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 <u>truthful and accurate</u> 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.
- 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	07/02/2019 18:36
Date Of Accident	06/02/2019 19:20
Exact Location Of Accident	KRANJI WAY TOWARDS KRANJI LOOP B/F THE KRANJI DAM
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMH428D
Insured/Policyholder	
Name Of Registered Owner	KARZ-TA LEASING
Co Reg No	53318368E
Email Address	KARZTALEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94508445
Alternative Phone No	OFFICE-81116544
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ISIS
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 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	THIRD PARTY
Fleet Policy	NO
Policy Number	5083195710-02
Cover Note Number	
Driver	

Name of Driver TAN WAH CHOON NRIC No S1717782F

 Date Of Birth
 11/07/1965

 Occupation
 INDOOR

 Date Of Driving Pass
 25/03/1983

Driving Experience 35 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94508445

Fax Number

Contact Number OTHERS-81116544

EMail Address FRANCIS65TAN@GMAIL.COM

BLK 174A EDGEDALE PLAINS Address

#08-153

Postcode 821174

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

SIDE SWIPE Type Of Accident 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? YES

Was any injured conveyed to hospital by

ambulance?

YES

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

5

Number of Passengers (Including Driver)

Passenger 1

NAME: : SOH POH SUAN

GENDER: : FEMALE

Passenger 2 NAME: : CHUA PEI SHAN

> GENDER: : FEMALE

Passenger 3 NAME: : TAN JIALE GERALD

> GENDER: : MALE

Passenger 4 : TAN YONGJIE CLEFF NAME:

> GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TIONG BAHRU NEIGHBOURHOOD POLICE POST

ROAD: BLK 128 KIM TIAN ROAD #01-123/ 125, POSTCODE: 160128, Police Station Address

COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-2739999 - FAX NO: 62785651

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190207/2065 AND T/20190208/2052

Attachment(s)

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

Vehicle Registration Number XD6767B

Vehicle Make/Model/Colour MITSUBISHI FV51JJD4RDEA

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN WAH CHOON

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SMH428D
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

oulance?

Address Postcode

DETAILS OF INJURED PERSON 2

Name SOH POH SUAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SMH428D
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

YES

Address Postcode

DETAILS OF INJURED PERSON 3

Name TAN JIALE GERALD

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SMH428D
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 4

Name CHUA PEI SHAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SMH428D
Were seat belts worn? YES

Word dock bollo World.

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

DETAILS OF INJURED PERSON 5

TAN YONGJIE CLEFF Name

Approximate Age

Injuries Sustain

Injured person in which vehicle? SMH428D

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode

SLIGHT INJURY

YES

NO

Accident Sketch Plan

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.
- 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:
 - (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: 07/02/2019

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Accident Sketch Plan

KETCH PLAN	KRANTI WAY ZOWARDS	s keondi loop
	TRAFIC !	L4H7
	and-f	>
-		←,
	0	A) SMH 4280
		B) XD 6767B
ESCRIBE CIRCU	MSTANCES OF THE ACCIDENT	10/1001012
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		Ch Stubol
	0	Tick fr
	Λ- '	12005
	(Ex	
	geret 10	390208 208
	S	01901
1		1 0
/We declare the	regries particulars are true in every respect.	/ m/m/m18
Policyholder's Sign	Driver's Signature	Reporting Centre Personnel's Signature/ der) Name:





1 of 3

Report No. T/20190207/2065

Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128

Tel No: 1800-2739999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/02/2019 13:30			Vide Report No.: L/20190206/0142	Station Diary No.		
Informa	nt's Particu	lars	A STATE OF THE PARTY OF THE PAR			
Name of	Informant: H CHOON		Address: APT BLK 174A EDGEDALE F 821174	PLAINS #08-153 SINGAPORE		
ID Type NRIC NO	/ ID No.: D / S171778	32F	Contact No.: Home/Office: Mobile: 81116544			
National	ity: ORE CITIZ	EN	Email:			
Sex: Male	Age: 53	Date of Birth: 11/07/1965	Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: FARM OWNER			Driving Licence Information: Class: 2B,3	Date of Expiry:		

the state of the s	mation of the Accident	1544	Detectime of	Type of Location	
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/02/2019 19:20	Straight Road	
Location: Along Road 1 KRANJI WAY		anji Loop before th	e Kranji Dam.	oad Speed Limit:	
Weather: Ro		Road Surface:	2000		
4.0000000000000000000000000000000000000		Dry) Km/h	
Clear Traffic Flow: Two Way		Traffic Control: Not Controlled		raffic Volume: ght	

Details of Volume Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC8719Y	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR	Blue		0
SMH428D	Car	TOYOTA	ISIS 1.8LX A	Black	Totally Damaged	4
XD6767B	Lorry	MITSUBISHI	FV51JJD4R DEA	Orange	Slightly Damaged	0





2 of 3

Report No. T/20190207/2065

Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128

Tel No: 1800-2739999

CONTINUATION OF REPORT

Details of Perso	n Involved	SHIP TO SHIP	HARLES THE	(#0F9683)	STATE OF THE PARTY.	THE RESIDENCE PARTY
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of P	edestriar	Cross	ing: NA
Driver					SING	
Name	TAN WAH CHOON			ID No		S1717782F
Related Vehicle	NIL			Conta	ct No.	81116544
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g ce &	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Dis	charge	NIL	
	ted Medical Leave	NIL	Degree o	of Injury	NIL	

Brief Details

On 6th January 2019 at about 7.20pm, I was driving my car (SMH428D) on Kranji Way, a 2-way road, towards Kraji Loop before the Kranji Dam bridge when I observed a heavy Tipper Truck (XD6767B) which was travelling on the opposite direction of the 2-way road suddenly cut into our lane about 5 meters in front of us and mounted the curb on our left. Due to this, I slowed my car to about 20km/h and attempted to avoid the collision with the truck by evading to the right. However, the said truck came right for us and hit the left -front door of my car and dragged our car into the opposite lane causing it to mount the curb on the right. The truck reversed and moved forward to hit the left-rear door of my car again before fleeing the accident scene without stopping. My car sustained total damage where its front and left side was seriously smashed, and the engine and all four tires were totally damaged. The windscreen and left front and rear windows of my car were smashed and the entire front bumper fell off. They are about 20 to 30 Bangladesh foreign workers at the area who witnessed this accident. Two of them (Sarker: 86536087 and Shahin: 84176280) took photographs of the entire accident scene and the truck fleeing. There was a car (Florence: 84997609) behind the said lorry installed with a Dashboard Camera which recorded the footages of the entire accident. The photographs and video recordings were obtained from the both of them. An ambulance arrived about 20 minutes later while another arrived soon after. The ambulances attended to the injuries sustained by myself and 4 passengers in the car before the 4 us were conveyed to Khoo Teck Puat Hospital for medical treatment. My son, Cleff, who was one of my passengers sustained the least injury stayed behind to wait for the Traffic Police to arrive. The skid marks on the road created by the truck and my car were obtained by us and the Traffic Police as well. I would like to mention that a blue Comfort taxi (SHC8719Y) behind us might have captured the video footages of the entire accident with its Dashboard Camera but did not stop to assist us. The photographs and 3 Dashboard Camera footages were given to the Traffic Police as well. There were cameras by the side of the road which might have recorded the footages of the said truck, our car and the accident.





3 of 3 Report No. T/20190207/2065

Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128 Tel No: 1800-2739999

CONTINUATION OF REPORT

Sketch	Plan
OKULUII	

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Informant:	
Date/Time: 07/02/2019 13:30	
Classification Of Case:	
	Date/Time: 07/02/2019 13:30





Police Station Of Origin: Tiong Bahru NPP

128 Kim Tian Road #01-123 SINGAPORE

160128

Tel No: 1800-2739999

Report No. T/20190208/2052

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Station Diary No.: Vide Report No .: 08/02/2019 13:07 11 Informant's Particulars Name of Informant: Address: TAN WAH CHOON APT BLK 174A EDGEDALE PLAINS #08-153 SINGAPORE 821174 ID Type / ID No .: Contact No .: NRIC NO / S1717782F Home/Office: Mobile: 81116544 Nationality: Email: SINGAPORE CITIZEN Date of Birth: Sex: Age: Type of Informant: Male 53 11/07/1965 Driver Race: Language: Institution / School Name: Chinese English Occupation: Driving Licence Information: FARM OWNER Class: 2B,3 Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/02/2019 19:20	Type of Location Straight Road
Location: Along Road 1 KRANJI WAY Kranji Way To		ore Kranii Dam		
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Two Way	la ^b	Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collis	ion: ving Vehicles - Head To			Anyone conveyed by

Details of V	ehicle Invo	lved	ELEMENT OF		MALE AND ADDRESS OF THE PARTY O	AV DE SEE SEE SERVE
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC8719Y	Car	HYUNDAI	140	Blue	No Damage	0
SMH428D	Car	TOYOTA	ISIS 1.8	Black	Totally Damaged	4
XD6767B	Lorry			Orange	Slightly Damaged	0





Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128

2 of 5 Report No. T/20190208/2052

Tel No: 1800-2739999

CONTINUATION OF REPORT

Any Pedestria	n Involved: No			Wald.	BELLE	INDED.	
No. of Pedestr	ians Injured: NIL						四百年 10年 11年 共
Passenger	ians injured: NIL		Us	e of P	edest	rian Cre	ossing: NA
Name	011114	建制业企业		DESCRIPTION OF THE PERSON NAMED IN	10000	Tall Cit	ossing: NA
- Turing	CHUA PEI SHA	N			ID	NIO	
Dolote d Maria					ID No.		S9108295J
Related Vehicle	e SMH428D (Car)				+		
11					Cor	ntact No	91156174
Hospital/Clinic KHOO TECK PUAT HOSPITAL			TAI				
			IML		Cla	ss of	Class: NIL
					Driv	ing	Date of Expiry: NIL
					Lice	nce &	
Date Treatment	06/02/2019		-	-	Exp	iry Date	
No. of Days gra	nted Medical Leave	03	Dat	te Disc	harge	07/0	2/2019
Passenger		03	Deg	gree of	Injun	Sligi	nt
Name	SOH POH SUAN		LIB THERE	No. of Lot	42	STERNING TO STATE OF	THE WORLD STREET
	- CIT OTT GOAN	OIT GOAIN			ID No.		S7139626F
Related Vehicle	SMH428D (Car)	SWH420D (O.					011000201
	OWN 1420D (Car)				Cont	act No.	90089798
Hospital/Clinic	KIIOO				140.		90009/98
Pillan Cill lic	KHOO TECK PUA	AT HOSPITA	AL		Class of Driving Licence & Expiry Date		Class AW
				- 1			Class: NIL
							Date of Expiry: NIL
Date Treatment	06/02/2010			- 1			
Vo. of Days gran	06/02/2019 ted Medical Leave		Date	Disch	arne	06/02	(2010
Oriver	ted Medical Leave	03	Degr	ee of I	niury	Slight	72019
Name	MINISTER OF THE PARTY OF THE PA	Philipping and	G-101 (Carl	Miles and	- njury	Silgni	No. of the last of
varing	TAN WAH CHOON	1			DAL	Mile Jan	BUILDING BUILDING
Related Vehicle					ID No		S1717782F
telated Vehicle	SMH428D (Car)				0		
January 1100 11					onta	ct No.	81116544
lospital/Clinic	KHOO TECK PUAT	HOSPITAL			21		
		- Ji IIA		15	Class	1000	Class: 2B,3
- 1				1	Driving	1	Date of Expiry: NIL
-A- T				1	icenc	e or	100,000,000,000
ate Treatment	06/02/2019		Det	1	xpiry		
 of Days grante 	d Medical Leave	02	Date	Discha e of In	rge	06/02/2	2019





Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128 3 of 5 Report No. T/20190208/2052

Tel No: 1800-2739999

CONTINUATION OF REPORT

Passenger	MANUAL STREET,	Day Day	SEED PRODUCTION	125 13	1,1990,1	LES BOOK OF
Name	TAN JIALE GERALI	D		ID No.		T0238900I
Related Vehicle	SMH428D (Car)			Conta	ct No.	81116544
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	06/02/2019		Date Disc	_	Annual State of the Control	2/2019
No. of Days gran	ted Medical Leave	03	Degree of			Control of the Contro
Passenger	A THE REAL PROPERTY.	EXAMPLE 21	MENLANDER DE			Control of the Contro
Name	TAN YONGJIE CLE	FF		ID No		S8850132B
Related Vehicle	SMH428D (Car)		-	Contact No.		82011726
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			Class Drivin Licens Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	06/02/2019		Date Disc			/2019
No. of Days gran	ted Medical Leave	03	Degree of			

Brief Details.

