NATIONAL Assessment Centre	Services -	r i Jan'osi N	TMA 12007173	9	Done by	
Date In: 22/8/20 11:53	Jeb description		Date &Time Comple	sted	Douce	
Re[No: MA CTI 2000 8830/44	SAS e-filing		i			
	E-mail (within 8h	rs, AIC 2hrs)				
97111 1	i-Motor Claim	Form				
D.O.A: 2118/20 20:10	i-Motor W/O (Within: OD 2hr	s, TP 4brs)			
OD (TP) Reporting Only	i-Photo Upload		1			
	Assessment/Sur					
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp					
TWO Acalan When / OW: I			Tel:	Fax:		
Preferred Wksp / INC Assign Wksp / QW: (TP Particulars: Veh No: <6	11 51526	INC ()/Non-INC()		
	7U S1825.		Tel:)	
Owner / Driver: (iod: ()	Cover Type: ()	
roney rio. (.04. (Date:	Time:)	(2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Confirmed by : (Inte-Est. Status (W	O): N: 0-	20%; P: 21-79%. I	r: 80-100%]		1
	Varranty: YES ()/NO()			
Teal of Registrations (
- Landanian Company of the Company o	Thorses to Charles In	AND COLUMN TO SERVICE STATE OF SERVICE S	CANDERS LOVER STATE	\$100 E		
General Remarks;-						
() Walk-In Customer : Customer's infor	mation strictly Con	fidential & S	Strictly NO rater of re	Janer.		
() Total Loss Case : to e-mail Insure	r URGENTLY.					
Drive-In ()/ Towed-In (); Invoice		0();	Towing Co: (
			Date&Time Comp	le'od	Done	ý
Remarks;- (INC hotline: 6788 6616)	C/	(1869) (1969) V				
1/ rippi) to: riamoj	Courtesy Car (,				
2) QC Check / Post Repair Inspection	()					
3) Upload Resurvey Photo [Repair Cost > \$3	000] ()				
Injurý:						
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Date/Time Actions				1000 and 1000	1.7	
And the second s						
*		Total Salar		12.12	Anit (S)	Ami (3
MA 2	1004403	100 NO. 2 SER SHOULD ST	reparation Checkli	, <u> </u>	70.00	"Add Bi
		1) AR : Accid	dent Reporting (\$30); age Assessment (\$100);	INC (\$80)	30.00	
laimant's Particulars :-		3) TF : Towi	ng Fee	\$40/\$45		
Driver/Owner:		4) FT : Follo	w-Through Survey w-Through Survey (Resurv	\$120 sy) \$30		
Contact No:	The state of	For claimi	ne against NC Only (wel	(0 Jan 2002)		
		6) TR : Re-it	spection	\$75	-	
Damaged Portion:	- 5	8) NTUC Ac	DA + SMRT Survey Iditional Services:-			
		OD.		5:		
QC Checked by (Engr-In-Charge):		*N6: Rep	rlesy Car / Tpt Allowance air Co-ordination	510		
TO THE RESIDENCE OF THE PROPERTY OF THE PROPER	N. 10 N.	*N7: Fost	Repair Inspection	52: 51:	+	1
Auditors' Comments :-		*NS: DV	/ Collect Excess Coordinati : TP (Non INC) against IN	C \$2		1
Cat. 1:		9) N12: Idn	Mobile	3	0	All Section
201 2 / 3		Invalce date	ra r	e Charged e Charged	SAME	
,at. 4 (3)		Invoice date	ed re	C Child E an		
2at. 2 / 3;		Invoice date	ed F	e Charges	2.0	- 100m m

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SINGAPORE ACCIDENT STATEMENT

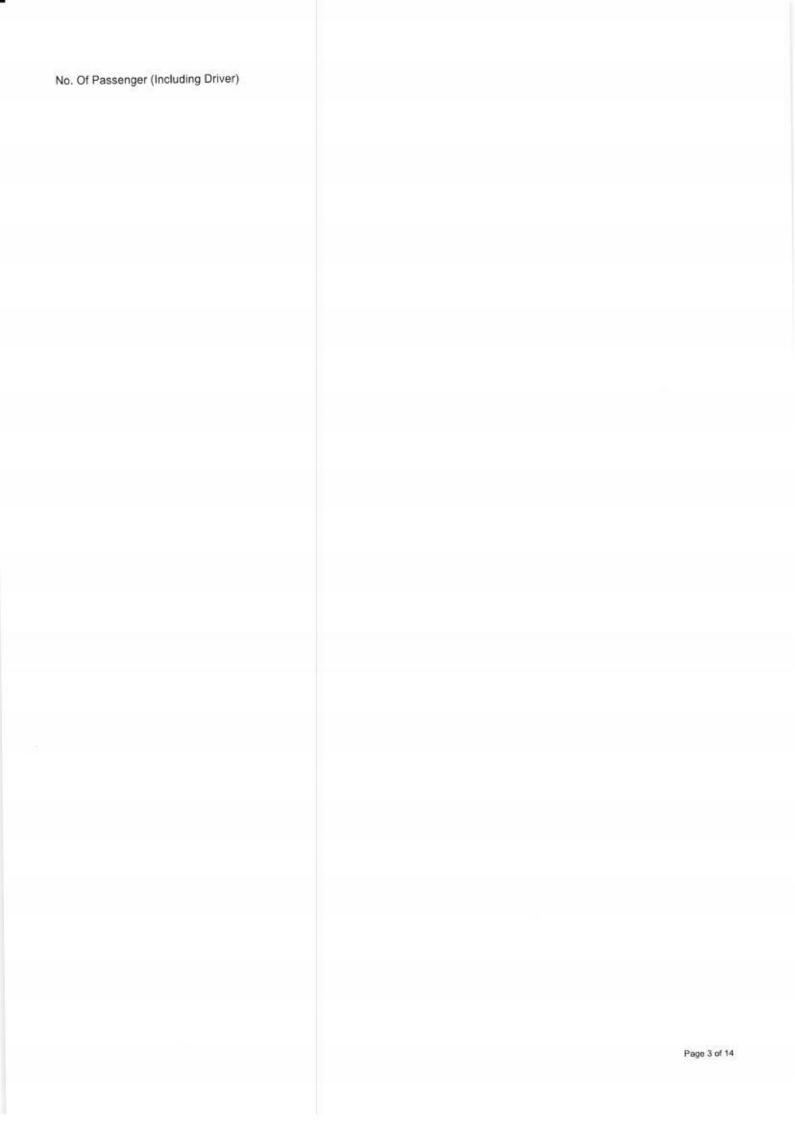
IMPORTANT NOTICE

- 1. 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.
- 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.

aforesaid.			
A STATE OF THE STA	ACCIDENT STATEMENT		
Date Of Report	22/08/2020 11:53		
Date Of Accident	21/08/2020 22:10		
Exact Location Of Accident	BEDOK RESERVOIR		
Country/State of Loss	SINGAPORE		
AND THE STREET, STREET, SANS	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SMM7504U		
Insured/Policyholder			
Name Of Registered Owner	ASIA EXPRESS CAR RENTAL PTE LTD		
Co Reg No	2XXXXX882D		
Email Address	NOEMAIL		
Mobile Phone No			
Alternative Phone No	OFFICE-96253682		
Vehicle Particulars			
Manufacturer	TOYOTA		
Model	NOAH		
Exact Purpose for which vehicle was being used time of accident	d at COMMERCIAL		
Are you claiming under your own insurance polifor repair to your vehicle?	policy NO		
If No, Please state action to be taken	THIRD PARTY		
Vehicle Category	PRIVATE HIRE		
Insurance Company			
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.		
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT		
Fleet Policy	NO		
Policy Number	DMHCSNA00001952000		
Cover Note Number			
Driver			
Name of Driver	ZHENG ZHIZHONG		
NRIC No	SXXXX826A		
Date Of Birth	19/10/1975		
Occupation	OUTDOOR		
Date Of Driving Pass	19/07/2005		
Driving Experience	15 YEARS AND 1 MONTH		
Gender	MALE		
Mobile Number	(LOCAL) +65-88766877		
Fax Number			
Contact Number	OTHERS-92388885		
EMail Address	NOEMAIL		
	Page 1	. 4 .6 44	

