NATIONAL Assessment Contro	Services :	' ' Jarros;	y 2			
Date In: 16/04/20	Job description			Time Completed	Done	pì.
Ref No. NA/A1620005059/13	SAS e-filing				-	
Veh No. SKW29804.	E-mail (within Shes	, AIC 2hrs)	i i			
D.O.A: 31/12/19 2030.	i-Motor Claim	Porm	1			
OD : TP : (Reporting Only)	i-Motor W/O (W	/Ithin: OD 2hrs.	TP 4hrs)			
Copyring City	i-Photo Uploade	ed				
TP Insurer:	Assessment/Surve	y Report	i		1	
	Ass't Report by F	ax/Hand to	Owner	Wksp		
Preferred Wksp / INC Assign Wksp / QW: (N-51		Tel:		Fax:	
TP Particulars: Veh No: S	208485A	, INC ()/No	n-INC ()		
Owner / Driver: (Tel:)	
	iod: ()	Cover	Гуре: ()	
Confirmed by : (Date:		Tlme:)	
	ote-Est Status (WO		%; P:	21-79%. P: 80-	100%]	
		/NO())			
Excess: (\$) Loading: \$1,00)				
General Remarks:						
() Walk-In Costomer: Customer's inform		ential & Stri	ctly NO	rafer of repairer.		
() Total Loss Case : to e-mail Insurer						
Drive-In ()/ Towed-In (); Invoice:		(); To	wing C	0, ()
Remarks: (ING horling: 6788 6616)			Dates	lino Complesso	Done .	бу
1) Apply for Transport Allowance ()/Co	ourtesy Car ()					
2) QC Check / Post Repair Inspection	()					
3) Upload Resurvey Photo [Repair Cost > \$30	000] ()					
Injury:						
Date/Time Actions () 2 2 2 2 2 2	CHAMACUM PASSOZZAK	AND PARTIES	15488AT	Santa Albert	THE RESERVE AND ADDRESS.	-
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lumant's Particulars :-	27/ 20/20/20/20/20/20/20/20/20/20/20/20/20/2	AR : Accident	Reporting	(\$30);	68-17-15-11	
		DA : Damage A			40/\$45	
Driver/Owster:	4)	FT : Follow-Th	rough Sur	vey vev (Resurvey)	\$120	
Contact No:		For claiming ag	ainst INC	Only (wef 10 Jen 200		
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at. 1:		TP (N11) : TP N12: Idao Mob		against INC	30	
al. 2/3;	In	voice dated		Fee Charges	THE RESERVE AND ADDRESS.	15.16
	1 In	value dated	1	Fee Charges		

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.

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.

ACCI	DENT		-	
ACCI	DENI	SIA	EW	ENI
	The second second		_	_

Date Of Report 16/04/2020 09:26 Date Of Accident 31/12/2019 20:30

Exact Location Of Accident SHEARES AVE RIGHT TURN INTO SHEARES LINK

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKW2980G

Insured/Policyholder

Name Of Registered Owner TWINCAR LEASING PTE LTD

Co Reg No 2XXXXXX046C Email Address NOEMAIL

Mobile Phone No

Alternative Phone No. OFFICE-83802233

Vehicle Particulars

Manufacturer TOYOTA ALTIS

Exact Purpose for which vehicle was being used at WORKING

time of accident

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

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

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy YES Policy Number 999994017

Cover Note Number

Driver

Name of Driver TAN HOCK CHYE NRIC No SXXXX025A Date Of Birth 01/09/1963 Occupation OUTDOOR Date Of Driving Pass 11/10/1983

Driving Experience 36 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93625511

Fax Number Contact Number

EMail Address NOEMAIL

BLK 231 BUKIT BATOK EAST AVE 5 Address

Postcode 650231

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

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions UNKNOWN Road Surface UNKNOWN

Other Information

Was any foreign vehicle involved in this accident?

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 YES

Was any other material or property damaged?

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? Was there any audio recorded?

NO

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLQ8485A

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

- 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:
 - 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:
 - 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 Date & Time:

The

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

We after to above mentioned autilist dutied on 31/12/2019.

Histor is one: Tan Hock and of NEICAN SIBOIDASA

Address: Bir 281 Billet Batok East Die 5, dt 05-74 S(650381)

When actived small from our insurance impains Alla we raised thiser in regards to the above actaint and aquested thiser to come to us for appling purposes thorum, stires refused to come over any make any actaint report. Hence, we have no token on how the audient trapper. Histor also informed us to direct any aliant to him directly.

DECLARATION

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

Policy Date Standard On N. N.

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

Name: NRIC/FIN No.:

Vehicle No.	SKW 2990 G Model/Make Gapta AMS
Date of Accident	31/12/2019
Time of Accident	8.30pm HRS
Location of Accident	sheares we right turn sto sheares link
Exact purpose use during acci	dent produce three use
Name of Owner	11000
Telephone No.	H/P: 8330 223 Home: Office:
NRIC	301533046C
Address	2, Kaki Bikit Ave Z, #01-17, 5(4)7924)
Claim type	OD THIRD PARTY (REPORTING ONLY)
Insurance Company	A14
Type of Coverage	Comprehensive Third Party Third Party / Fire /Theft
Policy No.	9999940H
. oney ive.	7 19 1740 17
Name of Driver	As Above If No. Too Hack Chas
NRIC NRIC	1100-100
Date of birth	SIBO1025A Any Passengers: Untrain
Occupation (Outdoor / Indoor
Driving License Pass Date	
Gender /	Male) / Female
Contact No.	
Address	H/P:93625511 Home: Office:
	BIK 231, BUKT Batok Ever Ave 5, 405-71, 5(65023)
Driver have any own vehicle	No, If yes, Reg No.
Relationship Weather condition	Employee, If no, state Hira
Road Surface	Clear Raining Other www.
	Dry Wet Other wasser
Any Injuries	No, If Yes, Who?
Name And Contact No.	
Name And Contact No.	
Police Report	No, If Yes, Where?
Vehicle B No.	SLQ 8H85A Any Passengers :
Name of Driver	Contact No. :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No.	Any Passengers :
Witness Name	Witness Contact :
Accident Portion	Chrosen
Camera Recorder	Yes /(No)
Email Address	twincar rental @ 151.10m. sq
PARTICULAR WORKSHOP	15) O b ove old
	NSI Artonatik PL
CONTACT DEPSON	6842 0051 / 6744 0510
CONTACT PERSON	Hux=
FAX NO WORKSHOP EMAIL ADDRESS	6741 0510 Sales @ n51. com. sg



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) AND ROAD TRASPORT (AMENDMENT) ACT 2019

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

MZ.400

THIRD PARTY

COMMERCIAL MOTOR

POLICY EXCESS

REFER TO ITEM 5

CERTIFICATE NO.

SKW2980G

WINDSCREEN EXCESS

NA

(The below excess is subject to GST)

POLICY NO.

999994017

SUM INSURED

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

INSURING WITH COE/PARF SKW2980G

TWINCAR LEASING PTE LTD

NA

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

19 October 2019 18 October 2020

4) DATE OF EXPIRY OF INSURANCE

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE

Any person who is driving on the Insured's order or with their permission

S\$1,500.00 Section II Excess is applicable for driver who is between 23 years to 70 years old with minimum 2 years driving experience. An additional section II excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

Approved N-51 Automotive Pte Ltd to be your accident claim reporting center base on condition that all claim matters do not involving in any lawyer services.

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.

6) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for fuition, driving test, racing, pace-making, reliability trial or speed-testing, 2) Use whilst drawing a trailer excite towing (other than for reward) of any one disabled mechanically propelled vehicle, 3) Use for any purpose in connection with the Motor Trade

It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.

> LOSS OF USE HIRE PURCHASE COMPANY

> > **ORIGINAL**

Not Included

*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) and Road Transport (Amendment) Act 2019, 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) and Road Transport (Amendment) Act 2019.

Issued in Singapore 26 Sep 2019

AIG Asia Pacific Insurance Pte. Ltd.

Swift Link Insurance Agency - 502117 61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

AUTHORISED REPRESENTATIVE

SSPOEC



Twincar Leasing Pte Ltd <twincar.rental@n51.com.sg>

AIG ref: 7809089390SG-003, accident involving SKW2980G and SLQ8485A on 31 Dec 2019

3 messages

Loh, Chee-Heng <Chee-Heng.Loh@aig.com>
To: "twincar.rental@n51.com.sg" <twincar.rental@n51.com.sg>

Tue, Mar 17, 2020 at 2:06 PM

Insured vehicle: SKW2980G

Dear Sir/Mdm.

