

Date In: 28 112 119 13:04	Job description	Date & Time Completed	Done by
Ref No: WAI AIG 180 23253 / 64	SAS e-filing		
Veh No: SME 6185 E	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 26 112 119 13:10	I-Motor Claim Form		
<input checked="" type="checkbox"/> TP - Reporting Only	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: Veh No: SKJ 6802E. INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note-Est Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

Claimant's Particulars: Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments: Ref. 1: 2/3:	Invoice Preparation Checklist 1) AR: Accident Reporting (\$30); 2) DA: Damage Assessment (\$100); INC (\$80) 3) TP: Towing Fee \$40/\$45 4) FT: Follow-Through Survey \$120 5) PT: Follow-Through Survey (Resurvey) \$30 For claiming against INC Only (wef 10 Jan 2005) 6) TR: Re-inspection \$75 7) NI: Idao DA + SMRT Survey \$160 8) NTUC Additional Services:- QJ: *N5: Courtesy Car / Tpt Allowance \$3 *N6: Repair Co-ordination \$10 *N7: Post Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$3 TP (N11): TP (5-in INC) against INC \$20 9) N12: Idao Mobile 30 Invoice dated Fee Charged Invoice dated Fee Charged	Amt (\$) 30.00	Add'l Bill 30.00
--	---	-------------------	---------------------

WAI 1808569

Stamp/Signature

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 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. 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 Report	28/12/2018 13:04
Date Of Accident	26/12/2018 13:10
Exact Location Of Accident	DAIRY FARM RD TWDS BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME6185E
Insured/Policyholder	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	201735055D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94232724
Alternative Phone No	OFFICE-94232724

Vehicle Particulars

Manufacturer	KIA
Model	CARENS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994322
Cover Note Number	-

Driver

Name of Driver	RAJENDRAN NANDAKUMAR
NRIC No	S8580599A
Date Of Birth	11/12/1985
Occupation	OUTDOOR
Date Of Driving Pass	06/11/2017
Driving Experience	1 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94232724
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 19 TECK WHYE LANE #12-49
Postcode	680019
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	-
	-
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 (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : UNKNOWN GENDER: : MALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ6802E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

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 Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful 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.
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.
- (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.



Policyholder's Signature
Date & Time:

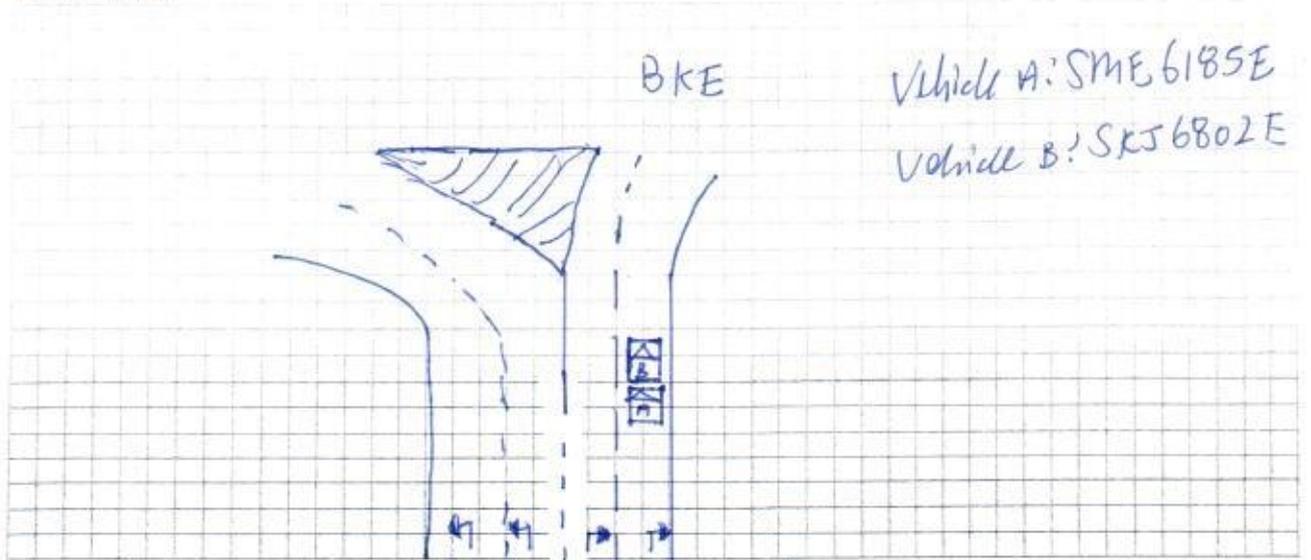
Driver's Signature
(If driver is not the policyholder)
Date & Time:

20 DEC 2018

LOAC KAKI BUKIT (P) LTD
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416699 Fax: 67492000
Email: vackit@singnet.com.sg

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



Vehicle A: SME 6185E
 Vehicle B: SKJ 6802E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Dairy Farm Rd

Refer to Police Report

DECLARATION

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



[Signature]

Policyholder's Signature
 Date & Time:

[Signature]

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 20 DEC 2018

EDAC KARI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Singapore 415933
 Tel: 6741666 Fax: 67492305
 Email: vac@singnet.sg

[Signature]

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Date of Accident : 26/12/18 Accident Time: 13:10 hrs (24-HR-Format)

Accident Place : Dairy Farm Rd tuks BKE

Vehicle No. (Car Plate No.) : SME 6185E Make/Model: KIA CARENS

Insurance Company : ~~NTB~~ AIG Policy No.: 509689875T

Owner or Company Name / IC No. : BIS MOTORING PTE LTD (2017350553)

Owner or Company Contact No. : - Owner's Hp - Company Tel -

DRIVER'S Name / IC No. : Rajendran Nandakumar (5858 0599A)

DRIVER'S Date Of Birth : 11/12/1985 DRIVER'S License Pass Date 20 Oct 2012

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Hirer

DRIVER'S Address : Blk 19 Teck Whye Lane #12-49 (S) 680019

DRIVER'S Contact No / Alt No. : 1) 9423 2724 2) -

DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address : -

Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): 03

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): -

Other Party Driver's Particular (if any)

Vehicle No: <u>SKJ 6802E (B)</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**

- ① male - UNKNOWN
- ② Female - UNKNOWN



**SINGAPORE
POLICE FORCE**



T/20181227/7006

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No: T/20181227/7006

CONTINUATION OF REPORT

Driver			
Name	RAJENDRAN NANDAKUMAR	ID No.	S8580599A
Related Vehicle	SME6185E (Car)	Contact No.	94232724
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I was travelling in the car(SME6185E) along Dairy Farm road,noticed the car(SKJ6802E) stopped at traffic light and applied brake,contacted head to rear.



**SINGAPORE
POLICE FORCE**



T/20181227/7006

3 of 3

Report No. T/20181227/7006

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
YUS MASTARI I KHAZALI
Contact No.: 65476214

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
27/12/2018 16:01

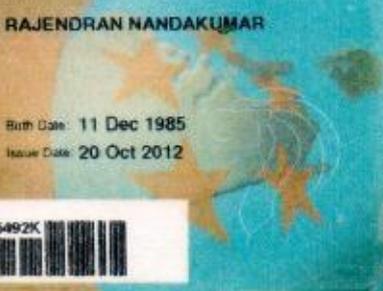
Classification Of Case:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8580599A**
 Name **RAJENDRAN NANDAKUMAR**

Birth Date: 11 Dec 1985
 Issue Date: 20 Oct 2012

002116492K

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. **S8580599A**

Name **RAJENDRAN NANDAKUMAR**
இரா நந்தகுமார்

Race **INDIAN**

Date of birth **11-12-1985** Sex **M**

Country/Place of birth **INDIA**

S8580599A




Land Transport Authority

VOCATIONAL LICENCE

Licence No: **S8580599A**
 Name: **RAJENDRAN NANDAKUMAR**

Card Issue Date: **06/11/2017**

Please visit www.lta.gov.sg to check the status of this vocational licence



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

Class	Description	EFFECTIVE DATE
Class 3	Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	20 Oct 2012

NP 428A

Licence No: S8580599A



5786867

NRIC No. S8580599A

Date of issue **18-08-2017**

APT BLK 19 TECK WHYE LANE #12-49 SINGAPORE 680019

NRIC No: **S8580599A** Date: **28/11/2018**




This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	06/11/2017



**CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1968

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

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

M.Z.400

		(The below excess is subject to GST)	
COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	S\$1500.00 (Sect I & Sect II)
CERTIFICATE NO.	SME6185E	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999994322		
		SUM INSURED	Market Value
		INSURING WITH COE/PARF	YES
1) VEHICLE REGISTRATION NO.		SME6185E	
2) NAME OF INSURED		BIS MOTORING PTE LTD	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		26 December 2018	
4) DATE OF EXPIRY OF INSURANCE		25 December 2019	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
Any person who is driving on the Insured's order or with their permission. Authorised driver must be between age 23 to 65 with at least 2 years driving experience. Accident repair can be carried out at Munich Auto Care in the condition that all repairs have to be surveyed, appointed by AIG surveyors before proceeding with repair.			
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) LIMITATION AS TO USE*			
1) Use for social, domestic, pleasure purposes and business purposes of Insured 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.			
	LOSS OF USE	Not Included	
	HIRE PURCHASE COMPANY	HONG LEONG FINANCE	
*Limitations rendered inoperative by Section 8 of the 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.			

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).

Issued in Singapore 19 Dec 2018

AIG Asia Pacific Insurance Pte. Ltd.

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-09 Trivex
Singapore 369977



AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL

KHILSON
GRAB OWNERS SUBMIT

RENTAL AGREEMENT

(This shall form part of the Rental Documents referred in the terms and conditions)

The Rental Agreement is made on 25 (Day) 10 (Month) 2018 (Year)

Between

1. BIS Motoring Pte. Ltd. (UEN No. 201735055D), a company incorporated in Singapore, registered address at 20 Bendemeer Road #03-13/14 BS Bendemeer Centre Singapore 339914 (herein referred to as "the Owner") and
2. Rajendran Nanda Kumar (NRIC No. / UEN No. S8580599A), residing at B1E J24 ANG MO KIO AVE 5 #12-4150 SINGAPORE S60524 the person and/or company signing the Lease and Own Documents (herein referred to as "the Hirer") whose particulars are recorded in the Rental Documents and
3. GIS Motoring Pte. Ltd. (UEN No. 201803437N), a company incorporated in Singapore, registered address at 60 Jalan Lam Huat #05-13 Carros Centre 737869 (herein referred to as "GIS")

(collectively, known as "parties")

Where as

1. BIS Motoring Pte. Ltd. is a leasing company incorporated in Singapore.
2. BIS Motoring Pte. Ltd. has engaged GIS Motoring Pte Ltd to manage the Vehicle No. SME618JE, details stated in Vehicle Details below (the "Vehicle").
3. GIS Motoring Pte Ltd is one of the appointed authorised vehicles management company ("GIS") by BIS Motoring Pte. Ltd. GIS would act on behalf of BIS Motoring Pte Ltd to manage all matters relating to the Vehicle. The Hirer shall contact GIS directly on all matters relating to the Vehicle.
4. The Hirer shall acknowledge and fully understand the Terms and Conditions which form part of the Rental Documents throughout the term of the lease period ("Lease Period").
5. All parties accept the terms and conditions set out below by signing this Rental Agreement.

It is agreed between the parties as below :

A. Vehicle Details ("Vehicle")

Vehicle No. : SME618JE
 Vehicle Make / Model : KIA CARENS EX 1.7
 Vehicle Colour : BLACK

B. Lease Period

Date of Handover 25/10/18, 12.15PM
 (Commencement of the Lease Period) : 26/10/18
 Period of the Lease : 1 year year(s)
 Option to Renew : - year(s)



Hirer's signature: [Signature]