2 - port at 1 - 200 NATIONAL Assessment Centre Services. port sorros. MNA 119032916. Date In: Job description Date & Time Completed Done by 12/3/19 09:15 Ref No: SAS c-filing MA/AIG19004426/64 Vch No: E-mail (within 5hrs, AIC 2hrs) SLS 3001K D.O.A : i-Motor Claim Form 1113/19 09:10. I-Motor W/O (Within: OD 2hrs, TP 4hrs) OD / TP / Porting Only I-Photo Uploaded Assessment/Survey Report TP Insurer: Ass't Report by Fax / Hand to Owner/Wk3p Proferred Wksp / INC Assign Wksp / QW: (Tol: TP Particulars: Veh No: SHO 7103 A. INC ()/Non-INC (Owner / Driver: (Tcl:) Policy No: (Period: (Cover Type: () Confirmed by: (Date: Time: Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 30-100%] Year of Registration: (Warranty: YES ()/NO(Excess: (\$ Loading: \$1,000 ()/\$2,000 (Goneral Reinhelts & Con) Walk-In Customer's 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: ((Kaningles) - 2 (187-160) he : 6709 (616) S 1) Apply for Transfort Allowance () / Courtesy Car (2) QC Check / Post Repair Inspection .) 3) Upload Resurvey Photo [Repair Cost > \$3000] Injury : MA1901845 MI LAdd Din Chammads Particulars 1) AR : Analdent Reporting (530); 2) DA : Damege Assessment (5100) NC (\$40) Driver/Owner: 3) TF : Towing Fee \$40/\$45 4) FT : Follow-Through Survey \$120 Contact No: 5) PT : Follow-Through Survey (Resurvey) Por deining ecolog (INC Only (wof 10 Jan 2005) 6) TR : Re-Inspection Damaged Portion: \$75 7) NI : Idao DA + SMRT Survey \$160 8) NTUC Additional Services:-QC Checked by (Engr-In-Charge): QD. *N5: Courtesy Car / Tpt Allowance \$5 *N6: Repair Co-ordination 510 Auditors Comments : * N7; Post Repair Inspection \$25 *NS: DV / Collect Excess Coordination 35 ?at, 1; TP (NII): TP (Kon INC) against INC \$20 9) N12: Idao Mobile 11 2/3: Involve dated Fee Charged OF THE REAL PROPERTY. Involce dated Fee Charged

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. 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.
- 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.

5. Any false reporting may be referred to the Police for investigation,

- 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	12/03/2019 09:15
Date Of Accident	11/03/2019 09:10
Exact Location Of Accident	AT PIE EXPRESSWAY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS3001K
Insured/Policyholder	
Name Of Registered Owner	MARIC CAR RENTAL PTE LTD
Co Reg No	
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-87742092
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	CAMRY
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSUIDANCE PTE 1 TO

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number 999994657

Cover Note Number

Driver

Name of Driver TAN KAR HING(CHEN JIAXIN)

 NRIC No
 \$1744143D

 Date Of Birth
 09/01/1966

 Occupation
 OUTDOOR

 Date Of Driving Pass
 25/07/1986

Driving Experience 32 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87742092

Fax Number

Contact Number

EMail Address NOEMAIL

Address

BLK 596A AMK ST 52 #08-315

Postcode

561596

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

3

involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

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 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?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHD7103A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SGE4284L

PRIVATE CAR

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

lunderstand, 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.

Maric Car Rental Pte Ltd Co. Reg. No.: 201620648G

9 Tagore Lane #03-04 Singapore 787472

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

P -> Expression

Yenice A: SLS 3001 K Verticle B: SHD 7103 A Veniue C: SGE 4284L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ny loun cowdn't	stop ?	a Sudden	cotilda	Proto V	HD 7103 A)	did a ja	im - brake . 1
went a	down, 1	realised	-that	1 was	involved	in a 3	car chain
collision	accident		d like	to sta			fic mais de
					Trans.		

DECLARATION

Www.declare the foregoing particulars are true in every respect.

Maric Car Rental Pte Ltd

Co. Reg. No.: 201620648G

9 Tagore Lane #03-04

Singapore 787472
Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

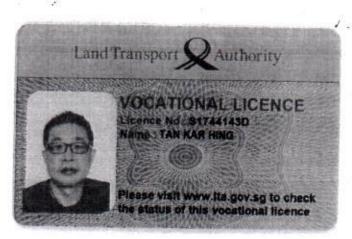
ACCIDENT STATEMENT

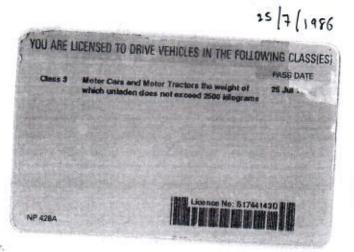
ACCIDENT DATE: 11 / 03 / 201	19](DD/MM/YYYY), TIME:(09 : 10)(HH:MM
LOCATION: At PIE EXPRESSM	
1. DETAILS OF VEHICLE	
a) VEHICLE NUMBER: S	is some
DINSURANCE COMPANY:_	
CIPOLICY NUMBER: 49	
eJMAKE & MODEL: To	ENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
FITYPE (8 FOOD) COURT	yotu campre
alvehicle Category (DRIV	MPV /V AN / LORRY / MOTORCYCLE / OTHERS)
hipippose of using ATAG	/ATE / COMMERCIAL / MOTORCYCLE)
h)PURPOSE OF USING AT AC	CIDENT TIME: WORK
IF NO PLEASE STATE ITLIED	YOUR OWN INSURANCE (YES/NO)
2. INSURED / POLICY HOLDER	PARTY CLAIM / REPORTING ONLY)
AJNAME: Maric Car A	Control Dto 1+cl
b)NRIC/FIN/PASSPORT	<u>QUITAL PER LED</u> (MALE / FEMALE) <u>2016 206 4861</u> CONTACT:
c/ADDRESS:	CONTACT:
* CONTINUE TO 3.d IF DRIVER	ALSO POLICY HOLDER
14 No of passon 33. DRIVER	THE TOTAL PROPERTY.
The state of the s	Chun Jiaxin) (MBLE / FEMALF)
b) NRIC/FIN/PASSPORT: S/	1744143D CONTACT: Q+74 2092
CIADDRESS: EK 5964 Ang	Mo Kilo Street 52 \$ 08-315 Singapore
561596	
"d)DATE OF BIRTH: (09) 01	1_1966_)(DD/MM/YYYY)
e)OCCUPATION: (INDOOR / C	MIDOOR)
f)YEARS OF DRIVING EXPRERIE	NCE: 8 months
4. WAS DRIVER AN EMPLOYEE	OF THE INSURED'S COMPANY? (YES / NO)
5 OLWEATHER CONDITION OF	HE DRIVER WITH INSURED: Hive
b)ROAD SURFACE: (DRY / WET	ART RAINING / OTHERS
6. WAS ANYBODY INJURED (YES /	/OTHERS
7. a)REPORTED TO POLICE (YES /	NO)
IF YES, PLEASE STATE WHICH P	
8 THIRD BARTY VELLOR	OLICE STATION:
Ho of passenger Of VEHICLE NUMBER: SHD	7103 A B MODEL:
(Including driver) b) DRIVER'S NAME:	MODEL.
(02) C) NRIC/FIN/PASSPORT:	CONTACT:
9. THIRD PARTY VEHICLE	
4 No of passenger d) VEHICLE NUMBER: SGE	4284 L (E) MODEL:
1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
(Including driver) f) NRIC/FIN/PASSPORT:	CONTACT:
())	ecitiAci
	*

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

Type

Description

Issue Date

13

PRIVATE HIRE CAR VL

15/02/2019





CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT ICHAPTER 1891 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 [MALAYSIA]

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

M.Z.400

(The below excess is subject to GST)

COMMERCIAL MOTOR POLICY EXCESS S\$1000.00 (Sect II)

CERTIFICATE NO.

SLS3001K

WINDSCREEN EXCESS

POLICY NO.

THIRD PARTY

999994657

SUM INSURED

NA

INSURING WITH COE/PARF NA SLS3001K

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

MARIC CAR RENTAL PTE LTD

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

25 April 2018

4) DATE OF EXPIRY OF INSURANCE

24 April 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the Insured's order or with their permission.

\$\$1,000.00 Section II Excess is applicable for driver who is above 22 years old and/or with minimum 2 years driving experience.

S\$2,000.00 Section II Excess is applicable for drivers who is 21 years old with minimum 1 year driving experience.

The policy does not cover drivers who are below 21 years old or less than 1 year driving experience.

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

*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, 1967 (Malaysia), are not to be included under these headings.

17 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 25 Apr 2018

500656-000 Cowell Insurance (Agency) Pte. Ltd.

8 Burn Road #09-09 Trivex Singapore 369977

AUTHORISED REPRESENTATIVE

SSPOEC

AIG Asia Pacific Insurance Pte. Ltd.

ORIGINAL

