

NATIONAL Assessment Centre Services. Print 1 Jan 2003

NR 2002 265

Date In: <i>06/09/2002 15:34</i>	Job description	Date & Time Completed	Done by
Ref No: <i>XBA/CP/200049734</i>	SAS e-illing		
Veh No: <i>SJS 8896H</i>	E-mail (By date 2hrs, AIC 2hrs)		
DOI: <i>20/03/2002 10/40</i>	I-Motor Claim Form		
OID: TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wkep / INC Assign Wkep / QW: () Tel: () Fax: ()

TP Particulars: Vch No: *SMA 6733C* INC () / Non-INC () Tel: ()

Owner / Driver: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks:

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

- Completed by: ()
- 1) Apply for Transport Allowance () / Courtesy Car ()
 - 2) QC Check / Post Repair Inspection ()
 - 3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Date: ()

<i>NR 2002 265</i>	1) ARI: Accident Reporting (\$30)		
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC (\$10)	
Contact No:	3) TP: Towing Fee	\$40/\$45	
Damaged Portion:	4) PT: Follow-Through Survey	\$120	
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30	
Additional Comments:	For claiming against INC Only (vsf 10 Jan 2003)		
Ref: 1:	6) TR: Re-inspection	\$75	
	7) NI: Idea DA + EMRT Survey	\$160	
	8) NTUC Additional Services:		
	OD:		
	*NS: Courtesy Car / Tpl Allowance	\$3	
	*NS: Repair Coordination	\$10	
	*NS: Post Repair Inspection	\$23	
	*NS: DV / Collect House Coordination	\$3	
	TP (NI): TP (Non INC) against INC	\$20	
	9) NI: Idea Mobile	\$0	
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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 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. 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	06/04/2020 15:34
Date Of Accident	20/03/2020 10:40
Exact Location Of Accident	CTE CITY AFTER PIE CHANGI EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ8896H
Insured/Policyholder	
Name Of Registered Owner	GO-RENT PTE LTD
Co Reg No	2XXXXX747D
Email Address	XDETOX32@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97820433
Alternative Phone No	OFFICE-97820433
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMHCSNA00000782000
Cover Note Number	
Driver	
Name of Driver	ROY LEE
NRIC No	SXXXX651C
Date Of Birth	14/04/1975
Occupation	OUTDOOR
Date Of Driving Pass	16/06/1999
Driving Experience	20 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97820433
Fax Number	
Contact Number	OTHERS-97820433
Email Address	XDETOX32@GMAIL.COM

Address	BLK 736 YISHUN STREET 72 #03-63
Postcode	760736
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	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?	NO
Was any injured conveyed to hospital by ambulance?	NO
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)	1

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

PLEASE REFER TO SKETCH PLAN

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	SMA6733C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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

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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**.
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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:
 - (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 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:

