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#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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 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 aforesaid.

aforesaid_	
coloni in an antique la coloni de la colonia	ACCIDENT STATEMENT
Date Of Report	23/07/2020 11:55
Date Of Accident	22/07/2020 15:00
Exact Location Of Accident	T-JUNCTION OF UBI AVENUE 1 BEFORE UBI AVENUE 2
Country/State of Loss	SINGAPORE
De la companya de la	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBD6894C
Insured/Policyholder	
Name Of Registered Owner	SKYLINK VEHICLE RENTAL PTE LTD
Co Reg No	2XXXXX755G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96638805
Alternative Phone No	OFFICE-67837013
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO

Policy Number DMCVSNA00057092000

Cover Note Number

#### Driver

 Name of Driver
 TAN ENG CHE

 NRIC No
 SXXXX795C

 Date Of Birth
 25/12/1962

 Occupation
 OUTDOOR

 Date Of Driving Pass
 06/07/1983

Driving Experience 37 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96638805

Fax Number

Contact Number OFFICE-67837013

EMail Address NOEMAIL

Address

BLK 718 TAMPINES STREET 72

#07-61

Postcode

520718

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?

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)

NO

soliciting/offering accident claims assistance. 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?

YES

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SGR9090C

Vehicle Make/Model/Colour

HONDA CRV

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

TAN JOO KWANG

NRIC/Passport Number

SXXXX133G

Contact Number

87798922

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

### IMPORTANT NOTICE

- 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 misrapresentation or withholding 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Monagament 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
- 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:

- 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 vahicle(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 angulries 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 peckages); 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.
- 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 daims.
- (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:

Mame

HRIC/FIN No.:

A: GBD 6894C

B: 56R909DC

SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 17/20 ON The 22 around / was stopp. ehicle B SGR9090C Juxtion partion. Vehicle DECLARATION I/We declare the foregoing particulars are true in every respect. AN Policyholder's Signeture Orlver's Signature (If driver is not the policyholder) Date & Time: 22/07/2010 Date & Time: NRIC/FIN No.: 22.7.2020 1605ARS STARAGE MERCAPION FORM VR





### SKYLINK VEHICLE BENTAL PTE LTD

21 Teh Gues Read East 401-12 Teh Gean Centre (5160)seas Tel: +65 6266-5838 - Fax: +33 8266-5832 www.skylinkauto.com.up. Co Rep 531 No 201710151G

# LEASING AGREEMENT

Date of Agreement Monday, 09 Sep 2019 Agreement No. : SC19/0415 HIRER PARTICULAR Name CERTIS CISCO SECURITY PTE LTD Contact Person LEE ENG YEOW NRIC/ ACRA No. : 200410167W Mobile Number Address 20 JALAN AFIFI, CERTIS Office Number CISCO CENTRE 1. Fax Number Emall Address RENTAL DESCRIPTION CONTRACT PERIOD Make/Model NISSAN NV200 1.5L MT ABS AIRBAG 2WD 6 Total Duration 2 Year(s) Description Start Date 17-SEP-2019 End Date 16-SEP-2021 Upper Structure Attachment : No Attachment PAYMENT TERM Accessories & **Services** Deposit \$0.00 Rental/Lease Rate : \$890.00 Per Month Vehicle Plate No GBD6894C G5T 7% \$62,30 Engine No : K9KC400D054158 Sub-Total Rental \$890.00 Chassis No. : VSKYBAM20Z0092352 Payment Term

Remark:

Late payment fee of 5% per month on prevailing monthly rental rate applicable for any late payment

	INSURANCE COVERAGE INSIE	E SINGAPORE		
Driver's Age 8/or Driving Experience	Above 26 Year Old & 2 Years Exp	perience   Below 76 Year Did 8	Y Marine Francisco	
Dwn Damage Excess (Section ()	\$750.00		Below 26 Year Old & 2 Years Experience	
ard Party Excess (Section II)	- Andrewsking -	\$750.00	\$750.00	
\$750,00		\$750.00	\$750.00	
Additional Own Damage Excess	NCE COVERAGE OUTSIDE SINGAPORE	(APPLICABLE TO ALL DRIVERS)		
Positional Own parrage Excess	NA NA	Additional 3rd Party Excess	7848	

\$952.30

Authorised Driver: Only Registere Drivers/ Employees of Hirer (Please furbish us copies of all Drivers' Licencses and Ics)

#### IMPORTANT NOTE

- I The above quote is subjected to approve study availablely trans and government regularities
- Rate diversify module usage subset (INCARON), additional stages upply to usage outside Segregory Cultural to proving appropria
- Address rental varies include vehicles replacements (subject in assessibling), reset table additions 34/1 and new type change once annuality.
- 8. Remarkation on holds we have remarked in contrast and another contrast, containing and repair size for wear and few (point or of bytes and that between non-reflected). Use of key required not note of well-less and among her take do not continue as broad them and any respective sensions encount after the management of the transport of the trans
- registered with the Owner, reservoish to data. No PALL cast of reper and/or the full voice of the votice and/or are other associated brown afferred to the Owner.
- is, in the most of default payment, the Dester has the absolute rights to repossesses the vehicle without provinces. The Hirer shall be liable for left payment has of 3% per month on prevailing monthly rental sale. and/or representative of each less than \$500,00 and/or any other executated used the initialized
- 7. The Myor shall arouse that the seriode is, not used for any purposes which surface with the Law or connection with made may providing or distributing, changing end the way other communication. Similarly the website for purplicated by the authority, like protocoment agency and/or are organization that is sufficiently the refer that independs the Control that is discussed to protocomen agency and experience that is a control of the public type at other accounted costs and experience.