On 6th February 2019 at about 7.20pm, I was driving my car (SMH428D) on Kranji Way, a 2-way road, towards Kraji Loop before the Kranji Dam bridge when I observed a heavy Tipper Truck (XD6767B) which was travelling on the opposite direction of the 2-way road suddenly cut into our lane about 5 meters in front of us and mounted the curb on our left. Due to this, I slowed my car to about 20km/h and attempted to avoid the collision with the truck by evading to the right. However, the said truck came right for us and hit the left -front door of my car and dragged our car into the opposite lane causing it to mount the curb on the right. The truck reversed and moved forward to hit the left-rear door of my car again before fleeing the accident scene without stopping. My car sustained total damage where its front and left side was seriously smashed, and the engine and all four tires were totally damaged. The windscreen and left front and rear windows of my car were smashed and the entire front bumper fell off. They are about 20 to 30 Bangladesh foreign workers at the area who witnessed this accident. Two of them (Sarker: 86536087 and Shahin: 84176280) took photographs of the entire accident scene and the truck fleeing. There was a car (Florence: 84997609) behind the said lorry installed with a Dashboard Camera which recorded the footages of the entire accident. The photographs and video recordings were obtained from the both of them. An ambulance arrived about 20 minutes later while another arrived soon after. The ambulances attended to the injuries sustained by myself and 4 passengers in the car before the 4 us were conveyed to Khoo Teck Puat Hospital for medical treatment. My son, Cleff, who was one of my passengers sustained the least injury stayed behind to wait for the Traffic Police to arrive. The skid marks on the road created by the truck and my car were obtained by us and the Traffic Police as well. I would like to mention that a blue Comfort taxi (SHC8719Y) behind us might have captured the video footages of the entire accident with its Dashboard Camera but did not stop to assist us. The photographs and 3 Dashboard Camera footages were given to the Traffic Police as well. There were cameras by the side of the road which might have recorded the footages of the said truck, our car and the accident.





Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128 4 of 5 Report No. T/20190208/2052

Tel No: 1800-2739999

CONTINUATION OF REPORT





Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128 Tel No: 1800-2739999 5 of 5 Report No. T/20190208/2052

CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: A / Staff Sgt SURAJDEEP SINGH S/O RAJVENDER SINGH	Signature Of Informant:	
Signature Of Interpreter: Not applicable	Date/Time: 08/02/2019 13:07	
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI Contact No.: 65476904	Classification Of Case;	
Authentication Stamp		

LEASING LETTER



Leasing Contract of Agreement

This Contract of Agreement is drafted on Date 17th Month Jan Year 2019

Between

KARZ-TA LEASING "hereby called The Owner" (Singapore Company Registration No.: 53318368E), A company incorporated in Singapore and having its registered address at 317, OUTRAM ROAD, B1-03 CONCORDE SHOPPING CENTRE, HOLIDAY INN ATRIUM, (169075)

And

Tan Wah Choon of NRIC S1717782F, DOB: 11/07/1965, Driving pass Date: 25/03/1983 "hereby called 'The Hirer/Driver" residing at Blk 174A Edgedale Plains #08-153 S(821174).

Relive Driver

N.A

On this lease agreement "The Owner" shall lease the vehicle with the below mentioned details hereinafter named as "The Vehicle" to The Hirer/Driver" on the agreed terms and condition as set out by "The Owner" in this agreement contained herein -

Description of Vehicle

Make and Model: Toyota ISIS 1.8

Registration No: SMH428D

Chassis No:

ZNM100059619

Engine No:

1ZZ3198627

Registration Date: 19 Jun 2009

Color

Black

Lease Period

As agreed on a lease period of 6 month with effect from the 17th Day of Jan 2019 to 16th Day of Jun 2019.

1 0

Rental Rates

The rate has been hereby agreed between both parties at S\$490/- Week with a refundable security deposit of \$\$500.

"The Owner" shall reserve the rights to change or amend any of the clause and rental rates without prior notice to "The Hirer/Driver" or additional driver(s) if any. 1st Driver

	Hirer / Driver Signature	: Varia		
	Name:	Tan Wah Choon	Email:	
ě.	NRIC / Passport No.:	S1717782F	Bank A/C:	
	Date:	17 Jan 2019	Contact:	81116544

Additional Driver

N.A.

KARZ-TA LEASING Representative



Signature / Company Stamp:

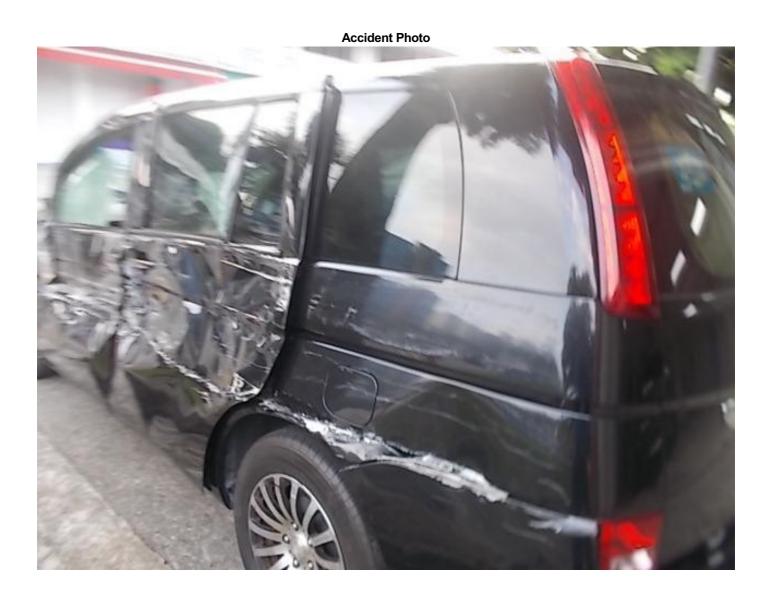
17 Jan 2019

317, Ostram Road, Concorde Shopping Centre, Holiday Inn Atrium, (169075), Tel. 83223232, Fax: 67388360, Email: karztalensing@gmail.com, Reg No. 53318368E