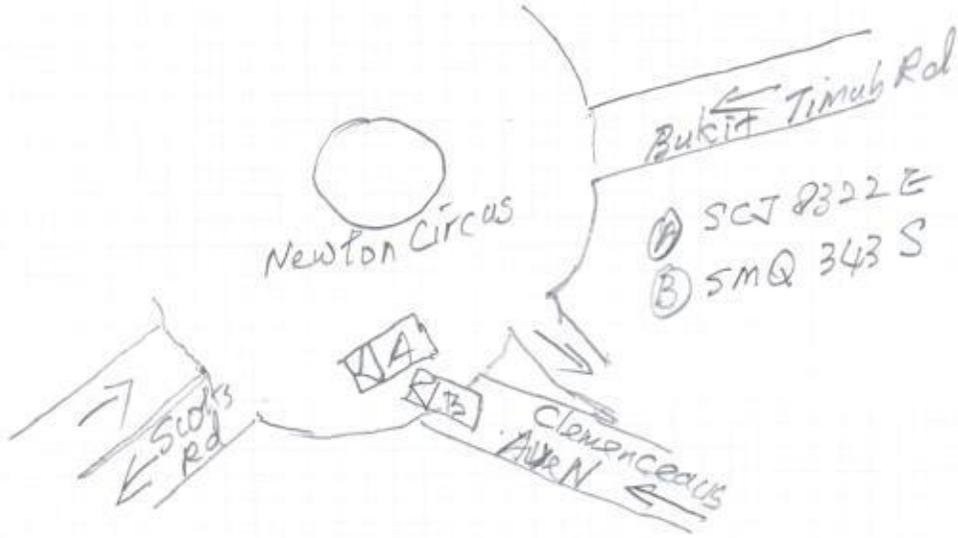


Driver's Signature
(If driver is not the policyholder)
Date & Time: 30/03/2020



Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 28/03/2020 AT ABOUT 22:45HRS I WAS AT BUKIT TIMAH DRIVING TOWARDS SCOTTS ROAD. WHEN I REACHED NEWTON CIRCUS, STOPPED AND PROCEEDED TO SCOTTS ROAD, ON THE LEFT INNER LANE, WHEN I PASSED CLEMENCEAU AVENUE, SUDDENLY A HARD BANG AT THE LEFT OF MY CAR. I STOPPED MY CAR AND FOUND HIT CAR SMQ 343S WHICH WAS FROM CLEMENCEAU AVE N. HIT ON THE REAR LEFT OF MY CAR SCJ 8322 E

VIDEO ATTACH

DECLARATION

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

Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time: 30/03/2020

[Signature] 30/03/2020
Reporting Centre Personnel's Signature
Name: Reski Mubhar
NRIC/FIN No.:

Date of Accident: 20/03/2020 Accident Time: 1045 (24-HR-Format)

Accident Place: CITY AFTER PIE CHANGE EXIT

Vehicle No. (Car Plate No.): SJJ8896H
~~China Taping~~ Make/Model: Honda Fit

Insurance Company: China Taping Policy No: DMHLSNA00000782000

Owner or Company Name / IC No: GO- Rent PTE Ltd 2018247470

Owner or Company Contact No: 9222 3331 Owner's Hp _____ Company Tel _____

DRIVER'S Name / IC No: Ray Lee 575106516

DRIVER'S Date Of Birth: 14 Apr 1975 DRIVER'S License Pass Date: 12 Aug 2016

Relationship of Owner & Driver: Spouse Parents Children Sibling Employee Others Rental

DRIVER'S Address: Blk 736 Yishun Street 72 #03-63 S(760736)

DRIVER'S Contact No / Alt No: 9782 0433

DRIVER'S Occupation: INDOOR INDOOR (e.g. working inside or outside office)

Email Address: xdetox33@gmail.com

Weather & Road Surface: CLEAR & DRY RAINING & WET AFTER RAIN & WET

Reporting Type: Reporting Only Claim Other Party Claim Own Insurance

Number of Passengers (Including Driver): 0

Was there any video captured by car camera: YES / NO

Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose

Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle No: <u>SMA 67336</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

Go-Rent Pte Ltd

Reg No. 201824747D

Office Address: 2 Venture Drive #14-28 Vision Exchange Singapore 608526

AUTOMOBILE LEASE AGREEMENT

Agreement No.: S5129

Agreement Date:

Lessor	Go-Rent Pte Ltd	ROC No.	201824747D
Address	2 Venture Drive #14-28 Vision Exchange S(608526)	Office No.	6904 8608

Lessee	Roy Lee	NRIC/UEN No.	S7510651C	Contact 1	97820433
Address	Blk 736, Jishen St #2 #03-63 S(760736)			Contact 2	
Email Address	Hoogster14@yahoo.com	Date Of Birth	14/4/1975	Contact 1	
Address				Contact 2	
Company				Occupation	
Co. Address					
Driving Pass Date		Driving Class		D.O.Birth	

Co-Lessee / GTR		NRIC/UEN No.		Contact 1	
Address				Contact 2	
Named Driver 2		NRIC/UEN No.		Contact 1	
Company				Occupation	
Co. Address					
Driving Pass Date		Driving Class		D.O.Birth	

DESCRIPTION OF VEHICLE (Personal/Private Hire)

Registration No.	SJJ 8896H	Colour	WHITE
Make / Model	Honda Fit 1.3A	Chassis No.	As logy CAR
Reg. Date	** (New / Used) As logy CAR	Engine No.	As logy CAR

TERMS OF RENTAL PAYMENT & PERIOD

Leasing Period	6 weeks	Deposit	\$500 Contact from previous Contract
Leasing Start Date	2/2/2020	1 st Rental Fee	\$336
Leasing End Date	15/4/2020	Weekly Rental Fee	\$336 weekly
Termination Charge	As Contract	Weekly Rental Due on	Sunday
Other Charges		Estimated Residual Value	

Remarks	
<p>1. Payment of deposit & 1st rental fee must be <u>cleared</u> upon collection of the car from Go-Rent Pte Ltd.</p> <p>2. Subsequent weekly rental fee can be made by telegraphic transfer to: <u>DBS : 072-003207-1</u> (with clear indication of the car registration number on remarks).</p> <p>3. In the event that the Lessee decided to cancel a reservation whereby a booking deposit has already been placed, there shall be no refund on the deposit collected. Strictly no refund after deposit.</p> <p>4. You shall pay Go-Rent Pte Ltd a late fee of 5% of the late weekly / monthly payment, and an admin charge of S\$25 for each late payment which is not paid within 2 days.</p>	

VEHICLE DELIVERY

Vehicle check out	Date	<i>Contact Customer</i>	Time	By:
Vehicle is due back	Date		Time	By:
Vehicle returned	Date		Time	By:
Late Return	Every late hour is chargeable at S\$10 for cars below 1600cc and below: S\$20 per hour for cars above 1600cc up to the 4 th hour. Further delays will result in the Lessee(s) being charged for a whole day rental for that particular vehicle.			

OTHER TERMS

Belonging	All belonging left in cars will be discarded.
Excessive wear & use	You may be charged for excessive wear based on our standard for normal use and for mileage in excess of _____ kilometer (Clause 7.1.10)
Insurance	Mandatory excess of S\$6000 before GST (in Singapore) in respect of each and every single accident. Mandatory excess of S\$8000 before GST (in Malaysia) in respect of each and every single accident.
Others	Shall you failed to make / clear any due payment to Go-Rent Pte Ltd and result in towing of the rental / leased vehicle, charges of towing fee, lost of keys charges, vehicle repair charges, admin fee etc will be charged.

By signing below, you acknowledge that you have read the entire Lease before signing it, and both you and we agree to the terms, conditions and obligation of the Lease.

Signed By Lessee	Signed by Lessor: Go-Rent Pte Ltd
X <i>[Signature]</i>	X <i>[Signature]</i>
Name / NRIC:	Name / NRIC:
X <i>Lim Lee</i>	
Name / NRIC: <i>S7510651/C</i>	



For Singapore Usage only.

Additional Premium for Malaysia Usage applies.

Only Applicable to Named Driver Stated In the Contract.

Vehicle must be washed and vacuum upon returned.

Smoking is prohibited in Vehicle. Penalty of S150 will be imposed if Vehicle is returned in such condition.



Motor Hire Car

MZ406UB

N SN

AN0214A

Cov. Type:T

CERTIFICATE OF INSURANCE
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMHCSNA00000782000	Engine No.: L13A4083860	Chs. No.: GE61078506
1. Index Mark and Registration Number of Vehicle	SJ6690H		
2. Name of Policy Holder	GO-RENT PTE. LTD.		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or enactment	30/01/2020	Excess Sect. II	S\$3,000.00
		Excess Sect. II (Outside Singapore)	S\$4,000.00
4. Date of Expiry of Insurance	29/01/2021		
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 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.			
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169 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 169) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Suet Lay Selly
Authorised Officer

杨西美
Authorised Signatory