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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 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.
- 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

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26/03/2020 12:17 Date Of Report 25/03/2020 20:20 Date Of Accident

ALONG UPPER CHANGI RD EAST Exact Location Of Accident

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SMJ4817C Vehicle Registration Number

Insured/Policyholder

ASIA EXPRESS CAR RENTAL PTE LTD Name Of Registered Owner

Co Reg No

PEIJIE@EXPRESSCAR.COM.SG Email Address

Mobile Phone No

OFFICE-91998131 Alternative Phone No.

Vehicle Particulars

HONDA Manufacturer FREED Model

Exact Purpose for which vehicle was being used at WORK time of accident

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

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

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

THIRD PARTY FIRE AND/OR THEFT Type Of Coverage

NO Fleet Policy

DMHCSNA00001962000 Policy Number

Cover Note Number

Driver

CHONG CHEE HUAY Name of Driver

SXXXX225G NRIC No 10/04/1971 Date Of Birth OUTDOOR Occupation 20/04/1998 Date Of Driving Pass

21 YEARS AND 11 MONTHS Driving Experience

Gender

(LOCAL) +65-82855585 Mobile Number (LOCAL) +65-86166555 Fax Number

Contact Number

NOEMAIL EMail Address

Page 1 of 24

BLK 240 PASIR RIS ST 21 Address

#02-45

510240 Postcode

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CHAIN COLLISION

OTHER - HIRER

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

NO

ambulance?

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)

2

Passenger 1

NAME:

: UNKNOWN

GENDER:

: FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH WORKSHOP

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKP8223G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJB7831T

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)

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.
- 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:
 - 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: 26 (07) 20 20

10:200

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26 [03] 2020

10:30am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

STARTHC Section Plane Form_V3

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Sudden	y jam bi	rake. 1:00	unit Stop	in time o	st 6JB 7831T and Slightly
					hit the rear
			70		

DECLARATION

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

Policyholder s Signature

Date & Time: 26/03/2020

SIARRIK Sketch Par Form 30am

Driver's Signature

(If driver is not the policyholder)
Date & Time: 26 10312020

10:30am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date of Accident	: 25/05/2020 Accident Time: 20: 20 hs (24-HR-FORMAT)
Accident Place	: Along upper changi Road East
Vehicle Reg. No (Car plate No.)	: SMJ 4817c Vehicle Make/Model: Honda Freed
Insurance Company	: China Taiping Policy No. DMHCSNA00001962000
Name of Registered Owner	: Company / Individual Asia Express Car Rental Pte Ltd
ID of Registered Owner	: Co Reg No: 2011 6882D. Owner's NRIC No:
	: Co Contact No: 91998131 Owner's Contact No:
DRIVER'S Name	: chong chee Huay DRIVER'S NRIC No: 57/602256
DRIVER'S Date of Birth	: 10/04/197/ DRIVER'S License Pass Date 20/04/1998
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK 240 Pasir Ris St 21 #02-45 S(510240)
DRIVER'S Contact No./ Alt No.	:1) 8285 5185 2) 86166475
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)
Email Address	Peije @expresscar-com.sg
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Was the accident reported to the pol Was there any video Captured by ca	
Other	Party Driver's Particulars (if any)
Vehicle Reg No: SJB 7831 T	Vehicle Reg No: SKP 8 223 G
Vehicle Make\Model:	Vehicle Make\Model:
Name DRIVER:	Name DRIVER:
IC No. DRIVER:	
DRIVER'S Contact & add:	DRIVER'S Contact 6 - 11

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中国太平保险 (新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406L/B

N SN

BR0085A

Cov. Type:F

CERTIFICATE OF INSURANCE

otor 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.

DMHCSNA00001962000

Engine No.: LEB5616007

Cha. No.: GB71079796

1. Index Mark and Registration

SMJ4817C

Number of Vehicle

2. Name of Policy Holder

ASIA EXPRESS CAR RENTAL PTE. LTD.

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

Excess Section II

\$\$2,000.00

Excess Section II (Outside Singapore) S\$4,000.00

4. Date of Expiry of Insurance

24/03/2021

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

6. Limitations as to use.*

Use for the carriage of passengers or goods in connection with the Policyholder's business.
 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.: SKYWAY CREDIT & LEASING PTE 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: Gan Li Jia Jesca Authorised Officer

Authorised Signatory

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

C 6389 6111

₱6222 1033

www.sg.cntaiping.com

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nave extended the se said vehicle or shicle upon the si vehicle hired in nt or Replacemen Favordrive Car Rental 82 Geylang Lorong 23 #03-06 Atrix Singapore 388409

Vehicle Lease Agreement -

This VEHICLE LEASE AGREEMENT (hereinafter referred to as 'The Agreement' is

made on

Between

Favordrive Car Rental

(Business Registration No.: 53356674J)

Having its office at:

82 Geylang Lorong 23 #03-06 Atrix Singapore 388409 Hereinafter referred to as 'The Owner' of the one part

And

Name: Chong Chee Huay Nric No: S7160225G

Having his residential address at: Blk 240 Pasir Ris Street 21

#02-45, Singapore 510240

Tel. (Residential) : 8285 5585

Next of Kin Contact: 8616 6555 (Wife)

Hereinafter also known at the 'The Hirer' of the other part

Additional Driver

Name:

Nric No:

Having his residential address at:

Tel. (Residential)

Next of Kin Contact:

Hereinafter also known as the "Additional Hirer' of the other

Part

Hereby agrees that The Owner will lease to The Hirer and/or the Additional Hirer the vehicle with the below details, hereinafter referred to as 'The Vehicle" with the terms & conditions set out in The Agreement Contained herein: -

Lease Period - Renew Contract

The rental fee is hereby agreed between both parties at \$\$500 per week.

Make & Model: Honda Freed Registration No: SMJ4817C

Effective from: 11/03/2020 - 11/03/2021

Period: 12 Months Contract

BY SIGNING THIS AGREEMENT, YOU CONSENT TO US PROCESSING ANY PERSONAL DATA YOU DISCLOSE TO US (INCLUDING SENSITIVE PERSONAL DATA).

[The Owner's Initial & Stamps]

The Hirer and/or Additional Hirer Initial & Stamps

22-Feb-2020