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### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding of material facts may allow insurance companies to repudiate policy liability.
- 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. 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 affices aid.

ACCIDENT STATEMEN	l
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28/01/2020 10:45 Date Of Report 26/01/2020 22:30 Date Of Accident

PUNGGOL EAST TURNING RIGHT INTO PUNGGOL FIELD Exact Location Of Accident

SINGAPORE Country/State of Loss

### DETAILS OF OWN VEHICLE

SMD3146T Vehicle Registration Number

Insured/Policyholder

E-KARZ RENTAL PTE LTD Name Of Registered Owner

Co Reg No

EKARZRENTAL@GMAIL.COM Email Address

Mobile Phone No

OFFICE-68425988 Alternative Phone No

Vehicle Particulars

HONDA Manufacturer JAZZ Model

Exact Purpose for which vehicle was being used at PRIVATE USE

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 COMMERCIAL VEHICLE Vehicle Category

Insurance Company

MSIG INSURANCE (SINGAPORE) PTE. LTD. Name of Insurance Company

THIRD PARTY Type Of Coverage

YES Fleet Policy

A 28927339 MKF Policy Number

Cover Note Number

Driver

SEN LIN HUI Name of Driver SXXXX691E NRIC No 06/03/1990 Date Of Birth INDOOR Occupation 28/12/2010 Date Of Driving Pass

9 YEARS AND 0 MONTHS Driving Experience

FEMALE Gender

(LOCAL) +65-91147627 Mobile Number

Fax Number Contact Number

SENLINHUI@GMAIL.COM EMail Address

Page 1 of 14

12A HOUGANG ST 11 Address

#09-60 534074

Postcode

Was driver an employee of the Insured's Company NO

OTHER - HIRER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

SIDE SWIPE Type Of Accident CLEAR Weather Conditions DRY

Road Surface

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

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

NO

YES

NO

Number of Passengers (Including Driver)

Passenger 1

NAME:

: ELWYN

: MALE

GENDER:

**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

I WAS TRAVELLING FROM PUNGGOL EAST TURNING RIGHT INTO PUNGGOL FIELD. WHILE MAKING A RIGHT TURN VEH B CAME FROM PUNGGOL EAST OPPOSITE DIRECTION AND HIT ONTO MY FRT LEFT SIDE PORTION OF MY VEH

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

NOT RECORDED

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SMN126T

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

MUHAMMAD BASIL BIN KAADER MOHIDHEEN

NRIC/Passport Number

SXXXX985J

Contact Number

83444182

Address

Postcode

Page 2 of 14

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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 Jawyers/law lirms), 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:

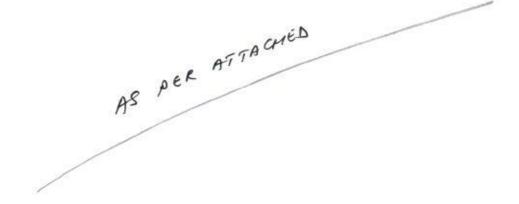
Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls report	the statement.	
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40.		
ECLARATION	1	

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:

Name:

NRIC/FIN No.:

# Google Maps Punggol E



© 2020 Google Image capture: May 2019

Singapore

Google Google

Street View

PUNGGOL EAST TURNING RIGHT INTO PUNGGOL FIELD



A - SMD31467 B-SMN1367



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65-6827-7888, Fax +65-6927-7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

### Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.400

COMMERCIAL VEHICLE - FLEET

Third Party

Cars for Hire

Certificate No. A 28927339 MKF

Excess: SGD2,000

1. Index Mark and Registration Number of Vehicle SMD3146T

2. Name of Policyholder

E-Karz Rental Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act 12/04/2019

4. Date of Expiry of insurance 03/04/2020

5. Persons or Classes of Persons entitled to drive\*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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\*

Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for social domestic and pleasure purposes.

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.

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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

> MSIG Insurance (Singapore) Pte. Ltd. Approved Insurers

> > for Chief Executive Officer \

nxt201904121156

18 Ubi Road 4 501-10 Ubi Car Mall Singapore 408616 Tel: +65 68425988 Fax: +65 68425377

Co Reg No.201608381M

## RENTAL AGREEMENT

HIRER'S PARTICULARS	VECHICLE NO. S'ND	3/46 7 Reg Date	
22 27 27 21	Make / Model , Hora	a Jazz 13a	
Name Ser Kin HHI	OUT Date 23/11/19	Time 11,20am.	
C/Passport No. 5 900 9691 E	IN Date	Time	
address Haugana Still BLK 12A			
#09-60 (5) 534074	Contract Date:		
	Contract Period:	6 months	
el	Rates	Amount Due	
91147627	Days		
riving Licence No. 390096918	Week	1 / / /	
ass Date	Month	\$1050/MONTH.	
ate of Birth 96/03/1990	Additional		
	TOTAL\$		
Name C/Passport No.	For Age Below 27, Above 65 or Pass Date 2 Years Or Less Hirer's Signature:		
Address	Personal Accident Insuran	GO J	
Address .	YES NO		
Driving Licence No. Pass Date Date of Birth  ADDITIONAL INFORMATION	Delivery Service  Collection Service	1/2 5/8 3/4 7/8 F 1/2 5/8 3/4 7/8 F	
L) NO MALAYSIA 2) PASS DATE LESS THAN 3 YEARS OR AGE BELOW 27 IS NOT ALLOWED	Others		
TO DRIVE	1		
PAYMENT MODE	Deposit \$ 500/-	(Refundable)	
Master Card/VISA		Lecared b	
Cash	Sub Total \$	10000	
Nets		- 170	
100	NETT AMOUNT \$	515501 bank	
I have read and agree to the terms and condition on both sides of this agreement.  I authorize E-Karz Rental Pte Ltd to process a credit card voucher if any for charges under this agreement.	Hirer's Signature  Add Driver's Signature	Jui	
All information I have given E-Karz Rental Pte Ltd in connection with	Rental out by	0 1	

Vehicle is rented to hirer upon terms and conditions on the front and back both sides of this agreement.

Vehicle is to be driven only by hirer and any additional driver listed above.

Hirer is responsible for all parking, fines and ERP charges.

Violation of the terms of this agreement makes the hirer responsible for the full losss or damage to the vehicle whether insurance is accepted or not.

A late payment penalty of \$20 per day in lapse until the full payment of all overdue amounts is collected.

If engaged Debt Collector, Hirer will be resposible for the admin charge of \$1000.

Vehicle is strictly for Singapore use, unless covered by insurance for Malaysia use.

Hirer is responsible for \$10,000 in cases where the vehicle is reported lost.

Return of rental car beyond the stated duration will incur the following charges:

1) Less than or equal to 2 hours 1/2 DAY charge will be incured.

More than 5 hours a FULL DAY charge will be incured.

3) \$250 will be charged if the car is filled with smoke -smell & \$20 will be charged if the car is too dirty.

E-Karz Rental Pte Ltd reserved the right to call/reprossess back or terminate the rental agreement or replace any vehicle to the above mentioned rented vehicle.

\*\*Kindly top up the petrol to the same level as time OUT before you return us the rental car. Otherwise, there will be charges added to your final bill\*\*

### Transaction ref 20191017115852117124

### Please check that the owner and vehicle details are correct:

1.	Name	: E-KARZ RENTAL PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 201608381M
4.	Country/Region	:-
5.	Vehicle Registration No.	: SMD3146T
6.	Previous Vehicle Registration No.	; <del>-</del>
7.	Effective Date of Ownership	: 15 Apr 2019
8.	Original Registration Date	: 25 Mar 2009
9.	First Registration Date	: 25 Mar 2009
10.	Vehicle Type	: R10 - Private Hire (Self-Drive) Motor Car
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	:-
14.	Attachment 3	£ -
15.	Vehicle Make Description	: HONDA
16.	Vehicle Model	: JAZZ 1.3L AT
17.	Year of Manufacture	: 2008
18.	Primary Colour	: White
19.	Secondary Colour	:-
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: JHMGE68509S215489 / -
22.	Propellant	: Petrol
23.	Engine No./Motor No.	: L13Z11015545 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 1339 / -
25.	Maximum Power Output(kW/bhp)	: 73.0 / 97
26.	Unladen Weight(kg)	: 1060
27.	Maximum Laden Weight(kg)	: 1540
28.	Open Market Value	: \$20,064.00
29.	PARF Eligibility	: Forfeited
30.	PARF Eligibility Expiry Date	1-
31.	Minimum PARF Benefit	1
32.	No. of Transfers	: 3