BLK 180A BOON LAY DR #03-674 Address 641180 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 COLLISION - HEAD TO REAR Type Of Accident CLEAR Weather Conditions DRY Road Surface Other Information Was any foreign vehicle involved in this accident? NO Number of vehicles (including own vehicle) 2 involved in the accident NO Was any body injured in the Accident? Was any injured conveyed to hospital by ambulance? YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. 2 Number of Passengers (Including Driver) : UNKNOWN Passenger 1 NAME: : FEMALE GENDER: **Details of Police Action** NO Was the accident reported to the police? If Yes, Please state which Police Station Was notice of intended Prosecution given? NO If Yes, against whom? Circumstances of Accident REFER TO STATEMENT. Attachment(s) Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES WITH DRIVER Remarks/ Reasons: NO Was there any audio recorded? DETAILS OF OTHER VEHICLE PROPERTY 1 SGU5182G Vehicle Registration Number 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



SKETCH PLAN

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.
- 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.
- 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 Signature

Date & Time: 20(03/20 10 400m Driver's Signature

(If driver is not the policyholder)

Date & Time:

37109150

10.40am.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

A: SMM 7504 U B: SGU 5182 G

SKETCH PLAN Beduk Reservoir Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

In the day	21 Aug 2020 10-12 pm, Car A was in the lane of an A from the back. I am an A smm750 yy and
when our B'h	th can A from the back. I am can A smmt5044 and
ther party is	(av B Squ51824.
,	

DECLARATION

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

Policyholder's Signature

Date & Time:

02/80/CT

10-400m

Driver's Signature

(If driver is not the policyholder)

Date & Time: 2208120 10.409in

Reporting Centre Personnel's Signature

NRIC/FIN No.:



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Motor Hire Car

MZ406L/B

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)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

BR0085A Cov. Type:F

Engine No.: 2ZR0C81518

CERTIFICATE No.

DMHCSNA00001952000

Cha. No.: ZWR800359529

1. Index Mark and Registration

SMM7504U

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.

25/03/2020

4. Date of Expiry of Insurance

24/03/2021

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

- (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.

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.

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

Q6389 6111

6222 1033

www.sg.cntaiping.com

Date of Accident	: Accident Time: (24-HR-FORMAT)
Accident Place	: Bedok Reservoir
Vehicle Reg. No (Car plate No.) Insurance Company	: SMM 7504 Wehicle Make/Model: Toyota NOAN : (Wing Taiping Policy No. DMH CSNA 00001952000)
Name of Registered Owner	: Company / Individual ASIA EXPRESS CAR RENTAL PIE LTD
ID of Registered Owner	: Co Reg No: 30 111 6882 D Owner's NRIC No:
	: Co Contact No: Owner's Contact No: 4625 3682
DRIVER'S Name	: Ihong this thong DRIVER'S NRIC No: STS79826A
DRIVER'S Date of Birth	: 19 10 1975 DRIVER'S License Pass Date 19 07 2005
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others: DNVCY
DRIVER'S Address	: BIK 180A BOON Lay Drive \$03-674 S(64180)
DRIVER'S Contact No./ Alt No.	: 1) <u>88766877</u> 2) <u>92388885</u>
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)
Email Address	: pei sie @expressian . com . sg
Weather & Road Surface	:CLEAR & DRY \ RAINING & WET \AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including D Was the accident reported to the pol Was there any video Captured by ca Exact purpose for which vehicle wa	ice? YES (NO)
Other	Party Driver's Particulars (if any)
Vehicle Reg No: SGW5182 G	Vehicle Reg No:
Vehicle Make\Model:	Vehicle Make\Model:
Name DRIVER:	Name DRIVER:
IC No. DRIVER:	IC No. DRIVER:
DRIVER'S Contact & add:	DRIVER'S Contact & add:

Asia Express Car Rental Pte Ltd 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

Asia Express Car Rental

(Business Registration No.: 201116882D)

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: Zheng Zhi Zhong

Nric No: S7579826A

Having his residential address at: Blk 180A Boon Lay Drive

#03-674 S641180

Tel. (Residential)

: 92388885

Next of Kin Contact: 97673954(Mr Liu)

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 S\$525 per week.

Make & Model: Toyota Noah Registration No: SMM7504U

Effective from: 13/07/2020-13/10/2020

Period: 03 Month 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

14-Jul-2020