cle Rental Pte Lt

- 6. Driven must been proper there and mouse sufficient water his tectural & origins in all service of all services. If the vehicle breakdown must be reproper uses, look of the analysis registers; the been shall been sufficient expensions.
- If Vehicles returned after \$40% (for dark rental) or after light shall be considered as enlittored are more tary lendal.
- 30. The Print shall at all times, one print the recommended grade of him and lubrated as specified by the orbital annual actions. Falling when any recollect demanges to the induce of all defauring by the new

Approved By (Manager)

byect to change without minner. Severa vigitally Rendal Pro Lot renetwer this right to Change or modely the

201710755

Prepared By (Sales)

Skylink Vehicle Rental Pte Ltd

Name GARYTAN Designation

Name

Designation

Agreed & Accepted By HIRER

Customer SIGN & CHOP

Name CERTIS CISCO SECURITY PTE LTD Designation



# SKYLINK AUTO GARAGE PTE LTD

# ACCIDENT REPORT

SECTION A - TO BE COMPLETED BY I	DRIVER WHO INVOLVED IN THE ACCIDENT
DATE & TIME OF ACCIDENT: DATE 32 7, 20	1400
DATE & TIME OF REPORTING: DATE 33. 7. 30	120. TIME 160+
PLACE OF ACCIDENT: UB/ AVA	T JUNICTIONS.
VEHICLE REG NO. 488 6894C	MAKE/MODEL N/SSAN X/V -)OD
PURPOSE OF USE AT TIME OF ACCIDENT: GOODS TRAN	(SPOPTATION / PRIMATE VISION /
REN/AC.	
NAME: TAN ENG CHE	NRIC/FIN NO: \$1545795C
ADDRESS: BU 118 1 MM MINES S	172 #67-61
POSTCODE: 520718	DATE OF BIRTH: 25. 12.1962
CONTACT: HOME 6783 7013 OFFICE	HANDPHONE 96638805
EMAIL:	GENDER: MALE / FEMALE
OCCUPATION: TECH	OUTDOOR / INDOOR
YEARS OF DRIVING EXPERIENCE: 19	LICENCE DATE OF ISSUE: 06.07.1983
TYPE OF CLAIM: THIRD PARTY / OWN DAMAGE / REPOR	TING ONLY
DRIVER STATUS: OWNER / NON - OWNER	and and
***	
F YOU NOT THE OWNER, THE OWNER 'S NAME & TEL :_	
OWNER'S ADDRESS:	
RELATIONSHIP WITH OWNER:OV	WNER'S NRIC / COMPANY DEC NO
NSUREANCE COMPANY:IN	ISLIBANCE POLICY NO.
LEET: YES / NO TYPE OF POLICY: COMPREHENSIVE	/THIRD DADTY CIDE & TUPET /THIRD
The second secon	/ THIRD PARTY ONLY
IN INSURANCE COMPANY:IN	ISLIBANCE POLICY NO.
YPE OF POLICY: COMPREHENSIVE / THIRD PARTY FIRE &	THEFT / THIRD BARTY CANNA
RIVER'S DECLARATION: I DECLARE THAT THE INEOPMATION	
NDERTAKE TO ASSUME FULL RESPONSIBILITLES FOR ALL CON	ISEQUENCES SHOULD ANY PART GIVEN BE UNTRUE.
GNATURE: TAN	/
GNATURE:	DATE & TIME: 32.7. 2020 / 14



Motor Commercial

MZ407/C

Cov. Type:C

SN

AN0478A

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.

DMCVSNA00057092000

Engine No.: K9KC400D054158 Cha. No.: VSKYBAM20Z0083575

Index Mark and Registration

Number of Vehicle

GBD5894C

AUTOSAFE

2. Name of Policy Holder

SKYLINK VEHICLE RENTAL PTE LTD

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

08/07/2020

Excess Sect I.

\$\$2,000.00

5. Persons or Classes of Persons entitled to drive?

Excess Sect. II

\$\$2,000.00

4. Date of Expiry of Insurance

22/04/2021

EX ON WINDSCREEN.

\$5100.00

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use \*

Use for racing, pace-making, reliability trial or speed-testing.
 Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO. : DBS BANK 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 (Maleysia), 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: .....

Authorised Signatory

# GENERAL INSURANCE

REGURDS MANAGEMENT DENTRE

# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

G Haffles Quey #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030

Operating Hours: Monday to Friday, 09:00 - 17:00

UEN: 566550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

# ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : Vehicle Registration No: Name(asshàwnin NRIC): NRIC/FIN/Passport No. (\*Vehicle Owner) (\*) Please delete as appropriate Address Singapore( Contact (Tel) Mobile No.: Email Address Date of Accident Time of Accident: Place of Accident Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: GBO 6294C Policyholder / Driver's Signature Personnel's Date: Name:

NRIC/FIN No.:

Date: