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 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. | |
|--|--|
| | ACCIDENT STATEMENT |
| Date Of Report | 18/09/2019 13:45 |
| Date Of Accident | 17/09/2019 23:50 |
| Exact Location Of Accident | AIRPORT BLVD |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SLW8899H |
| Insured/Policyholder | |
| Name Of Registered Owner | SG RENTAL & SALES PTE LTD |
| Co Reg No | 201509693D |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-85228855 |
| Alternative Phone No | OFFICE-85228855 |
| Vehicle Particulars | |
| Manufacturer | VOLKSWAGEN |
| Model | JETTA 1.4 TSI AT 1K23Q5 MX |
| 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 | REPORTING ONLY |
| Vehicle Category | PRIVATE HIRE |
| Insurance Company | |
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | YES |
| Policy Number | 5109395196 |
| Cover Note Number | |
| Driver | |
| Name of Driver | ABDUL RAHMAN BIN PAKIRI MOHD |

NRIC No S1804254A Date Of Birth 27/03/1967 Occupation **OUTDOOR Date Of Driving Pass** 21/10/1985

Driving Experience 33 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91810973

Fax Number

Contact Number OFFICE-91810973

EMail Address NOEMAIL Address BLK 220A SUMANG LANE

#13-85

Postcode 821220

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)

involved in the accident

3

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.

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 1

NO

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON STATED DATE AND TIME, I WAS TRAVELLING STRAIGHT ALONG THE STATED VENUE, SUDDENLY VEHICLE B JAMMED BRAKE.I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR PORTION.. THERE WERE 3 VEHICLES INVOLVED IN THIS ACCIDENT.

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 SHC8743C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver TAN TAI LONG
NRIC/Passport Number S0215998H

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA4258Y

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)

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Accident Sketch Plan

SKETCH PLAN

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 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:

- 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)
 - (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
- 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.
- 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

Name:

NRIC/FIN No .:

Accident Sketch Plan

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| CLARATION | | | | | | | | |
| CLARATION de declare the | foregoing perty | Equiates are t | tryle in even | y respect. | | | | |

NRIC/FIN No.:

Date & Time:

CIA/MC SwitchPlanForm_V3

2

Others

Annex E

NOTICE OF REPORTING

This is to confirm that NRIC/FIN S1804254A residing at Blk 220A

Sumang Lane #13-85, has reported to the Police a non-injury traffic accident which occurred at on 17/09/2019 at 2350hrs involving the following vehicles:

SLW8899H Volkswagen/White and SHC8734C Hyundai/Blue. Location

Airport Boulevard heading towards terminals.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT Frederick Gnoh

Date: 18/09/2019

Time: 1215hrs

S/D Ref:

Police Post/Unit: Geylang NPC

Geyland with No 135 have your Rose magapure 1800 s Tall 1800 satisfies

Original - to be issued to informant Duplicate- to be submitted to Traffic Police

Email: sgcarrentalsale@gmail.com

VEHICLE RENTAL AGREEMENT

| BIK 220A SUMANG LANE #13-85 S82122 (Address) (Mailing Address, if different from above) abdulcah man 220a @ gmail.com (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) 51804254A (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | mana mentan mentanian | t is made on the 2nd | day of SEPT 2019 | between |
|--|--|-------------------------------------|-----------------------|---------------|
| (Hirer or Company Name) (NRIC/UEN Number) (Nationality BIK 220A SUMANG LANE #13-85 582122 (Address) (Mailing Address, if different from above) abdulcah man 220a @ gmail.com (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) 51804254A (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | SG CAR RENTAL & SAL | ES PTE LTD | | |
| (Hirer or Company Name) (NRIC/UEN Number) (Nationality BIK 220A SUMANG LANE #13-85 S82122 (Address) (Mailing Address, if different from above) abdulcah man 220a @ gmail.com (Email Address) 9181 0 9 7 3 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S180 4 25 4 A (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | 66 Tannery Lane #01-0 | 3E SINDO INDUSTRIAL E | BUILDING Singapore 34 | 7805 |
| (Hirer or Company Name) (NRIC/UEN Number) (Nationality BIK 220A SUMANG LANE #13-85 S82122 (Address) (Mailing Address, if different from above) abdulcah man 220a @ gmail.com (Email Address) 9181 0 9 7 3 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S180 4 25 4 A (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | | | | |
| (Hirer or Company Name) (NRIC/UEN Number) (Nationality BIK 220A SUMANG LANE #13-85 S82122: (Address) (Mailing Address, if different from above) abdulcah man 220a @ gmail-com (Email Address) 9181 0973 27-03-1967 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S1804254A (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | ABDUL RAHMAN E | W PAKIRI MOND | S1804254A | SIM |
| (Mailing Address, if different from above) abdu/cah man 220a @ gmail.com (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S18042549 (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | Appropriate and the contract of | | /UEN Number) | (Nationality) |
| (Mailing Address, if different from above) abdu/cah man 220a @ gmail · Com (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S18042549 (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | 別K 220A SU | MANG LANE | #13-85 | 5821220 |
| (Mailing Address, if different from above) abdu/cah man 220a @ gmail · Com (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S18042549 (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | (Address) | | | |
| (Email Address) 9181 0973 (Mobile No.) (Home or Office Number) (Date of Birth: dd/mm/yy) S18042549 (Driver's License No.) (Class of License) Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | (Mailing Address IF 414 | | | |
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| S1804254A (Driver's License No.) (Class of License) Hereinafter referred to as the " <u>Hirer</u> " (and together with the Owner, the " <u>Parties</u> " a | abdulrah man 220a | | | |
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| Hereinafter referred to as the "Hirer" (and together with the Owner, the "Parties" a | abdulcah man 220a (Email Address) | @gmail.com | | _ |
| | abdulcah man 220a (Email Address) 91810973 (Mobile No.) | @gmail.com | | _ |
| | abdulcah man 220a (Email Address) 91810973 (Mobile No.) | @ gmail · Com (Home or Office Numb | | _ |
| | abdulcah man 220a (Email Address) 9181 0973 (Mobile No.) 518042549 (Driver's License No.) | (Home or Office Numb | per) (Date of Birt | h : dd/mm/yy) |
| nitial Company R | abdulcah man 220a (Email Address) 9181 0973 (Mobile No.) S18042549 (Driver's License No.) | (Home or Office Numb | per) (Date of Birt | h : dd/mm/yy) |

Page 1 of 23

Rental Agreement

[SG CAR RENTAL & SALES PTE LTD]

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| I | HE DRIVER (IF DRIV | ER NOT HIRER) | | |
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| R | ELIEF DRIVER | | | |
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Email: sgcarrentalsale@gmail.com

Page 15 of 23

[SG CAR RENTAL & SALES PTE LTD]

SCHEDULE 1

1) Vehicle Description

| Make & Model | Rental Plan | Colour | Registration Number |
|-------------------|-------------|--------|---------------------|
| VOLKSWAGEN | RENT TILL | WHITE | SLW 8899H |
| SETTA 1.4 TSI, AT | 05-11-2020 | WHILL | 21M 89 1411 |

2) Commencement Date and Minimum Rental Period

The Minimum Rental Period is 105-11-2020 weeks and commences on the 02-09-19 (being the date of collection of the Vehicle from the Owner by the Hirer.

3) Deposit

\$5000

4) Minimum Trips

The Hirer is to complete at least _____ trips per week

- 5) Rental Fee & Charges
 - a) The Standard Rental Fee per week is S\$350# (subject to Item 4(b) below)
 - b) Additional Rental Fee: If the number of Uber Trips per week is fewer than (), the Hirer shall pay an additional Rental Fee per week of \$\$______
 - c) Weekly Payment Fee: All weekly fental payments are due the following Wednesday at 17:00hrs and if the Wednesday falls on a Public Holiday then the due date will be the next working day at 17:00hrs.
 - d) Late Payment Fee: All outstanding payments after the above mentioned day will be subject to a late payment fee of \$\$60.
 - e) Cleaning Fee: <u>\$\$300</u>. Not limited to Cigarette odour.
- 6) Insurance Excess

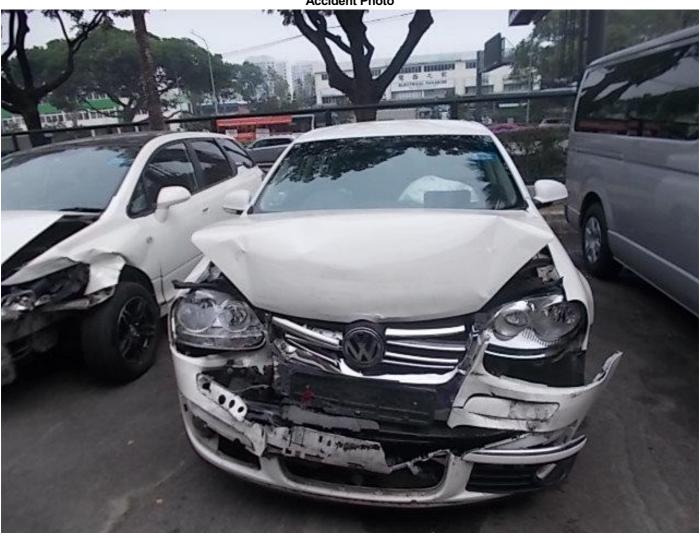
In the event of an accident, the Hirer is liable for the Insurance Excess payable for Section I (Own Damage) S\$ 1500=\ and Section II (Third Party Damage) S\$ 200=\

Hree's Initial

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Page 16 of 23













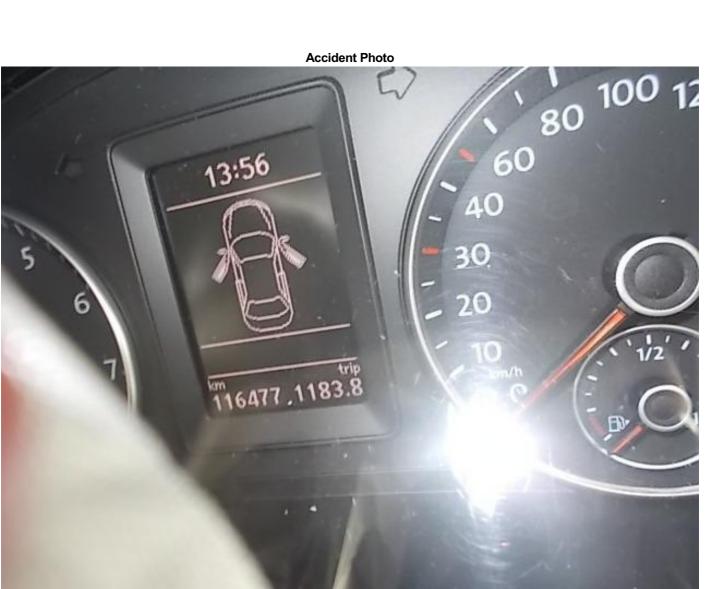


















Addendum Sheet



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: \$665500206 / GST Reg. No.: M400017735

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

ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : MNA119123695 Vehicle Registration No: SLW8899H Name(asshownin NRIC): SG RENTAL & SALES PTE LTD NRIC/FIN/Passport No : 201509693D (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate Address Singapore(Mobile No.: 85228855 Contact (Tel) **Email Address** 17/09/2019 Time of Accident: 23:50 Date of Accident Place of Accident : AIRPORT BLVD Insurance Company: NTUC Income Insurance Co-operative Ltd (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: Amend from own damage claim to reporting only.

Policyholder Driver's Signature Date: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.: Date:

GIARIVIC addendumform_V3