

| | | | |
|-------------------------------------|--|-----------------------|---------|
| NATIONAL Assessment Centre Services | | | |
| Date In: 06/08/2019 18:29 | Job description | Date & Time Completed | Done by |
| Ref No: NPA1905750 | SAS e-filing | | |
| Veh No: SW 2905L | E-mail (within 4hrs. AIC 2hrs) | | |
| D.O.A: 30/07/2019 21:00 | 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 / MNC Assign Wksp / QW: () | Tel: () | Fax: () |
| TP Particulars: | Veh No: GAE 8147 | 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 |
|-----------|---------|
| | |
| | |
| | |
| | |

| | | | | |
|---------------------------------|---|------------|-----------|-----------|
| NA1905750 | Invoice Preparation Checklist | | Am't (\$) | Am't (\$) |
| | | | In Bill | Add. Bill |
| Claimant's Particulars: | 1) AR: Accident Reporting (\$30) | | | |
| Driver/Owner: | 2) DA: Damage Assessment (\$100) | INC (\$80) | | |
| Contact No: | 3) TP: Towing Fee | \$40/\$45 | | |
| Damaged Portion: | 4) FT: Follow-Through Survey | \$120 | | |
| QC Checked by (Engr-In-Charge): | 5) PT: Follow-Through Survey (Resurvey) | \$30 | | |
| Additional Comments: | For claimant against INC Only (wef 10 Jan 2019) | | | |
| Cal. J: | 6) TR: Re-inspection | \$75 | | |
| | 7) NI: Idno DA + SMRT Survey | \$160 | | |
| | 8) NTUC Additional Services: | | | |
| | (21) | | | |
| | * N3: Courtesy Car / Tpt Allowance | \$5 | | |
| | * N6: Repair Co-ordination | \$10 | | |
| | * N7: Post Repair Inspection | \$25 | | |
| | * N8: DV / Collect Rapex Coordination | \$5 | | |
| | TP (N11): TP (Non INC) against INC | \$20 | | |
| | N12: Idno Mobile | 30 | | |

| | | |
|-----------|---------------|-------------|
| Cal. 2/3: | Invoice dated | Pen Charged |
| 1 / 1 | Invoice dated | Fee Charged |

07-MAY-2019 16:39

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 | 02/08/2019 18:29 |
| Date Of Accident | 30/07/2019 21:00 |
| Exact Location Of Accident | EUNOS AVENUE 3 TOWARDS EUNOS ROAD 3 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------------|
| Vehicle Registration Number | SJW2905L |
| Insured/Policyholder | |
| Name Of Registered Owner | MARIC CAR RENTAL PTE LTD |
| Co Reg No | 201620648G |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-97634241 |
| Alternative Phone No | OFFICE-97634241 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | MAZDA |
| Model | 3-1.6 LUX (A) |
| Exact Purpose for which vehicle was being used at time of accident | WORKING PURPOSES |
| 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 | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 999994148 |
| Cover Note Number | |

Driver

| | |
|----------------------|--------------------------|
| Name of Driver | LEROY SELDON SUBRAMANIAM |
| NRIC No | S9302993C |
| Date Of Birth | 30/01/1993 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 25/03/2015 |
| Driving Experience | 4 YEARS AND 4 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-97634241 |
| Fax Number | |
| Contact Number | OTHERS-97634241 |
| Email Address | NOEMAIL |

| | |
|---|---------------------------------|
| Address | BLK 256D SUMANG WALK #15-661 |
| Postcode | 824256 |
| 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 - CROSS JUNCTION |
| 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) | 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

PLEASE REFER TO SKETCH PLAN

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 | GBE814T |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| 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 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:


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

[illegible]

V.B) G.B.E.814T

On the stated date and time, I vehicle 'A' 5JWU2A05L was travelling on the stated venue. I was behind the stop line checking if there was any incoming vehicle before I proceed to go straight toward Junos Ave 3. After checking both side clear, I proceed to move forward. There was a van parked at position X, hence I have to move forward, while approaching the opposite lane, position A2. Suddenly I felt a huge impact on my vehicle rear, my vehicle then hit the Kerb from position A3. it then move forward to position A4, shortly I got down and speak to driver 'A', he mention he could not stop as he was afraid the vehicles behind him would hit onto his rear. No one was injured. I wish to add that vehicle 'B' was coming at very high speed rate, I believe he was talking to the passenger, he did not attempt to slow down or avoid this collision.

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



Reporting Centre Personnel's Signature:
Name: Paul W
NRIC/FIN No: 9201 240 9000 0000

Maric Car Rental Pte Ltd

VEHICLE LEASE AGREEMENT

Agreement Date: 19.7.2019

Referrer Name: Carouse11

NRIC: _____

Car plate no.: _____

Company **Maric Car Rental Pte Ltd**

Having its registered office at:

9 Tagore Lane #03-04, Singapore 787472

(hereinafter known as "The Owner")

Rental Begins on: 19.7.2019

Time Out & Sign: 3:30pm *[Signature]*

Office No: 6452 4300

Office hour: 10 am - 7 pm

Date & Time In: _____

Signed by Staff: _____

Hirer's Name: Leroy Seldon Subramaniam

IC: S9302993C

30 July
Accident
11PM

Address: APT B1K 256D Sunway Walk # 15-661 S(824256)

(hereinafter known as "the Hirer")

hereby agrees that the Owner shall let and the Hirer shall take the vehicle described below or a replacement vehicle provided by the Owner (hereinafter known as "the Vehicle") upon the terms and conditions hereinafter appearing.

