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 <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

aforesaid.	son to the distining of the report at the control and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	23/03/2020 17:16
Date Of Accident	04/12/2019 13:20
Exact Location Of Accident	ALONG ORCHARD ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGW1203X
Insured/Policyholder	
Name Of Registered Owner	ENRICH AUTO LEASING
Co Reg No	53366937E
Email Address	KH@CRAFTLEASING.COM
Mobile Phone No	
Alternative Phone No	OFFICE-93833162
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC-1.8 (A)
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA2194500
Cover Note Number	
Driver	
Name of Driver	HUSSEN BIN SANY

Name of Driver HUSSEN BIN SANY

NRIC No S6914847F
Date Of Birth 02/05/1969
Occupation OUTDOOR
Date Of Driving Pass 31/05/2012

Driving Experience 7 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87514817

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 53 MARINE TERRACE #09-237 Address

Postcode

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 NO 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

1

2

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

KINDLY REFER TO ATTACH POLICE REPORT NO.E/20200225/2039.

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

SLN9259X Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 23

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 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
- 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)
 - 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
- (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.

Priver uncontentable

Policyholde

Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

GIARMC SketchPlanForm V3

TEL: 6469554

SKETCH PLAN				
DESCRIBE CIRCUMSTANCES OF TH	E ACCIDENT t artached.			
mportant: You have been advised by the worksholaim against your own policy (OD CLAI) DAYS CLAUSE WHEREBY MUST BE MAI From the day of the occurrence.	M). There is a FOURTEEN (14)	V	- Reporting of Claim OD - Claim TP - Claim OD/1	Only P at other workshop
PECLARATION WE declare the foregoing particula	rs are true in every respect.			
AUTO EUTEL: ER P4695545 &	Dower uncontactable		Q	
olicyholder signature ate & Time	Driver's Signature (if driver not the policyholder) Date & Time		Reporting Centre Pe Name: Namic/Fin No	rsonnel's Signature

Nric/Fin No.





1 of 2

Report No. E/20200225/2039

POLICE REPORT (NP299)

Police Station Of Origin Bukit Timah N.P.C 1 Duke's Road SINGAPORE 268914 Tel No: 1800-4629999

Date/Time Report Made 25/02/2020 15:02	Vide Rep	oort No.		Station Diary No.	
Name Of Informant	Address		-	190	
TAN KOK HENG	13 FERN	13 FERNVALE CLOSE #03-17 RIVERBANK			
	SINGAPORE 797476				
ID Type / ID No.	Contact	Contact No.		,	
NRIC NO / S7824845I	RIC NO / S7824845I Home/Office		Mobile		
			93833162		
Nationality SINGAPORE CITIZEN	Email Ad	ddress			
Occupation	Sex	Age	Date of Birth	Race	
Company director	Male	41	30/08/1978	Chinese	
Institution/School Name	Languag	Language			
Date/Time Of Incident	Location	Location Of Incident			
25/02/2020 00:00	210 TURF CLUB ROAD THE GRANDSTAND				
	SINGAPORE 287995				

Brief details.

I am the director of Craft Leasing Pte Ltd (210 Turf Club Road, Lot C15A Car Mall). I am lodging this report for my company.

On 25 October 2019, I rented out vehicle SGW1203X Honda Civic to my customer, Hussen Bin Sany (S6914847F). The vehicle belongs to Enrich Auto Leasing but it is sub-let to my company to rent out.

Signature Of Officer Recording The Report:	Signature Of Informant:
E / Sgt 2 KAU SHI QI JOLENE	MANY
Signature Of Interpreter: Not applicable	Date/Time\ 25/02/2020 15:02
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Sgt 3 WONG KEE YCNG Contact No.: 63914731	Classification Of Case:
Authentication Stampsingapore POLICE FORCE SN 17	0
SIGNATURE	





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20200225/2039

I then received 2 letters from the insurance company, stating that vehicle SGW1203X has been involved in an accident. The accident happened along orchard road on 04 December 2019. I contacted Hussen multiple times to inform him to lodge an accident report with the insurance company. However, Hussen denied being involved in an accident and did not lodge any report with the insurance company. He also ignored my messages.

On 03 January 2020, I repossessed the vehicle as Hussen had owed me rental fees and did not pay me. Hussen has owed me 50 days of rental fee, charged at \$57.00 per day. The rental fee was stated in the vehicle rental agreement. I did not see any damage on the vehicle.

On 17 February 2020, I have received the third letter from the insurance company regarding the accident. I was advised by the insurance company to lodge a police report regarding the matter and to submit the report to them. I will be taking my own civil actions to collect the rental fees.

I am lodging this report for record purposes.

Signature Of Officer Recording The Report:	Signature Of Informant
E / Sgt 2 KAU SHI QI JOLENE	
Signature Of Interpreter: Not applicable	Date/Time: 25/02/2020 15:02
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Sgt 3 WONG KEE YONG Contact No.: 63914731	Classification Of Case:
Authentication Stamp SINGAPORE POLICE FORCE SN 1	70
SIGNATURE	1



210 Turf Club Road, Lot C15A Car Mall The Grandstand, Singapore 287995 Tel: 6484 4115 Fax: 6468 8156 Email: admin@craftleasing.com

	VE	HICLE RENTAL AGR	EEMENT	
(Owner)				
Name	: Craft Leasing Pte Ltd		UEN No.	: 201718381N
Address		Lot C15A Car Mall, The Grandsta 3468 8156, Email: admin@craftlea		37995
(Hirer)			<u> </u>	
Name	: HUSSEN BIN SANY	S6914847F	NRIC No.	: S6914847F
Address	: BLK 53 MARINE TER	TERRACE #09-237 Singapore 440053 Contact No. : 8751 4817		
Email	: hussenora69@hotma	rtmail.com		90857934 (70)8
(Relief Driver)				
Name	:		NRIC	;
Address	:		Contact No.	:
1. Commend	cement Date: <u>25-10-2019</u> Hire: From 25-10-2019	to 30-06-2022		
3. Rental Pa Week (pa 4. Upon sign (hereinaft)	nyment of SGD \$ 57.00 Peryable in advance) ("Due Ining The Agreement, The Ler referred to as "The Dep	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu posit")	ed at \$50 for ear rity deposit amor	ch and every payment due.
3. Rental Pa Week (pa 4. Upon sign (hereinaft PURPOSE	nyment of SGD \$ 57.00 Peryable in advance) ("Due Ining The Agreement, The Ler referred to as "The Dep	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu	ed at \$50 for ear rity deposit amor	ch and every payment due.
3. Rental Pa Week (pa 4. Upon sign (hereinaft) PURPOSE Per	nyment of SGD \$ 57.00 Peryable in advance) ("Due Ening The Agreement, The er referred to as "The Dep	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu posit")	ed at \$50 for ear rity deposit amor	ch and every payment due.
3. Rental Pa Week (pa 4. Upon sigr (hereinaft) PURPOSE Per	ayment of SGD \$ 57.00 Peryable in advance) ("Due Ening The Agreement, The Ler referred to as "The Depter Formal Usage	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu posit")	ed at \$50 for ear rity deposit amor	ch and every payment due.
3. Rental Pa Week (pa 4. Upon sign (hereinaft) PURPOSE Per	ayment of SGD \$ 57.00 Peryable in advance) ("Due Ening The Agreement, The Ler referred to as "The Depter referred to as "The Dept	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu posit")	ed at \$50 for ear rity deposit amor	ch and every payment due.
3. Rental Par Week (pa 4. Upon sigr (hereinaft PURPOSE Per Priv Oth	ayment of SGD \$ 57.00 Peryable in advance) ("Due Ening The Agreement, The Ler referred to as "The Depter referred to as "The Dept	er Day ("the Rental") for per Date"). Late Payment will be charg Hirer shall pay The Owner a secu posit")	ed at \$50 for ear rity deposit amor	ch and every payment due.

Sketch Plan Pg. 6



210 Turf Club Road, Lot C15A Car

Mall

The Grandstand, Singapore 287995 Tel: 6484 4115 Fax: 6468 8156 Email: admin@craftleasing.com

ROC: 201718381N

VEHICLE HAND OVER/ TAKE OVER FORM

This Form specifies the official hand over of the vehicle from Craft Leasing Pte Ltd to The Hirer. The Hirer hereby acknowledges receipt of the below mentioned Vehicle and agrees to be fully responsible for any fines, summons, fees or any claim arising from the below mentioned Vehicle effective from the Date and Time stated below.

Vehicle Registration Number	:	SGW1203X HONDA CIVIC	-
Vehicle Make And Model	:	HONDA CIVIC	
Hand Over Date And Time	:	7.30pm 25/10/2019	
Hirer Name	:	HUSSEN BIN SANY S6914847F	
Hirer NRIC Number	:	S6914847F	
Hirer Contact Number	:	8751 4817	
Hirer Signature	:		
For and on behalf of Craft Leasi	ng F	te Ltd,	
Name	;		
NRIC Number	:		
Contact Number	:		
Signature	:		
The Owner's Signature		Date	The Hirer's Signature
Mai		25-10-2019	4 21

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@axa.com.sg



CERTIFICATE OF INSURANCE

Account No.: 05522

■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)

CERTIFICATE NO. : VFX/P2194500

: Third Party Only Coverage

Sum Insured · NIL

Name of Policy Holder : ENRICH AUTO LEASING

Vehicle Registration No. : SGW1203X

Period of Insurance : From 09/10/2019 To 08/10/2020 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Named Driver(s) as stated in the Policy 1. ANY AUTHORISED DRIVER

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.

LIMITATIONS AS TO USE*

- (a) Use for the carriage of passengers or goods in connection with the Policyholder's business.
- (b) Use for social, domestic and pleasure purposes. The Policy does not cover

- Use for racing, pace making, reliability trial or speed-testing Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle

EXCESS :

Sect II-Used In Singapore Only : SGD 1,500.00

* 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).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOSFBA2 on 30/09/2019

IMPORTANT :

IMPORIANT:
Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 1801)

:Cover Under the policy is valid only upon the payment of the full premium stated on the policy. FOR INDIVIDUAL CUSTOMERS

FOR NON-INDIVIDUAL CUSTOMERS : Please refer to the Premium Warranty Clause on the policy



51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

17 FEBRUARY 2020

Hussen Sany

ENRICH AUTO LEASING 210 TURF CLUB ROAD LOT A-03 THE GRANDSTAND SINGAPORE 287995

Dear Sir/ Madam,

OUR REF : CO

: CC4/ASM19021738/Ugb3

YOUR REF : SGW 1203X

ACCIDENT INVOLVING SGW 1203X & SLN 9259X ALONG ORCHARD ROAD ON 04/12/2019

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a third party claim(s) from T K LEE AUTOMOTIVE acting on behalf of the owner of SLN 9259X against your motor insurance policy.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. You intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to vicalpeh@lkkauto.com within 7 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.



Auto Consultants Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to cst@axa.com.sg or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

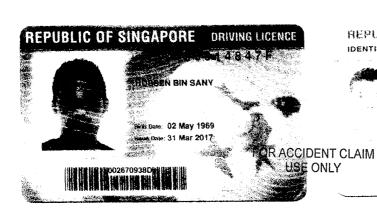
If you need any clarification, please do not hesitate to contact as at 6841 2928 or vicalpeh@lkkauto.com. Please quote our claim reference when you contact us that we can assist you more effectively.

92

Jasper Chua DID: 6841 2928 FAX: 6741 4108

Email: vicalpeh@lkkauto.com

c. AIG Asia Pacific Insurance Pte Ltd (Motor Claims Dept)



REPUBLIC OF SINGAPORE IDENTITY CARD NO. S6914847F



5674521



HUSSEN BIN SANY

MALAY Date of birth

M

02-05-1969 Country/Place of birth SINGAPORE

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

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 31 May 2012 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg Class 3

FOR ACCIDENT USE ONL

05-11-2016

APT BLK 53 MARINE TERRACE #09-237 SINGAPORE 440053

S8914847F NRIC No:

Date 28/06/2018

NP 428A

S751 A817





















