

NATIONAL Assessment Centre Services

[wef 1 Jan 2005]

Date In: 01/04/19	Job description	Date & Time Completed	Done by
Ref No: NA/19005722/13	SAS e-filing		
Veh No: 5L22673R	E-mail (within 8hrs, AIC 2hrs)		
DOA 31/03/19 1855	i-Motor Claim Form		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

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

TP Particulars: Veh No: 5M073335 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%; F: 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:- (INC hotline: 6788 6616) 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

NA1902386

Invoice Preparation Checklist

Amt (\$) Amt (\$) 1st Bill Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

- 1) AR: Accident Reporting (\$30);
- 2) DA: Damage Assessment (\$100); INC (\$80)
- 3) TF: Towing Fee \$40/\$45
- 4) FT: Follow-Through Survey \$120
- 5) RT: Follow-Through Survey (Resurvey) \$30
- For claiming against INC Only (wef 10 Jan 2005)
- 6) TR: Re-inspection \$75
- 7) NI: Idac DA + SMRT Survey \$160
- 8) NTUC Additional Services:-
- OD:
- *N5: Courtesy Car / Tpt Allowance \$5
- *N6: Repair Co-ordination \$10
- *N7: Post Repair Inspection \$25
- *N8: DV / Collect Excess Coordination \$5
- TP (N11): TP (Non INC) against INC \$20
- 9) N12: Idac Mobile 30

Invoice dated

Fee Charged

Invoice dated

Fee Charged

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	01/04/2019 15:57
Date Of Accident	31/03/2019 18:55
Exact Location Of Accident	OPHIR RD TWDS ECP
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLZ2673R
Insured/Policyholder	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	201735055D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-99999999
Vehicle Particulars	
Manufacturer	KIA
Model	CARENS
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	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	HO CHIN NREN,TERENCE(HE JINREN)
NRIC No	S9001562A
Date Of Birth	11/01/1990
Occupation	OUTDOOR
Date Of Driving Pass	24/06/2011
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-99999999
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	30 YIO CHU KANG RD #03-03
Postcode	545550
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 - CHANGE/CROSS LANE
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?	NO
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: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

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

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?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMD7333T
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

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1. Please report **correctly** the details of the accident to speed up the claims process.
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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. 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:

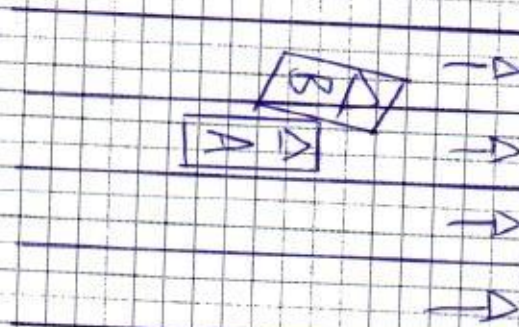
Driver's Signature
(If driver is not the policyholder)

Date & Time: 1445 01/04/2019

Reporting Centre Personnel's Signature
Name:

NRIC/FIN No.:

SKETCH PLAN



Vehicle A = SL22673R

Vehicle B = SMD7333T

Ophir Rd Towards ECP

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above Date and time, I vehicle A was driving along Ophir Rd towards ECP on 3rd lane. Traffic was slow at the time, I was driving straight to ECP. Suddenly vehicle B from 4th lane cut into my lane (3rd lane) and hit into my vehicle.

DECLARATION

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

Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time: 1445 01/04/2019

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

ACCIDENT STATEMENT

ACCIDENT DATE: 31/03/2019 (DD/MM/YYYY), TIME: 18:55 (HH:MM)
LOCATION: Ophir Rd towards ECP

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLZ 2673R
b) INSURANCE COMPANY: AIG INSURANCE PTE LTD
c) POLICY NUMBER: 999994322
d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: KIA Carens
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: working
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE THIRD PARTY CLAIM REPORTING ONLY

2. INSURED / POLICY HOLDER

- A) NAME: BIS Motoring Pte Ltd (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 2017350550 CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: HO CHIU NREN, TERENCE (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S9001562A CONTACT: _____
c) ADDRESS: 30 XLO CHU KANG ROAD #03-03 SINGAPORE 545550

* d) DATE OF BIRTH: 11/01/1990 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 8 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Private hire

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMD7333T MODEL: Merice
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passengers
(including driver)
(3)

F/M

1 male

2 Female

* No of passengers
(including driver)
()

* No of passengers
(including driver)
()

xinhua@workshop@gmail.com

telvin 8292 5595

3667467



NRIC No. S9001562A



Date of Issue
25-01-2005

30 YIO CHU KANG ROAD #03-03
SINGAPORE 545650
NRIC No: S9001562A Date: 14/09/2018

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9001562A



Name
HO CHIN NREN, TERENCE
(HE JINREN)
何晉仁

Race
CHINESE

Date of birth 11-01-1990 Sex M

Country of birth
SINGAPORE



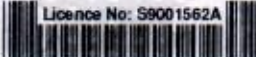

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES):

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 24 Jun 2011

NP 428A

Licence No: S9001562A



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9001562A

Name:
HO CHIN NREN, TERENCE
(HE JINREN)


Birth Date: 11 Jan 1990
Issue Date: 24 Jun 2011




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	20/07/2018

PDVL/TDVL
33 888 88888
259095




Land Transport Authority

VOCATIONAL LICENCE

Licence No : S9001562A
Name : HO CHIN NREN, TERENCE

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



**CERTIFICATE OF INSURANCE**

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

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

**COMPREHENSIVE
CERTIFICATE NO.
POLICY NO.****COMMERCIAL MOTOR
SLZ2673R
999994322**

(The below excess is subject to GST)

**POLICY EXCESS S\$1500.00 (Sect I & Sect II)
WINDSCREEN EXCESS S\$100.00****SUM INSURED Market Value****INSURING WITH COE/PAFF YES**

SLZ2673R

BIS MOTORING PTE LTD

26 December 2018

25 December 2019

1) VEHICLE REGISTRATION NO.**2) NAME OF INSURED****3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
FOR THE PURPOSES OF THE ACT****4) DATE OF EXPIRY OF INSURANCE****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

UNITED OVERSEAS BANK LIMITED

*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

RENTAL AGREEMENT

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

The Rental Agreement is made on 31 (Day) 08 (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. Ho Chin Xreu, Terence. (NRIC No. / UEN No. S9001562A), residing at 3D Yio Chu Kang #03-03 Residences Botanique Singapore 545 550 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. SL22673K 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.	:	<u>SL22673K</u>
Vehicle Make / Model	:	<u>Kia Carens EX 1.7</u>
Vehicle Colour	:	<u>Red.</u>

B. Lease Period

Date of Handover	<u>31/8/18, 11.10AM</u>	
(Commencement of the Lease Period)	:	<u>1/9/18</u>
Period of the Lease	:	<u>6 months</u>
Option to Renew	:	<u>-</u>
		year(s)
		year(s)

Hirer's signature: 