SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number 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 <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.

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	ACCIDENT STATEMENT
Date Of Report	20/12/2019 17:21
Date Of Accident	18/03/2019 10:00
Exact Location Of Accident	BT.MERAH MARKET CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YM6533A
Insured/Policyholder	
Name Of Registered Owner	NET LINK LEASING PTE LTD
Co Reg No	2XXXXX105K
Email Address	WEIHONG.NETLINK@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-88281661
Vehicle Particulars	
Manufacturer	ISUZU
Model	NPR85
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1905591900
Cover Note Number	29/01/19-28/01/20
Driver	
Name of Driver	MOHAMMAD FAHMY SHAH BIN LATIFF
NRIC No	SXXXX653J
Date Of Birth	14/11/1991
Occupation	INDOOR
Date Of Driving Pass	27/04/2018
Driving Experience	0 YEAR AND 10 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97247788
Fax Number	
0 (())	

NOEMAIL

Address BLK 239 TAMPINES ST.21 #02-443

Postcode 520239

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER'S DRIVER

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?

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)

1

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

REFER SKETCH ATTACHED

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHD3238X

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)

Sketch Plan

SKETCH PLAN

VEHICLE NO.:

9 m 6533A

IMPORTANT NOTICE DATE & TIME:

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- 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)

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 invoive 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: Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signatur Name: Seul

NRIC/FIN No.:

ETCH PLAN							
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A	S CO. Reg. No. m				3	N/ 21	15/12
yhōlder's Sig	3 201801105K -	Driver's Signature		Po	norting Contr	e Personnel's !	Signature
:yn gjøers sig :&Time:	A + 10	(If driver is not the po	olicyholder)		me: 440		(V))
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MC SketchPlan	neprim tra () Claim	Date & Time: Own Policy () CI	laim Third Part		IC/FIN No.: rting Only		

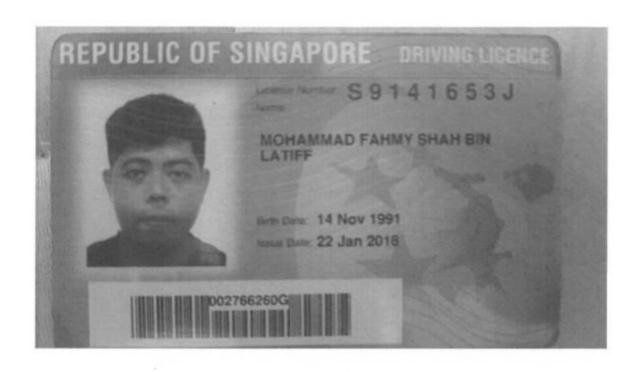
RENTAL AGREEMENT

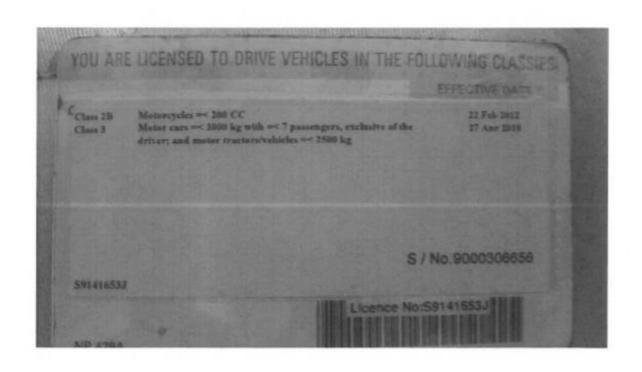
NET LINK LEASING PTE LTD

ROC NO. : 201601105K GST REGISTRATION NO. : 201601105K 71 WOODLANDS INDUSTRIAL PARK E9 #08-08 WAVE9 SINGAPORE 757048 HOTLINE : 8828 1661 FAX : 6752 1661

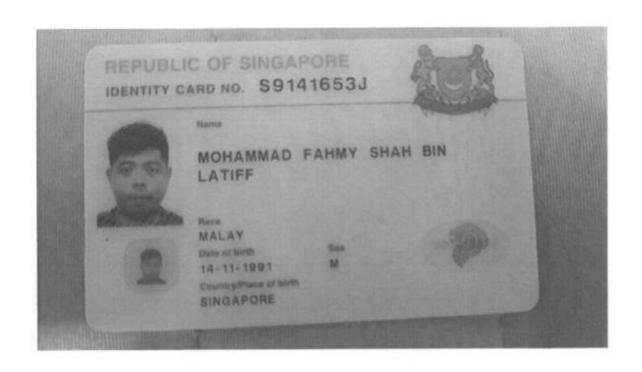
VEHICLE	LEASING AGREEMENT
	No.: 1032
Owner : NET LINK LEASING PTE LTD	Date : 3 - /08/12
Hirer : ANTHONY LOGISTICS	NRIC / Co. Reg. No.: 2016/035-35
Address: 15 PIONEER KOND NO	KTH #01-80 S(628 464)
	r H/P: 9729 7-736 E-Mail:
VEHICLE DETAILS	OUT IN
Vehicle No. : 9446533 A	Date Out: 30/08/18 Time Out: 1500hs
Year, Make & Model: Isugu weeks 14.	Time Out: (5% lus
AUTHORISED DRIVER'S PARTICULARS	
Name: THINKSHILLOWNER S/O BLUME OFM	NRIC / Fin No. : SPE 06 02 13 H/P: 9724 7788
Citizenship: Singaporean / Singaporean PR / Others: Date of Birth: 70-02-19-8	Type of Work Pass: Work Permit / S Pass / Employment Pass Driving Licence: Class / Class / Driving Licence Pass Date: 2.1 ***********************************
	Prion Driving Licence: (ass) / (dass4 Driving Licence rass Date: 22 Prion
LEASING PERIOD & CHARGES (INCLUSIVE OF GST)	
Daily @ SS @	Day/s
Weekly @ S\$	
Monthly @ S\$ (,680 @	3 Month/s
COMPULSORY UPFRONT PAYMENT	
	posit) + S\$ /, 630 (Advance Leasing Charge)
Cash / Cheque No. :	Bank Name : Official Receipt No:
and the Hirer named herein (hereinafter called "the Hirer") agrees to driven by the person who has been expressly authorised by the Hirer th	ression shall where the context so admits include the owner's successors-in-title) hereby agrees to least take on lease the motor vehicle described herein (hereinafter called "the Vehicle") which can only be terein (hereinafter called "the Authorised Driver") subject to the following Terms and Conditions:
2. Unless with written consent from the Owner, any driver below 21	years old or with less than I year of valid Singapore driving licence is not allowed to drive the Vehicle.
In the event that the Vehicle or any part thereof is damaged as a result imposed to the Hirer for creating an unfavourable standpoint to the O	of any accident, the Hirer must report to the Owner immediately without fail, otherwise \$\$590 penalty will be
 For any accident that happens regardless of whether the driver of the 	Vehicle is at fault or not, the Hirer unconditionally agrees to pay the Owner following payment(s) within
calendar days upon the date of accident: a. \$\$3,500 for driver who is 22 years old (or older) and with minimum	n 2 years of valid Singapore driving licence.
b. S\$7,000 for driver who is 21 years old or with minimum 1 year of c. S\$12,000 for driver who is below 21 years old or with less than 1 y	
d. Additional payment of \$\$1,000 for driver who is under work pass t	egardless of age and years of valid Singapore driving licence.
These payments comprise of sisturance excess payable and compensat refunded back to the Hirer upon 100% successful claim against the TY	ion to the Owner for impact of claim on future motor insurance renewal premium. These payments will only be aird Party or Third Party's insurer.
 The Hirer is also fully liable for all loss and damages not recoverab damaged Vehicle is under repair and subject to Owner's discretion, th 	le under the Owner's Vehicle policy of insurance including any Third Party's claims, loss of earnings while
 The Owner is in absolute discretion to conduct any negotiations and e 	ffect any settlement with the Owner's insurer, Third Party and Third Party's insurer.
 Replacement of vehicle will not be provided for any secident case Only petrol/DIESEL from petrol station is allowed, failing to come 	regardless of whether the driver of the Vehicle is at fault or not. by may cause engine failure/damage, hence the Hirer is fully liable for the total damage/restoration costs.
The Hirer and the Authorised Driver have to ensure that the Vehicle is Driver should also stop driving and inform the Owner immediately if t	equipped with sufficient fuel, engine oil, coolant/water and prescribed tyre pressure at all times. The Authorised the Vehicle's meter is showing high temperature. Failing to do the abovementioned items the Hirer will be failly
liable for the full cost of repairs including loss of income arising from 10. The Hirer and the Authorised Driver are responsible for sending	the Vehicle to the Owner's authorised agents for regular servicing/maintenance and repair/replacement
of any wear and tear item including tyre and battery. Failure to d	o so may cause the Vehicle to break down, engine failure/damage as well as traffic accidents, bence the osts. In addition, the Owner reserves the right to repossess the Vehicle as deemed fit and terminate the
agreement without any liability to the Hirer. The above-mentioned	regular servicing/maintenance is based on :
5,000 km or 3 months (from the servicing date as stated on the 10,000 km or 6 months (from the servicing date as stated on the	decal), whichever comes first decal), whichever comes first
By signing below, the Hirer acknowledges having read, understood and a	accepts all the Terms and Conditions contained on both sides of this agreement including the 'Remarks'
handwritten above, attached 'Vebicle Assessment Checklist', 'Deed Of C	
AW	Hirer's Name : NRIC No. :
Authorised Signature Name: Locathona	Hirer's Name
Name: Wet HONE	NRIC No. :
/	

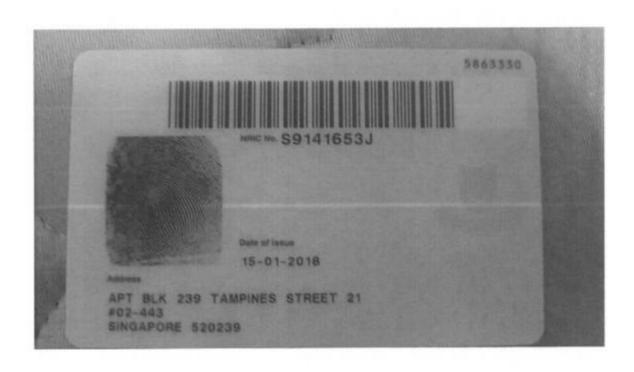
Driving License





Identification Card





Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580

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: 566550206 / GST Reg. No.: M400017735

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

ADDENDUM

) PARTICULARS C	F PERSON MAKING THE AMENDM	ENTS:
Original Report	No : MCHM 19167650	Vehicle Registration No: YM 6533A
Name (as shown in I	urich: Net Link Leasing Pt	NRIC/FIN/PassportNo : 2XXXXX 105 K
(*Vehicle Driver	/ Vehicle Owner) (*) Please delete	as appropriate
Address	8:	Singapore(
Contact (Tel)	1	Mobile No.:_ 8を2を1661
Email Address	\$500 PM 100 A 100 PM 10	
Date of Acciden	- 11	Time of Accident :(0: 00
Place of Acciden	nt: Bt. Merah Man	bet Car Park
Insurance Comp	vany: China Taipi	~-3
ADDITIONALIN	FORMATION / AMENDMENTS:	==
Amend a	lriver's Date of E	sirth and driving passdate.
101		
Dr =	27/04/2018	
	<u> </u>	
		(E NOTOP)
		(45)
Policyholder / Dr Date:	in arla Cianatura	Reporting Centre Personnel's Signature