1. DESCRIPTION OF VEHICLE

- a. Make & Model: Mazda 3
b. Registration No: SJW 2905L
c. Mileage: _____
d. Contact No: 9763 4241
e. Bank Account: _____
f. Email: _____

S/O - R3.04 (2day)

2. RENTAL PERIOD: 3 month

3. DEPOSIT AMOUNT: \$470

4. FIRST WEEK RENTAL STARTS ON 25.7.2019 AMOUNT \$228.57 (5day) *[Signature]*

5. RENTAL FEE: \$320 per week *[Signature]*

a. Rental Fee includes the following items:

- Unlimited mileage;
- Service and maintenance;
- Road Tax and Radio License;
- Motor Insurance Coverage (Excess applicable);
- 24-hours breakdown and emergency service (in Singapore only); and

| | |
|--------------------|--------------------|
| <i>[Signature]</i> | <i>[Signature]</i> |
| Hirer's Initial | Owner's Initial |

Email: smi@idac.com.sg

Tel no: 6555 6888 Fax no: 6454 3279

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 30/07/11 (dd/mm/yy) Time of Accident: 21:00 (24-HR-FORMAT)
Vehicle No.: SJW2905L Vehicle Make & Model: Mazda 3 1.6L
Exact location of Accident: Eunos Ave 3 twb Eunos rd 3
Policyholder's Name / IC No.: Maric Car Rental Pte Ltd 201620648G
Driver's Name / IC No.: Leroy seldon subramaniam / S9302993C (As Above) ☐
Driver's Contact No.: 9763 4241 Company Contact No.: _____
Driver's Address: 9 TAGORE LANE #03-04 (S)787472
Insurance Company: AIG Email address (if any): _____

Relationship between Owner & Driver:

or Others specify: Hirer

What do you wish to claim? (Please TICK one only)

☐ Own Insurance / ☐ Other Vehicle (The one you want to claim against) / ☒ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

☐ Private use / ☒ Work purpose

Occupation (nature of job) ☐ Indoor / ☒ Outdoor

No. of Passengers (Including Driver): 01

Passenger Name: _____
Passenger Name: _____

Gender: _____
Gender: _____

Weather condition & Road conditions? (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____

Was there any video captured by your Car Camera? ☐ Yes / ☒ No

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: _____

Injuries Sustain: _____ Injured Person in Which Vehicle: _____

Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: _____

The Other Party(s) Details:

1. Driver's Name / IC No.: _____ Vehicle No: G1BE 814T

Driver's Contact No.: _____ Insurance Company (If any): _____

2. Driver's Name / IC No.: _____ Vehicle No: _____

Driver's Contact No.: _____ Insurance Company (If any): _____

*Independent Witness (If Any): _____ Contact No: _____

Preferred Workshop Name: _____ Contact No: _____

* If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

Land Transport Authority



VOCATIONAL LICENCE
 Licence No: B9302993C
 Name: LEROY SELDON SUBRAMANIAM


For LKK/NAC Use Only

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

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 Silt Ming Drive, Singapore 575701.

| Type | Description | Issue Date |
|------|---------------------|------------|
| 13 | PRIVATE HIRE CAR VL | 24/06/2019 |

For LKK/NAC Use Only





CERTIFICATE OF INSURANCE

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

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1987

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1988 (MALAYSIA)

WZ400

(The below excess is subject to GST)

| | | | |
|--------------------------|------------------|-------------------|----------------------|
| THIRD PARTY FIRE & THEFT | COMMERCIAL MOTOR | POLICY EXCESS | S\$1500.00 (Sect II) |
| CERTIFICATE NO. | SJW2905L | WINDSCREEN EXCESS | NA |
| POLICY NO. | 98994148 | | |

| | | |
|-----------------------------|--------------------------|--------------|
| 1) VEHICLE REGISTRATION NO. | SUM INSURED | Market Value |
| 2) NAME OF INSURED | INSURING WITH COE/PARF | YES |
| | SJW2905L | |
| | MARIC CAR RENTAL PTE LTD | |

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

25 April 2019

4) DATE OF EXPIRY OF INSURANCE

24 April 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

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

S\$1,500.00 Section II Excess is applicable for driver who is between 23 years to 70 years old with minimum 2 years driving experience in Singapore.

An additional section II excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

Accident repair can be carried out at AIG's appointed list of workshop or Manufacturer workshop within 3 years warranty.

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 TAI THONG LEE TRADING PTE LTD

*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).

AIG Asia Pacific Insurance Pte. Ltd.

Issued in Singapore 25 Apr 2019

500656-000
Cowell Insurance (Agency) Pte. Ltd.
8 Burn Road
#09-02 Trivex
Singapore 369377


AUTHORIZED REPRESENTATIVE

ESPOEC

ORIGINAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Company

648G

Vehicle Details

Vehicle No.:

SJW2905L

Vehicle to be Exported:

Yes

Intended Deregistration Date:

02 Aug 2019

Vehicle Make:

MAZDA

Vehicle Model:

MAZDA3 1.6LSDN LUX

Primary Colour:

Grey

Manufacturing Year:

2009

Engine No.:

Z6844006

Chassis No.:

JM6BL1021A0137675

Maximum Power Output:

77.0 kW (103 bhp)

Open Market Value:

\$21,441.00

Original Registration Date:

16 Mar 2010

First Registration Date:

16 Mar 2010

Transfer Count:

2

Actual ARF Paid:

\$21,441.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

15 Mar 2020

PARF Rebate Amount:

\$10,720.00

Intended COE Rebate Details

COE Expiry Date:

15 Mar 2020

COE Category:

A - Car (1600cc & below)

COE Period(Years):

10

QP Paid:

\$20,802.00

COE Rebate Amount:

\$1,286.00

Total Rebate Amount:

\$12,006.00

The information contained herein is correct as at 02 Aug 2019.

OK