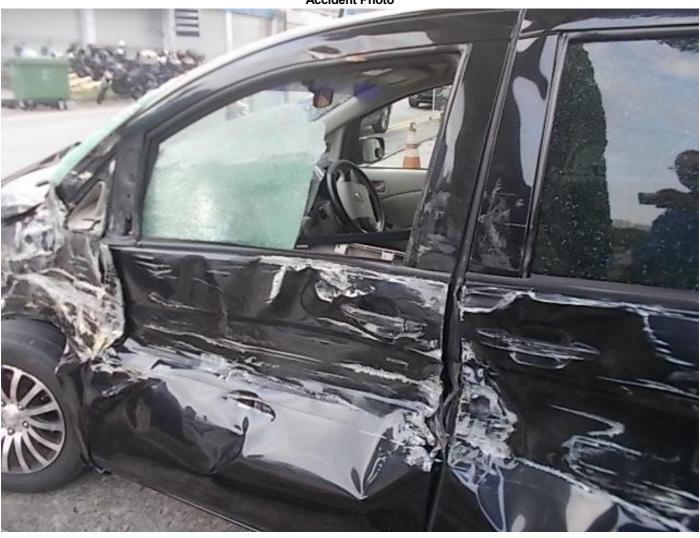




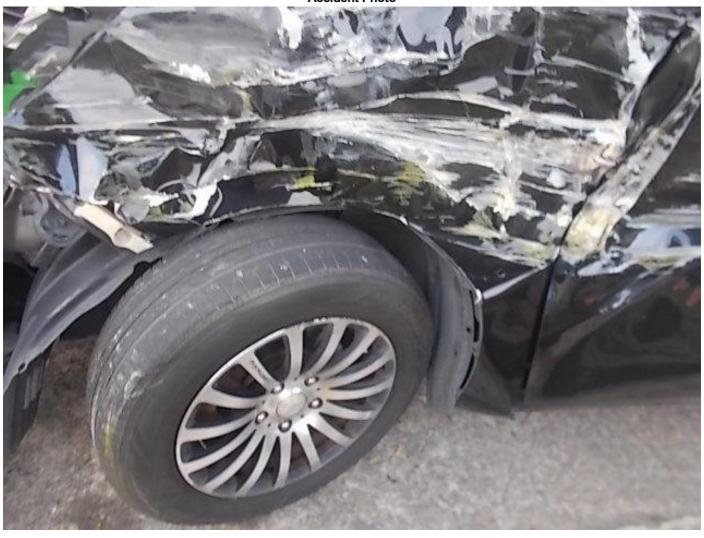


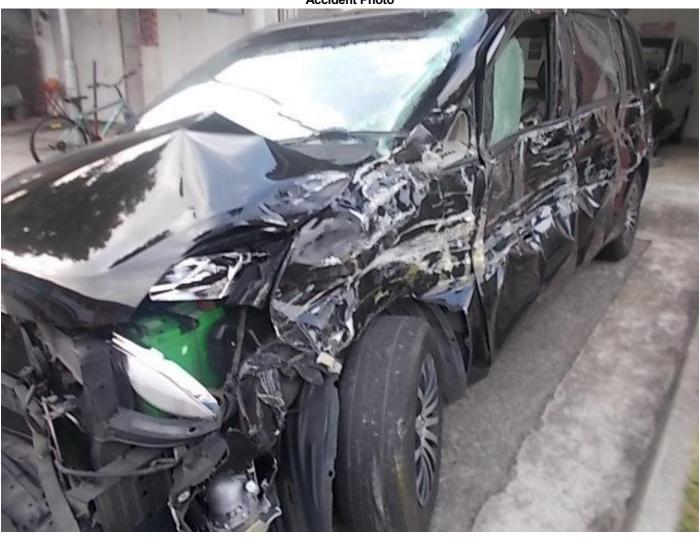


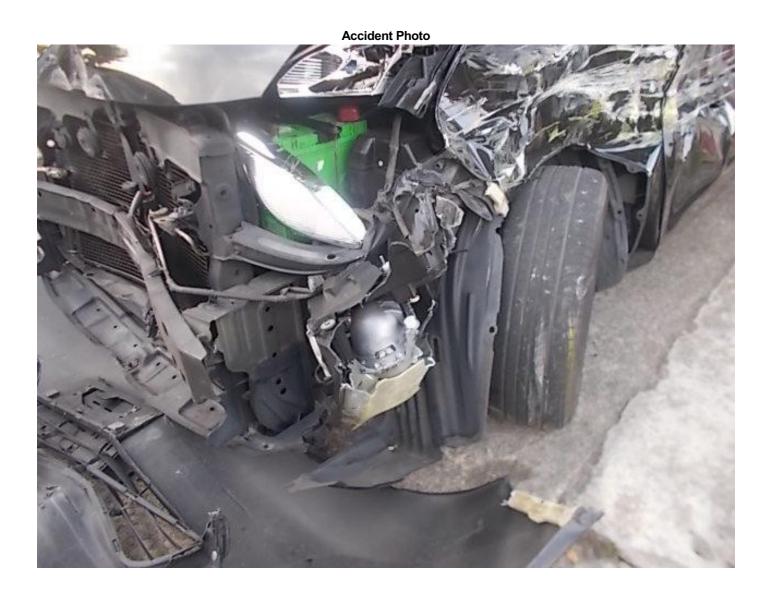




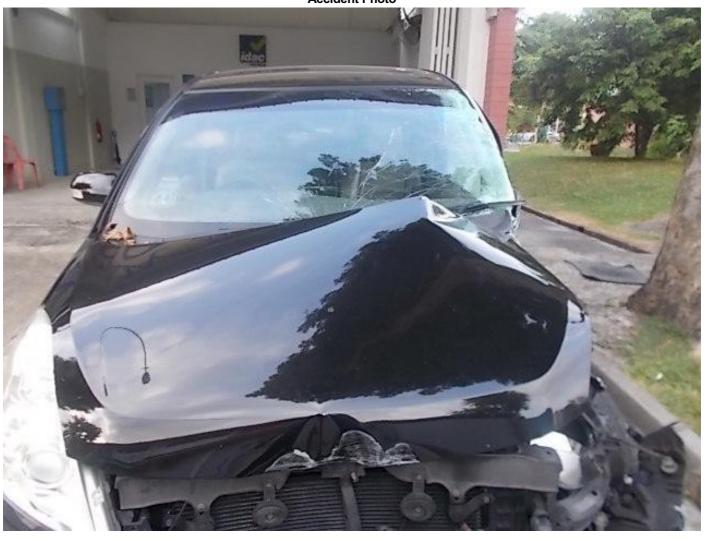


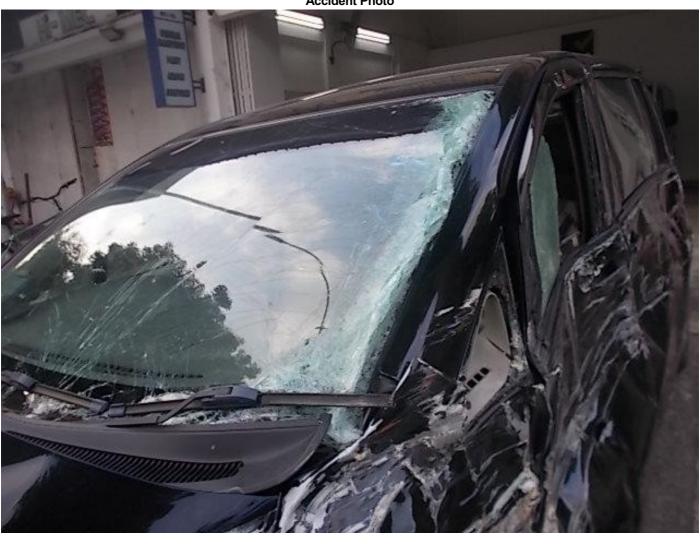


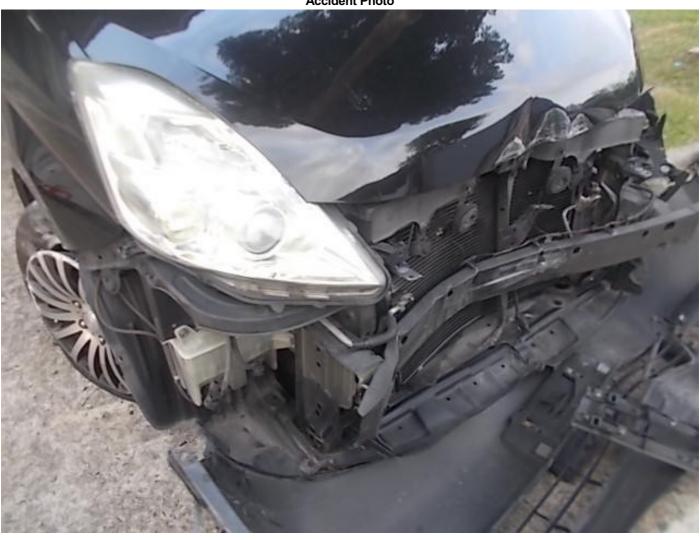


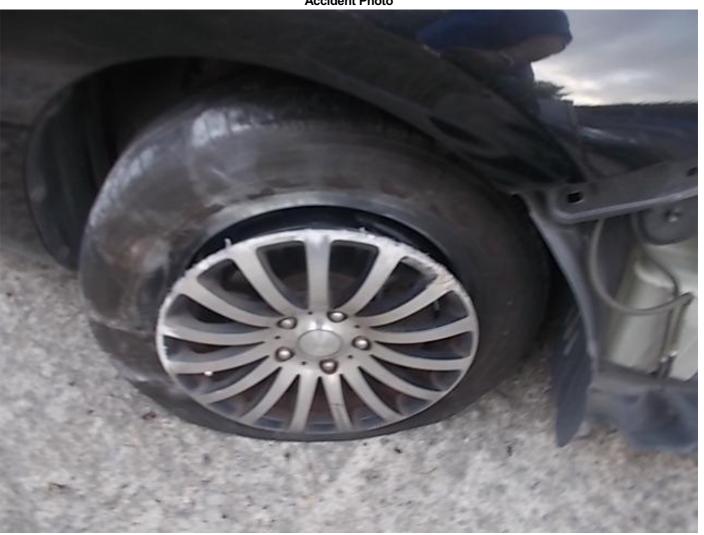




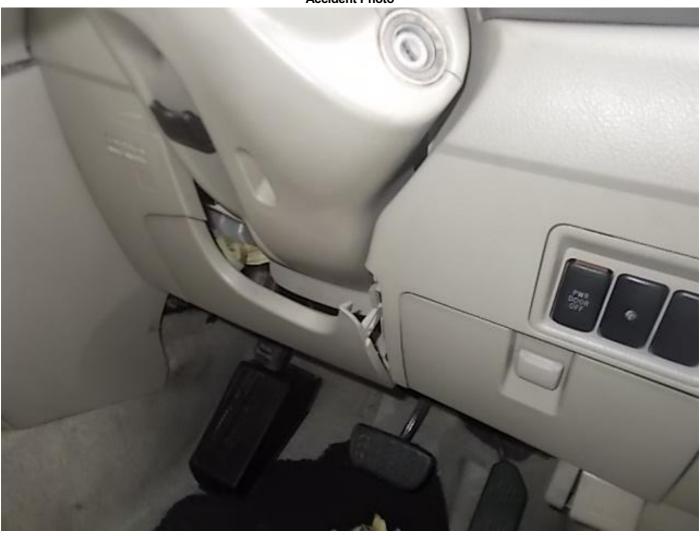


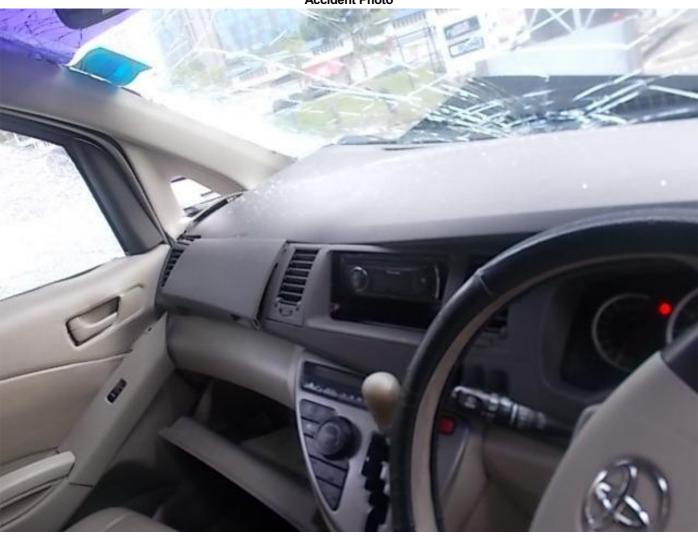


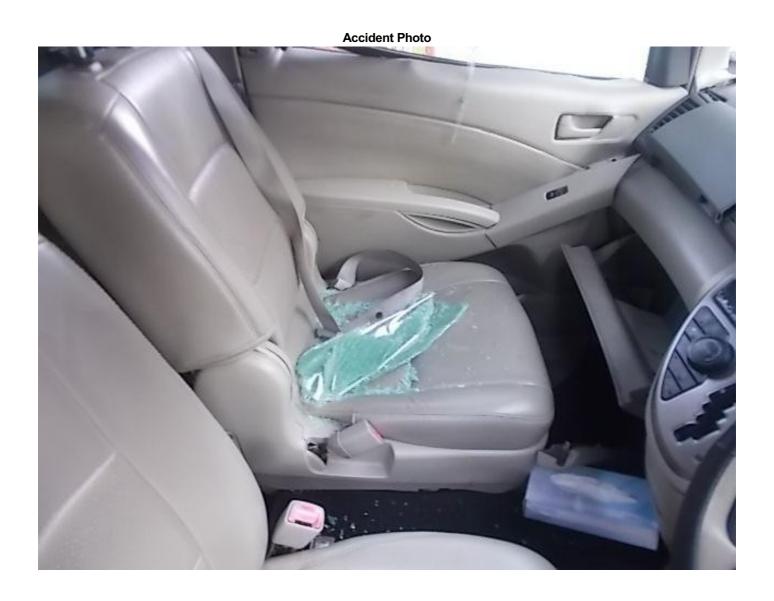
























































Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: 3665500100 / 057 Reg. No.: M400017735

HARRY WHENEX " "

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report. .:

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : Vehicle Registration No: Name(as shownin NRIC): NRIC/FIN/Passport No : (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate Address Singapore(Contact (Tel) Emall Address Date of Accident OUVADOS Place of Accident Insurance Company: (8) ADDITIONALINFORMATION / AMENDMENTSD I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: YOUGHTE CLASSE unsonun Reporting Centre Perspnne's Signature Policyholder / Driver's Signature Name: Date: NRIC/FIN No .:

Date:

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: 5685500200 / GST Reg. No.: M400017735

4404 2000 -

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

	ADDENDUM
A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No : MAM9017113-07 Vehicle Registration No: SMH 4280
	Name (as shown in NRIC): 100 WAN CHOON NRIC/FIN/Passport No: S/21878) F
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address :Singapore(
	Contact (Tel) :Mobile No.: 811/6584
	Email Address
	Date of Accident : 06/07/2009 Time of Accident: 19:20
	Place of Accident: KROWN WAY TOWARDS (GROW) COOP E/F THE KROWTI DAY
	Insurance Company: MYC
	INSUR NEW POLICE PRIPORT THOUSAND SOLIT
	an 08/02/2019
	Policyholder / Driver's Signature Date: Reporting Centre Personnel's Signature Name: NRIC/FINNo.: Date: