TIONAL Assessment Co	entre Services 🧠	ent : Janth.		1	
eln: 30/12/19	Jeb description		Date &Time Completed	Done l	À.
No NA/07:19022877/	//3 · SAS e-filing				
1 No 5/01720R	E-mail (within 8h	ars. AIC 2hrs;			
DA 28/12/19 12	35 i-Motor Claim	Form	1		
	i-Motor W/O (	(Within: QD 2hrs	s. TP 4hrs)		
TP (Reporting Only)	i-Photo Upload	ded			
f	Assessment/Sur	vey Report			
Insurer:	Ass't Report by	Fax / Hand t	o Owner/Wksp		
erred Wksp / INC Assign Wksp / QW	V: ( LAYA ut	~	Tel:	Fax:	
Particulars: Veh No:	SKN1381P	. INC(	)/Non-INC( )		
vner / Driver: (			Tel:	)	
licy No: (	Period: (	)	Cover Type: (	)	
Confirmed by : (	760-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-40-30-4	Date:	Time:	)	
sured/Driver Liability: (	%) [Note-Est. Status (W	O): N: 0-2	0%; P: 21-79%. F: 80	-100%]	
ear of Registration: (	) Warranty: YES (	)/NO(	)		
cess: (\$ ) Loading	: \$1,000 ( ) / \$2,000 (	)			
eral Remarks;-	Tall Control and Alaka		William Co.		
) Walk-In Customer : Customer	's information strictly Con	fidential & St	trictly NO refer of repaire	r.	
) Total Loss Case : to e-mail I		114	10000 000 000 000 000 000	<del></del>	
		0( ):7	Towing Co. (		)
ve-In ( )/ Towed-In ( ); In	nvoice: YES ( ) / No	0( );1	Towing Co. (		
arks:- (INC hotline: 6788 66	516)		Date&Time Completed	Done	by
pply for Transport Allowance (	) / Courtesy Car ( )				
C Check / Post Repair Inspection	( )				
pload Resurvey Photo [Repair Cos	st>\$3000] ( )				
ury:			S JOVENNA STATE OF THE STATE OF	V ( ) ( ) ( ) ( )	
Time Actions			A Pasterilla 100 s	Rijeki (Same)	
				17 10 10 10 10 10 10 10 10 10 10 10 10 10	
		Invoice Pro	eparation Checklist	Anit (\$)	Amt (\$)
NA2000304		1) AR : Acciden		. Ist Bill	Aug Off
Claimant's Particulars :-		2) DA : Damage	e Assessment (\$100); INC	(\$80)	
THE RESIDENCE OF A PROPERTY OF THE PROPERTY OF THE PARTY.		3) TF : Towing	Fee Through Survey	\$40/\$45 \$120	
			Through Survey (Resurvey)	\$30	
/Owner:	ontact No:		against JNC Only (wef 10 Jan 2	\$75	
/Owner:					
/Owner:		6) TR : Re-insp 7) N1 : Idac DA	A + SMRT Survey	\$160	
ct No:	- 1	6) TR : Re-insp 7) N1 : Idae DA 8) NTUC Addit	ection	\$160	
ct No:		6) TR : Re-insp 7) N1 : Idae DA 8) NTUC Addit OD*	A + SMRT Survey	\$160	
ct No:		6) TR: Re-insp 7) N1: Idae DA 8) NTUC Addit OD* *N5: Courter *N6: Repair	sy Car / Tpt Allowance Co-ordination	\$5 \$10	
/Owner: ct No: ged Portion: hecked by (Engr-In-Charge):		6) TR: Re-insp 7) N1: Idae DA 8) NTUC Addit OD* *N5: Courter *N6: Repair *N7: Fost Re	sy Car / Tpt Allowance Co-ordination	\$5	
ct No:		6) TR: Re-insp 7) N1: Idae DA 8) NTUC Addit OD.* *N5: Courter *N6: Repair *N7: Post Re *N8: DV / C TP (N11): T	sy Car / Tpt Allowance Co-ordination cpair Inspection collect Excess Coordination FP (Non INC) against INC	\$5 \$10 \$25 \$5 \$20	
/Owner: ct No: ged Portion: hecked by (Engr-In-Charge):		6) TR: Re-insp 7) N1: Idae DA 8) NTUC Addit OD.* *N5: Courte: *N6: Repair *N7: Post Re *N8: DV / C	sy Car / Tpt Allowance Co-ordination cpair Inspection collect Excess Coordination FP (Non INC) against INC	\$5 \$10 \$25 \$5 \$20 30	
ct No:		6) TR : Re-insp 7) N1 : Idae DA 8) NTUC Addit OD*	A + SMRT Survey		

#### 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.

aforesaid.		
AND THE RESERVE AND THE PARTY OF THE PARTY O	ACCIDENT STATEMENT	
Date Of Report	30/12/2019 15:45	
Date Of Accident	28/12/2019 12:35	
Exact Location Of Accident	NEAR TEMASEK PRIMARY SCHOOL	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJQ1720R	
Insured/Policyholder		
Name Of Registered Owner	LA RENTALS PTE LTD	
Co Reg No	2XXXXX059Z	
Email Address	JOEL@LAYOUTO.COM	
Mobile Phone No		

OFFICE-99999999

Alternative Phone No Vehicle Particulars

Manufacturer TOYOTA VIOS Model Exact Purpose for which vehicle was being used at GRAB time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

REPORTING ONLY If No, Please state action to be taken Vehicle Category PRIVATE HIRE

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage THIRD PARTY

NO Fleet Policy

DMHCSNA00000451900 Policy Number

Cover Note Number

Driver

OW-YONG LEH CHENG Name of Driver

NRIC No SXXXX021D 01/03/1959 Date Of Birth OUTDOOR Occupation Date Of Driving Pass 15/04/1980

39 YEARS AND 8 MONTHS Driving Experience

FEMALE

(LOCAL) +65-88287313 Mobile Number

Fax Number Contact Number

NOEMAIL EMail Address

Address BLK 423 BEDOK NORTH AVE 1

#05-204

Postcode 460423

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

\*

OTHER - HIRER

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?

Was any injured conveyed to hospital by

ambulance?

NO NO

YES

Was any other material or property damaged?

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

NO 2

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER: : FEMALE

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

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

SKN1381P

Vehicle Make/Model/Colour

Vehicle Registration Number

TOYOTA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

HATHEMI BIN RAHMAT

DETAILS OF OTHER VEHICLE PROPERTY 1

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

SXXXX570E

### 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.
- 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)
  - (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
- (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.
- (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 Date & Time: Driver's signature

(If driver is not the policyholder)

Date & Time: 30 Dec 2019

Reporting Centre Personnel's Signature

N 30/12/19

Name:

NRIC/FIN No .:

Policyholder's Signature

Date & Time!

(If driver is not the policyholder)

Date & Time: 30 Dec 2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

	ACCIDE	NT STATEMENT	
	C 12 2-1A		1) 35.
4C	CIDENT DATE DE 12 2017	DD/MM/YYYY). TIME:(.	(HH:MM)
Loc	CIDENT DATE 28/12/2019	1 sek frimany.	School.
	DETAILS OF VEHICLE		
	CIPCUCY NUMBER:	ing Tai Ring.	
	alPOLICY TYPE (COMPREHENSIV	E / THIRD PARTY / THIR	D PARTY FIRE & (HEFT)
	HTYPE (SALON / COUPE / MPV	/V AN / LAPRY / MOTO	PRCYCLE / OTHERS)
	g) VEHICLE CATEGORY: [PRIVATE   h) PURPOSE OF USING AT ACCIDE	COMMERCIAL / MOI	ORCYCLE)
	THE YOU CLAIMING UNDER YOU PARE YOU CLAIMING UNDER YOU	LY CLAIM / REPORTING	YES/ (Q)
2	ANAME: LA DETOLS CHE	Ltd.	(MALE / FEMALE)
	DINRIC/FIN/PASSFORT: 2083	FORGE CONT	93874666
	* CONTINUE TO 3.d IF DRIVER ALS	O POLICY HOLDER	
FIL of passenga	DRIVER	11 011010	
Cinclinding dewar	ONAME OW TONG LC	H CHENG	MALE FEMALE
(2)	DINRIC/FIN/PASSPORT: S/346	# DC-DOLL S	Enor 1174 ADEL
	CINODICIS BIN 123		(460423)
[	*dIDATE OF BIRTH: ( 01 / 03 /		
-	eJOCCUPATION: (INDOOR / OUT)		
	DYEARS OF DRIVING EXPRERIENCE	39 YEARS	
.4	WAS DRIVER AN EMPLOYEE OF		DANYS (VEC 1 (ID)
	IF NO, RELATIONSHIP OF THE	OTVED WITH INCIDE	a. Owner I Hiver.
15	DIWEATHER CONDITION: (CEAR)		0.00
	DIPOAD SURPACE A / WET / C	THER?	
	WAS ANYBODY MURED (YES /	)	1
7	A)REPORTED TO POUCE (YES /	5	
	IF YES, PLEASE STATE WHICH POL	07.07.17.0.1.	
g	THIRD PARTY VEHICLE	CESTATION:	
1 40 11 2	THROTARIT VEHICLE CKN	13811	Toyon Rau4
The state	THIRD PARTY VEHICLE Q KN  O) VEHICLE NUMBER: Path	MODEL	ladae Kant
CONTRA SECTION	OF DIESERS HAME THE	and Blu Kahwa	
1	C) NRIC/FIN/PASSPORT 216	24 240 CONT	(CI:
7.	THIRD PARTY VEHICLE		
	e) DRIVER'S NAME	MODEL	
	e) DRIVER'S NAME		
the following strength	1) NRICYPHYPASSPORT	CONTA	CT:

mail = joe (a) layouto.com.



## 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Hire Car

MZ406L/B

SN

AN0606A

# 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)

Cov. Type:T

CERTIFICATE No.

DMHCSNA00000451900

Cha. No :MR053HY9305110390

Engine No.: 1NZX894781

Index Mark and Registration

SJQ1720R

Number of Vehicle

2. Name of Policy Holder

LA RENTALS PTE LTD

Excess Sect. II

\$\$2,000.00

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

Excess Sect.II (Outside Singapore).

\$\$4,000.00

4. Date of Expiry of Insurance

09/12/2020

5. Persons or Classes of Persons entitled to drive"

As per Named Driver(s) stated below.

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.

ANY EMPLOYEE OF THE COMPANY

ANY AUTHORISED HIRER/DRIVER

6. Limitations as to use:"

(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

(1) Use for 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.

HIRE PURCHASE CO.: SING INVESTMENTS & FINANCE LTD AS HP OWNER

\* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Ho Li Hwa Irene

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 希 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

6222 1033

www.sg.cntaiping.com



# **Vehicle Details**

Vehicle No. SJQ1720R	Make / Model TOYOTA / VIOS G AUTO
Vehicle Type:	等 数字的全性的符合的形式的复数形式 计高级数
Z10 - Private Hire (Chauffeur) Motor Car	Vehicle Attachment 1 : No Attachment
Vehicle Scheme:	Chassis No.:
Normal	MR053HY9305110390
Propellant:	Engine No.:
Petrol	1NZX894781
Motor No.:	Engine Capacity:
	1497 cc
Power Rating:	Maximum Power Output:
	80.0 kW (107 bhp)
Maximum Laden Weight :	Unladen Weight:
1520 kg	1110 kg
Year Of Manufacture :	Original Registration Date :
2009	27 Apr 2009
Lifespan Expiry Date:	COE Category:
H.	A - Car (1600cc & below)
PQP Paid :	COE Expiry Date :
\$13,088.00	26 Apr 2024
Road Tax Expiry Date :	PARF Eligibility Expiry Date:
26 Apr 2020	*
Inspection Due Date :	Intended Transfer Date:
26 Apr 2020	31 Mar 2020
CO2 Emission :	CEV/VES Rebate Utilised Amount:
*	
CO Emission :	HC Emission:

TEL: 6466-5828 FAX: 6468-1179 UEN NO 201310521C

Rental Agreement Number:
27/28/101
This agreement is made on (Date)between (Name)LAY AUTO LEASING PTE LTI
(Registration No.) 201310521C a company incorporated in Singapore with it
registered officer at21 TOH GUAN ROAD EAST #01-16/17 TOH GUAN CENTRE SEORGO
(hereinafter called the "OWNER") which expression shall where the context so admits, include the
successor(s) in title and
called the "HIRER") in respect of the hire of the motor vehicle ("THE VEHICLE") for the period ("THE
PERIOD") at the rate of the hire rental ("THE RENTAL") set out in the schedule of this agreement ("THE SCHEDULE") and upon the terms and conditions stated hereunder.
SCHEDULE OF AGREEMENT
1 DARTICH ARC OF THE VEHICLE
1. PARTICULARS OF THE VEHICLE a. Make/Model : Toyoto VICE 1. TA
b. Registration Number : \$3017208
c. Chassis Number :
c. Chassis Number : d. Engine Number : OS ORY \QCORD
7
2. COMMENCEMENT
a. Effective Date :
2. COMMENCEMENT a. Effective Date b. Expiry Date : 21/03/20
2//03/10/0
3. HIRE RENTAL
a. Security Deposit : #500  -
b. Daily Hire Rates : 1445
c. Additional Charges : XY
4. DRIVERS
1st Driver
Name: Ow Yory Leh Chery.
D.O.B : 01/05/1959.
License No. ; \$12480210
Contact No. : 8828 7313 /9005 3544. (Mr a. 4by).
SIGNATORY OF HIRER: Quinnel . 1