We have received property damage claim from SLQ8485A.

The third party reported accident details as below.

Date and time of accident: 31 Dec 2019 @8.30pm

Location: Sheares Ave right turn to Sheares Link

We noted that your hirer has not reported the accident. Kindly assist to make an accident report at any of the Approved Reporting Centres in order for us to handle the claim. Kindly let us know via reply this email when the report has been made.

Thank you.

Best regards,

Loh Chee Heng AIG Senior Complex Claims Examiner Claims | AIG Asia Pacific Insurance Pte. Ltd

AIG Building, 78 Shenton Way #08-16 Singapore(079120) Tel +(65) 6419 1881

Chee-Heng.Loh@aig.com | www.aig.sg



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Loh, Chee-Heng <Chee-Heng.Loh@aig.com>
To: "twincar.rental@n51.com.sg" <twincar.rental@n51.com.sg>

Tue, Mar 31, 2020 at 2:26 PM

Dear Sir/Mdm,

We noted that your hirer has not reported the abovementioned accident.

Kindly inform your hirer to make an accident report in order for us to handle the claim. Please let us know when your hirer has made the accident report.

Thank you.

Best regards,

Loh Chee Heng AIG Senior Complex Claims Examiner Claims | AIG Asia Pacific Insurance Pte. Ltd

AIG Building, 78 Shenton Way #08-16 Singapore(079120) Tel +(65) 6419 1881

Chee-Heng.Loh@aig.com | www.aig.sg

[Quoted text hidden]

Loh, Chee-Heng <Chee-Heng.Loh@aig.com>
To: "twincar.rental@n51.com.sg" <twincar.rental@n51.com.sg>

Mon, Apr 13, 2020 at 10:59 AM

 $https://mail.google.com/mail/u/1?ik=6d32c49728 \& view=pt \& search=all \& permthid=thr... \quad 15/4/2020 \\$

Dear Sir/Mdm.

We noted that your hirer has not reported the abovementioned accident.

Kindly inform your hirer to make an accident report before 27/4/2020 in order for us to handle the claim. Otherwise, we would have to repudiate all liabilities and there will be no coverage for the accident.

Thank you.

Best regards.

Loh Chee Heng AIG Senior Complex Claims Examiner Claims | AIG Asia Pacific Insurance Pte. Ltd

AIG Building, 78 Shenton Way #08-16 Singapore(079120) Tel +(65) 6419 1881

Chee-Heng.Loh@aig.com | www.aig.sg

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TWINCAR LEASING PTE LTD

Company Registration Number: 201533046C 2 Kaki Bukit Avenue 2 #01-17, Singapore 417921 Tel: 67440510 Fax: 67410510 email: twincar.rental@n51.com.sg



VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULAR		Vehicle Make:		KW2980G					· · · · · · · · · · · · · · · · · · ·
Name(as in I/C): TAN HOCK CH		1772 E100		LLA ALTIS		1-8000	2000 00 2 0000		POTAGE COT
NRIC/PASSPORT No: S1601025A Address(Res): BLK 231 BUKIT BATOK EAST AVENUE 5 # 05-71 S 650231				LLA ALII	5				p: AUTO
						Col	lour: SII	VER	
Occupation: Driver	Driving Exp:420	Mileage		0.40.00		****			
Driving License No: S1601025A		0.00000		8-10-08		Tin	ne: 10:3	BAM	
Issue Date: 1983-10-11	Date of Birth: 1963-09-01	E E E E E E E E E E E E E E E E E E E		R EXCESS:					
Tel: (HP) 9362 5511		Section	: \$20	00		Sec	tion2: \$	2000	
Email: WENYINGG1999@GMII		CHARG							
ADDITIONAL DRIVER'S PARTIC	CULARS	CHARG							
Name(as in I/C):		Daily ra	e			-			SGD 63.00
NRIC/PASSPORT No:		DECEMBER OF							
Address(Res):		PETROI							
Occupation:	Driving Exp:	Out	E	1/4	1/2	3/4	F		1/4
Driving License No:	D/LType:	In	E	1/4	1/2	3/4	F		E
Issue Date:	Date of Birth:			essories)					
VEHICLE CHECKLIST	1,000,000,000,000,000	Collection	n Ser	vice					
B - DENTS S - SCRATCHES		Rental T Start Da End Dat	erm te	sit Collect					Cash 2018-10-08 2019-04-08
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A - ACCIDENTS A - ACCIDENTS BORN THEIR T	NT TOP	LEFT	THE STATE OF THE S		an Ho sibo	ice Chy	KA		
ACCESSORIES CHECK		Addition	Drive	r's Signatu	ire:				
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CD/ Radio Player 🕡 R	everse Camera 🗹 Camera Record	der							
2		3030							

ead and agreed to the terms & conditions on both sides of this agreement. All information I have given TWINCAR LEASING PTE LTD in ction with this agreement is true.

IMPORTANT

YOU HEREBY EXPRESSLY CONSENT AND AUTHORIZE TWINCAR LEASING PTE LTD AND GRABCAR TO DEDUCT FROM THE FARES GENERATED BY YOU AND/OR GRATUITY GRANTED TO YOU BY GRABCAR (IF ANY) FOR THE CAR RENTAL FEE AND ANY CHARGES PROVIDED HEREIN AND IN THE EVENT THAT THE FARES ARE INSUFFICIENT, ANY BALANCE SHALL BE PAID TO US IMMEDIATELY. THESE CHARGES SHALL INCLUDE BUT ARE NOT LIMITED TO CHARGES FOR 1.CAR RENTAL 2. COST OF INSURANCE EXCESS, REPAIRS, REPLACEMENT OF PARTS TO THE CAR AND/OR DAMAGES TO THIRD PARTY PROPERTIES WHERE THE DAMAGES ARE DUE TO YOUR ACTIONS OR LACK OF CARE 3. ANY UNSETTLED SUMMONS, FINES, PARKING CHARGES AND TOLL.
 THE VEHICLE SHALL BE RENTED OUT ON A DAILY BASIS, WITH A MINIMUM RENTAL PERIOD OF SIX MONTH.
 IN THE EVENT THAT THE HIRER RETURN THE VEHICLE PRIOR TO THE END OF THE MINIMUM RENTAL PERIOD, THE HIRER WILL BE REQUIRED TO PAY THE FULL RENTAL FEE APPLICABLE FOR THE REMAINING PERIOD UP TO THE END OF THE MINIMUM RENTAL PERIOD.
 ONLY PERSONS ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORIZED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
 ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRED. AN ADMINISTRATIVE CHARGE WILL BE APPLICABLE WILL BE APPLICABLE.

ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON TRAFFIC VIOLATIONS REDIRECTED.

IN THE EVENT OF AN ACCIDENT, THE HIRER SHALL BE LIABLE FOR THE INSURANCE EXCESS OF SECTION 1 (OWN DAMAGE) AND SECTION 2 (CLAIM BY 3RD PARTY).

(CLAIM BY 3RD PARTY).

IN CASE OF ACCIDENT THE HIRER SHOULD REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.

THE VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TWINCAR LEASING PTE LTD.

AN ADDITIONAL EXCESS OF \$2000 OF ALL CLAIM WILL APPLY FOR VEHICLE USE OUTSIDE SINGAPORE AND \$3000 FOR AGE ABOVE 68. THE HIRER SHALL NOT USE THE VEHICLE FOR ANY OTHER COMMERCIAL ACTIVITY OTHER THAN SOLELY FOR THE PURPOSES OF PROVIDING TRANSPORTATION SERVICES REQUESTED BY GRABCAR USERS VIA GRAB APP. FAILING WHICH, WE RESERVE THE ABSOLUTE RIGHT AND OPTION TO TERMINATE THIS CAR RENTAL AGREEMENT, FORFEITING YOUR DEPOSIT, AND YOU SHALL BE REQUIRED TO RETURN THE CAR IMMEDIATELY AND YOU SHALL CONTINUE TO BE LIABLE FOR RENTAL DUE FOR THE REMAINING RENTEL TERM.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER	