

## 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	28/09/2020 12:26
Date Of Accident	26/09/2020 18:55
Exact Location Of Accident	ALEXANDRA RD (GANGES AVE) TURN RIGHT INTO LOWER DE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV7011B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CARS 88 HIRE PTE LTD
Co Reg No	201820615D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96931407

### Vehicle Particulars

Manufacturer	RENAULT
Model	FLUENCE
Exact Purpose for which vehicle was being used at time of accident	
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M0015963
Cover Note Number	

### Driver

Name of Driver	CORNELIUS TAY CHIN SIAK
NRIC No	S2510020D
Date Of Birth	19/08/1959
Occupation	OUTDOOR
Date Of Driving Pass	03/05/1983
Driving Experience	37 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98188402
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 271 BUKIT BATOK EAST AVE 4 #09-146
Postcode	650271
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 ON COLLISION
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)	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

I WAS TRAVELLING ALONG ALEXANDRA ROAD (GANGES AVE) WANT TO TURN RIGHT INTO LOWER DELTA ROAD ON LANE 1. TRAFFIC LIGHT WAS GREEN. MY VEHICLE STOPPED TO WAIT FOR GREEN ARROW TO TURN. MY STATIONARY VEHICLE STOPPED INSIDE WAITING POCKET. VEHICLE B FROM GANGES AVE ON LANE 1 (FOR RIGHT TURN ONLY) CAME AT FAST SPEED TO HIT MY STATIONARY VEHICLE. POLICE AND AMBULANCE CAME BUT BOTH OF US NOT INJURED AT THIS TIME. I HAD ONE FEMALE PASSENGER ON BOARD AT THAT TIME.

#### 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	SHA351L
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

### SKETCH PLAN

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6. 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 :
  - (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.



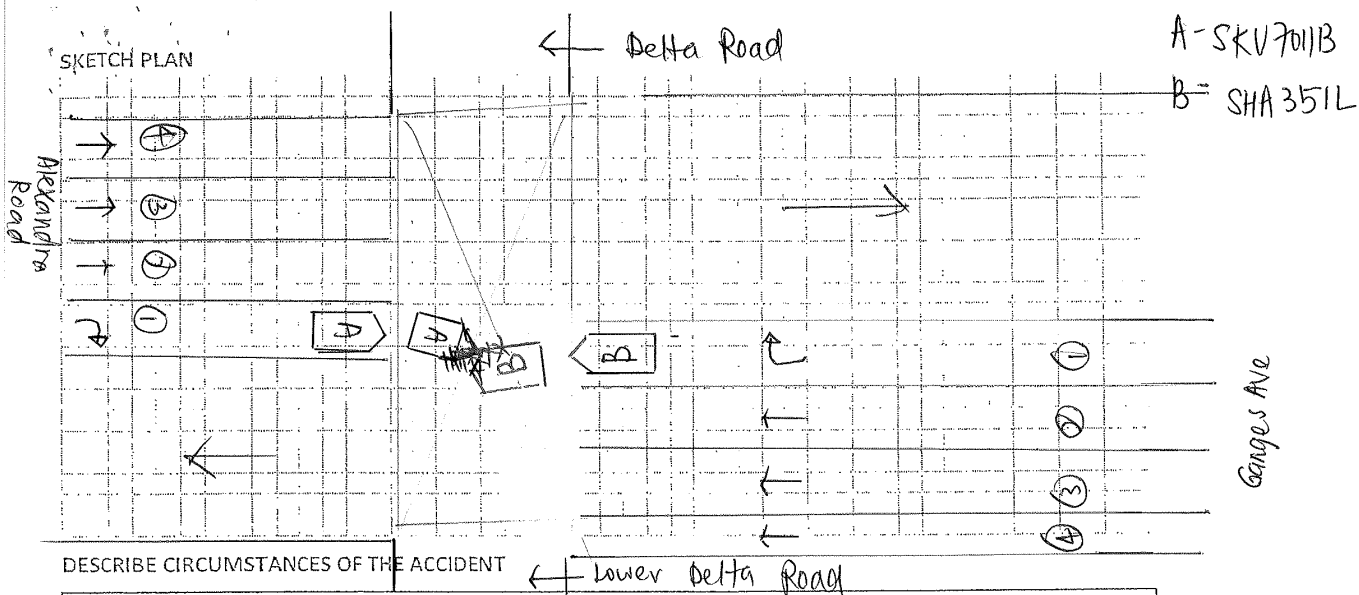
Policyholder's Signature  
Date & Time:

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

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

CAS GARAGE

# Sketch Plan #2 Pg. 1



I was travelling along Alexandra Road (Ganges Ave) want to turning right to Lower Delta Road on lane 1. Traffic light was green, my vehicle stopped to wait for Green Arrow to turn. My stationary vehicle stopped inside waiting pocket. Vehicle B from Ganges Ave on lane 1 (for right turn Only) came a fast speed to hit my stationary vehicle. Police and ambulance come but both of us no injured at this time. I had one female passenger inside my board at this time.

## DECLARATION

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

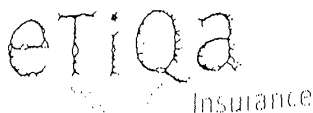


*[Signature]*

*[Signature]*

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

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



INTERVIEW FORM

Name (Driver) : Cornelius Tay Chin Siak  
 Policy No : M0015963  
 Vehicle No : SKV 7011B  
 Place of Accident : Alexandra Rd (Ganpes Ave) Turn RH (Lower Delta Rd)  
 Insured Driver's relationship with Insured : Hirer

Drink Driving of Insured and/or Insured Driver : —  
 No of passenger(s) in Insured vehicle : 01 (Female) unknown

Injury to Insured and/or Insured driver, please indicate which hospital:  
—

Third Party Vehicle No (if any) : SHA 351 L  
 No of passenger(s) in Third Party Vehicle : Nil

Injury to Third Party driver and/or passenger(s), please indicate which hospital:  
—

Type of collision and the extensiveness of the damages to all vehicles/Third Party property involved:  
Junction Case

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):  
—

Traffic Police report (enclosed) : Yes / No

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)

de Saut  
 Driver (Name & Signature) / Date  
 I, affirmed the above information is given to  
 my best knowledge

Attended by (Name & Signature) / Date  
 Workshop Name: —

Insurance Pte Ltd  
 111111 Quay  
 North Tower  
 #01-01 068583

03300477  
 03392109

1111111111  
 1111111111



# Driving License Pg. 1

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S2510020D**  
Name: **CORNELIUS TAY CHIN SIAK**

Birth Date: **19 Aug 1959**  
Issue Date: **12 Mar 2014**

002284497J

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S2510020D**

Name: **CORNELIUS TAY CHIN SIAK**  
**鄭征易**

Race: **CHINESE**  
Date of birth: **19-08-1959**  
Country/Place of birth: **MALAYSIA**

Sex: **M**

**Land Transport Authority**

**VOCATIONAL LICENCE**

Licence No: **S2510020D**  
Name: **CORNELIUS TAY CHIN SIAK**

Card Issue Date: **16/11/2017**  
Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

Usage for Insurance Motor Accident Reporting and Claims Purposes Only

Vehicle no: SKV 7011B  
Date of Accident: 26/09/20

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	06 Jul 1983
Class 2A Motorcycles between 201 cc and 400 cc	06 Jul 1983
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	03 May 1983
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	18 Apr 1987

NP 428A

Licence No: S2510020D

5283165

NRIC No. **S2510020D**

Date of issue: **04-03-2014**

Address: **APT BLK 271 BUKIT BATOK EAST AVENUE 4 #09-146 SINGAPORE 650271**

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	16/11/2017
03	BUS VL	28/07/2008
04	BUS ATTENDANT	28/07/2008





MZ400  
71120037  
Cov. Type: Comprehensive

**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)

**CERTIFICATE No.** M0015963

- |  |                        |  |
|--|------------------------|--|
| 1. Index Mark and Registration Number of Vehicle                           | SKV7011B               |  |
| 2. Name of Policyholder  | Cars 88 Hire Pte. Ltd. |  |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 11/07/2020             |  |
| 4. Date of Expiry of Insurance   | 10/07/2021             |  |
| 5. Persons or Classes of Persons entitled to drive                         |                        | Engine No : K9KN837D197372<br>Chassis No : VF1LZLF0E53194172<br>Hire Purchase : AMS Motors Pte Ltd |

(A) THE POLICYHOLDER.  
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.  
THE POLICY DOES NOT COVER:  
(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.  
(ii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.  
(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

\* 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 bindings.

**Policy Owner's Protection Scheme**

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

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).

GOP93167 22/07/2020 23:47:34



For and on behalf of **Etiqa Insurance Pte. Ltd.**  
Approved Insurer

Authorised Signature

## RENTAL AGREEMENT Pg. 1

**CARS 88 HIRE PTE LTD (Reg No: 201820615D)**  
40 JALAN PEMINPIN #03-12 TAT ANN BUILDING SINGAPORE 577185  
TEL: 8790 3070 FAX: 6732 2808 EMAIL: leasing@cars88.sg

### VEHICLE LEASE AGREEMENT

**DATE:** 19/2/2020

#### SCHEDULE

This is a lease Agreement made between us, **CARS 88 HIRE PTE LTD** UEN No. 201820615D (hereinafter referred to as the “**Company**” which shall include its successors-in-title and assigns), identified as the Lessor and having our registered address at 40 Jalan Peminpin #03-12 Tat Ann Building Singapore 577185 **AND YOU**, the person(s) identified as the “**Hirer**” below (which shall include your successors-in-title and assigns):-

**NAME OF HIRER / DRIVER** : CORNELIUS TAY CHIN SIAK  
**NRIC/PASSPORT/UEN NO.** : S2510020D  
**DATE OF BIRTH** : 19/8/1959  
**ADDRESS** : BLK 271 BUKIT BATOK EAST AVE 4 #09-146 S(650271)  
**TELEPHONE** : 98188402  
**EMAIL** :

**ADDITIONAL DRIVER (IF ANY)**

**NAME OF DRIVER** :  
**NRIC/PASSPORT NO.** :  
**DATE OF BIRTH** :  
**ADDRESS** :  
**TELEPHONE** :  
**EMAIL** :

**\*Any change in the above particulars of the Hirer/Driver shall be notified to the Company prior to the change thereof.**

1. **DESCRIPTION OF VEHICLE (“THE VEHICLE”)**

**REGISTRATION NO.** : SKV7011B  
**MAKE/MODEL** : RENAULT FLUENCE 1.5L DCI 110 AT GEARBOX EURO 5  
**COLOUR** : WHITE  
**ENGINE NO.** : K9KN837D197372  
**CHASSIS NO.** : VF1LZLF0E53194172

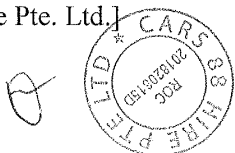
Remarks:

Date, Time and Mileage for Collection: 19/2/2020 (date) \_\_\_\_\_ (time) \_\_\_\_\_ (mileage)

Date, Time and Mileage for Return: \_\_\_\_\_ (date) \_\_\_\_\_ (time) \_\_\_\_\_ (mileage)

Petrol Out: Empty 1/4 tank/1/2 tank/3/4 tank/Full  
(Vehicle must be returned with same level of petrol)

[Cars 88 Hire Pte. Ltd.]



The Hirer and/or Additional Hirer

A handwritten signature of the Hirer and/or Additional Hirer.

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40 JALAN PEMINPIN #03-12 TAT ANN BUILDING SINGAPORE 577185  
TEL: 8790 3070 FAX: 6732 2808 EMAIL: leasing@cars88.sg

### Unnamed Driver Excess

If the vehicle is driven by an unnamed driver, the following **ADDITIONAL** excess will apply:

Under 27 years old with min 2 years driving experience	SGD\$2,000.00*
27 years old and above with min 2 years driving experience	SGD\$1,000.00*

\*Subject to Good and Services Tax (GST).

\*Maximum of 2 claims per contract year.

### 6. MAXIMUM MILEAGE

Maximum Mileage : \_\_\_\_\_ km  
Additional charges : S\$ \_\_\_\_\_ as per additional  
10,000km or part thereof

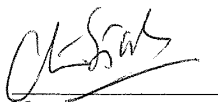
### 7. REMARKS

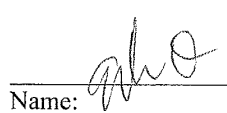
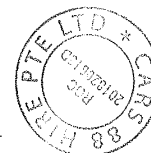
The Agreement herein comprises the Schedule above and the Terms and Conditions annexed hereto. **The Hirer confirms that he has read, understood and agreed to the Terms and Conditions of this Agreement attached hereto.**

IN WITNESS whereof the Parties hereto have set their hands the day and the year first above written.

Signed by the **Hirer**

Signed by **Cars 88 Hire Pte. Ltd.**

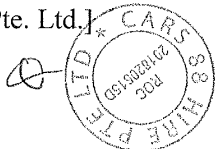
  
Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Company Stamp: \_\_\_\_\_

  
Name: \_\_\_\_\_  
Designation: \_\_\_\_\_  
Company Stamp: 

### EMERGENCY CONTACT DETAILS

NAME: \_\_\_\_\_  
CONTACT NO: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

[Cars 88 Hire Pte. Ltd.]



The Hirer and/or Additional Hirer



Accident Photo



Accident Photo



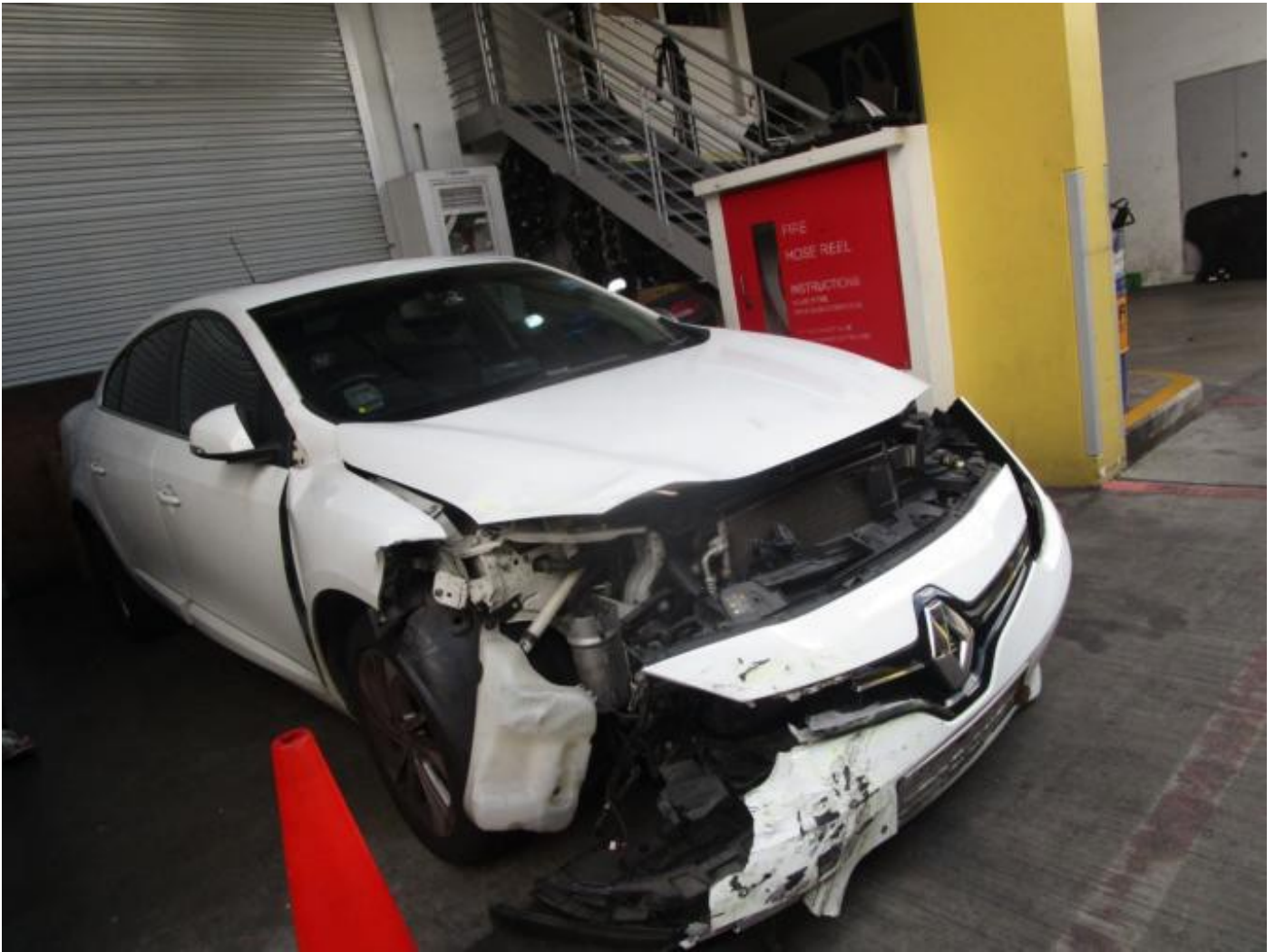
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Accident Photo



Accident Photo

