DRIVER'S NAME: CONTACT:	
to the state of the	e) DRIVER'S NAME:CONTACT:CONTACT:	
a territorial and		
********		
,		
1	Ding: 1 -	

Support @tribecar.com









<b>eBao</b> Tech									Gene	ralClaim
Hello, NAC_PAYA_UBI_80	00601					,	Change La	nguage	· Change Passwor	d , Log Out
My Desktop	Poli	cy Query						2 5	(F)	
Notice of Loss	Policy N	No.				Date of Ac	cident	11/0	6/2018 15:40	
	Vehicle	No.(For Motor)	SJU2015R					1000	WES 10 10.40	
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
		5079864471- 02	AUTOBAHN RENT A CAR PTE, LTD.	201607970Z	GFT	drivo CLASSIC		SJU2015		
					1	Continue				

▽ Poli	icy Information				
Policy No.	5079864471-02	Policyholder Name	AUTOBAHN RENT A CAR PTE. LT	Policyholder NRIC	201607970Z
Address	6001 BEACH ROAD #08-00	GOLDEN MILE TO	WER SINGAPORE 199589		
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	04/04/2018	Effective Date	26/04/2018 00:00	Expiry Date	25/04/2019 23:59
Third Party Excess	3000.00	Own damage Excess	3500.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	13815.20		
Outside Singapore OD Excess	3500.00	Outside Singapore TP Excess	3000.00		
Agent	HAMILTON AUTOHUB PTE.	LTD, Agent Tel,	64751946	GST Flag	Y
Co- insurance Flag Open Policy Info	No				
Certificate Info					
Policyh	nolder Mailing Address				
Address 1	6001 BEACH ROAD	Address 2	#08-06 GOLDEN MILE TOWER	Address 3	SINGAPORE 199589
Address 4		Address Type	Singapore address	Post Code	199589
Jnit No.	LOT38	Related Policy Number	5079864471-02		
<b>▶</b> Insure	d Object: SJU2015R				
▼ Endors	ements			11	
Sequenc	e Date of Endorsement	Endorsement Type	Endorsement Endorse	ment Status	Endorsement Content
					Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy:

▼ Endorsem	ents				
Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	26/04/2018 00:00	Basic Information Endorsement	000001286794596	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SKD8673D 26-04-2018 \$1,807.36 In view of this amendment, a refund of \$1,807.36 (inclusive of GST) will be adjusted against the outstanding premium.
2	18/05/2018 00:00	Basic Information Endorsement	000001286820188	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SLC514B 18-05-2018 \$1,747.29 2. SLC6456X 18-05-2018 \$1,747.29 3. SLC693S 18-05-2018 \$1,747.29 4. SLD363P 18-05-2018 \$1,747.29 In view of this amendment, an additional premium of \$6,989.15

018%2016:00&productLine=2&insuredId=20154096&;

### **Claim Handling**

Claim Handling					
The premium on this policy h Accident MT/0998475	as not been collected.				
Policy No.	**************************************	W25280000	econocialis		
Policyholder Name	5079864471-02 AUTOBAHN RENT A CAR PTE, LTD,	Vehicle No.	SJU2015R	GST Registration No.	
Product Code		120 S20		Policyholder NRIC	20
Contact No.(Mobile)	FLEET INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Email Address	92252893	Contact No.(Office)	0	Contact No.(Home)	0
KFK	4	Special Remark		eCode	P
NCD Protection	• No Yes	TCA	No Yes	eCode Reason	
Accident Details	No ?	NCD Entitlement(%)	0	Private Hire	Ye
	- SEPTAMPS CLAST OPPOSITION C				
Report Date	13/06/2018 09:45	Accident Report Within 24 hrs	Yes	Accident Type	s
Date of Accident	11/06/2018	Time of Accident hh:mm	15:40	Country of Accident	S
Reporting Centre		Orange Force		ICM No.	
Accident Location	10 KAKI BUKIT RD 2 ( FIRST EAST CEN	TRE S417868 )			
♥ Benefits					
♥ Excess					
Own damage Excess	3,500.00	Additional Excess	0	Windscreen Excess	10
Innamed Driver Excess		Outside Singapore OD Excess	3,500.00		
hird Party Excess	3,000.00	Outside Singapore TP Excess	3,000.00		
GST Registered Inform	nation				
ST Registered	No		GST Registration Date		
ST Registration No.			GST Status Verified	Yes	
fodification History					
	ddress				
ddress 1	6001 BEACH ROAD	Address 2	#08-06 GOLDEN MILE TOWER	Address 3	
ddress 4		Address Type	Singapore address	Post Code	51
nit No.	LOT3B	Related Policy Number	5079864471-02	7 031 6006	19
OI Driver Info					
river Name	Unnamed Driver	Driver Type	Unnamed Driver		
nnamed driver Name	TERENCE LUI DUN KAI	Driver NRIC	593237261	Driver DOB	06
egister Date of Driver License	02/07/2012	Driver Age	24	Driving Experience	
ontact No.(Mobile)	92252893	Contact No.(Office)	0	Contact No.(Home)	5
ddress 1	BLK 408B	Address 2	FERNVALE ROAD	Address 3	0
ddress 4		Address Type	Singapore address	Post Code	
nit No.	#14-18			rost code	792
oes he own a Singapore egistered car?	Yes + No	Driver Vehicle No.		223000000000000000000000000000000000000	
				Driver Insurer Company	
eclaration					
reathalyser or Blood Test eading?	0 mg	Any injury?			
eadingr	13000	Any injury?	Yes a No		
odification History					
Claim 001 OD-MX Nev	.h				
im Type *	OD-MX •	Insured Name	AUTOBAHN RENT A CAR PTE, LT		protess
ntact No.(Mobile)	88380101	Contact No.(Home)	CONTRACT A CAR PIE, LI	Insured NRIC	201
ail Address	INSURANCEHAMILTONAUTOHUB	***************************************	511201 SP	Contact No.(Office)	647
im Description	SJU2015R / SHB5946H ON 11 Jun 2018	TATION CANDON	SJU2015R	TP Vehicle Number	SHE
ferred Workshop Contact	7.	Insured County a		Name of Preferred Workshop	
quire Finalisation	[Van	Insured Liability •	Partially at Fault    T		
	Yes •	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	Red
te Registered port Taken By	13/06/2018 09:53 KRISHNASAMY	Claim Close Date Workshop Repairer		Date Received	13/0

Save Submit

Attachment

Print AK letter

Accident No.

MT/0998475

Claim No.

Last Doc. Received Yes No Upload Date 13/06/2018 09:50 Path \* Category • Confidential Urgency \* Choose File No file chosen Clear Please Select ▼ NO Normal Choose File No file chosen Clear Please Select NO Normal Choose File No file chosen Please Select Clear ٠ Normal Choose File No file chosen Clear Please Select • NO Normal Choose File No file chosen Clear Please Select NO Normal Choose File No file chosen Clear Please Select \* NO Normal Message Read Attachment List Attachment Uploaded By/Date Category Urgency Descrip A CENT NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:53 NRIC/ Driving License Normal NRIC/ Driving Lice NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 SAS Normal Jun 2018 09:52 SAS 2018 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Jun 2018 09:51 Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Photos Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Normal Jun 2018 09:51 Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Normal Jun 2018 09:51 Photos 201 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Photos Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Photos Normal Photos 20 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Jun 2018 09:51 Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Photos Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:51 Photos Normal Photos 20: NAC\_PAYA\_UB1\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Normal Jun 2018 09:51 Photos 20: NAC\_PAYA\_UBI\_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Jun 2018 09:51 Normal Photos 201 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:50 Photos Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Jun 2018 09:50 Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Photos Jun 2018 09:50 Normal Photos 20 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13. Photos Jun 2018 09:50 Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:50 Photos Normal Photos 20: NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Jun 2018 09:50

Photos

Normal

Photos 20: