

NATIONAL Assessment Centre Services

NA 2006018

2/2

Date In: 16/01/20	Job description	Date & Time Completed	Done by
Ref No: NA/CTI20012566/13	SAS e-filing		
Veh No: SLX71514	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 15/11/20 1010.	I-Motor Claim Form		
OD: TP (Reporting Only)	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: SMQ6072J	INC () / Non-INC ()
Owner / Driver: (Tel:)
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:	Time:
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 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. ()

Remarks:	INC Ref: 67886616	Date & Time Completed:	Done by:
1) Apply for Transport Allowance () / Courtesy Car ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Resurvey Photo [Repair Cost > \$3000] ()			

Injury: _____

Date/Time	Action

Client's Particulars:	NA2006018	Invoice Preparation Checklist:	Amended Bill	Add Bill
Driver/Owner:		1) AR: Accident Reporting (\$30);		
Contact No:		2) DA: Damage Assessment (\$100); INC (\$30)		
Damaged Portion:		3) TF: Towing Fee \$40/\$45		
		4) FT: Follow-Through Survey \$120		
		5) FT: Follow-Through Survey (Resurvey) \$30		
		For claiming against INC Only (wef 10 Jan 2005)		
		6) TR: Re-inspection \$75		
		7) NI: Idao DA + SMRT Survey \$160		
		8) NTUC Additional Services:-		
		ON:		
		*N5: Courtesy Car / Tp Allowance \$5		
		*N6: Repair Co-ordination \$10		
		*N7: Post Repair Inspection \$25		
		*N8: DV / Collect Excess Coordination \$5		
		TP (N11): TP (Non INC) against INC \$20		
		9) N12: Idao Mobile 30		
		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	16/11/2020 12:08
Date Of Accident	15/11/2020 10:10
Exact Location Of Accident	CTE TWDS CITY B4 EXIT 7D
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX7151H
Insured/Policyholder	
Name Of Registered Owner	LAY AUTO LEASING PTE LTD
Co Reg No	2XXXXX521C
Email Address	JOEL@LAYAUTO.COM
Mobile Phone No	
Alternative Phone No	OFFICE-87973443

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSNA00001672000
Cover Note Number	

Driver

Name of Driver	MUHAMMAD ALHASYIR BIN ZAKARIA
NRIC No	SXXXX389F
Date Of Birth	07/03/1986
Occupation	OUTDOOR
Date Of Driving Pass	21/02/2013
Driving Experience	7 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84484472
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 701 YISHUN AVE 5 #08-310
Postcode	760701
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

PLS REFER TO THE ATTACHED STATEMENT.

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	SMQ6072J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN MEI FONG
NRIC/Passport Number	SXXXX177C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

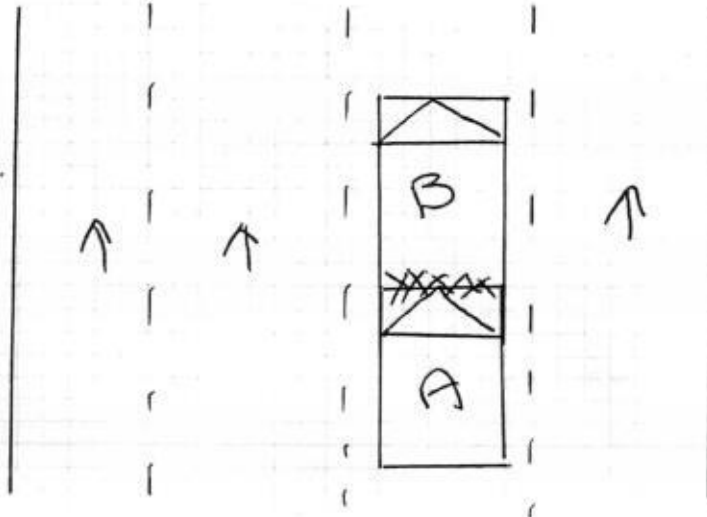

Driver's Signature
(If driver is not the policyholder)
Date & Time:

 16/11/20
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

CTE TOWARDS CITY B4 EXIT 7D

SKETCH PLAN

A: SLX7151H
B: SMO6072J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am the driver of Honda Shuttle Hybrid SLX 7151H, named MUHAMMAD ALHASSIR BIN ZAKARIA, S8605389F. I was driving along the Central Expressway towards City ~~which~~ on lane 2 when vehicle Honda Fit SMO6072J driven by Mdm Chan Wei Fong abruptly jam ~~brake~~^{brake} braked which resulted me not being able to brake in time to avoid collision. Collision happened at approximate 1010hrs on ~~the~~^{the} central expressway towards city just before Exit 7D Balestier ~~Rd~~Rd Rd.

Based on visual assessment of myself, no one was injured. Mdm Chan Wei Fong claimed she had to ~~brake~~^{brake} sudden brake due to a heavy traffic in front of her. We left the scene at approximate 1045hrs to 1100hrs after exchanging details.

DECLARATION

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

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.:



LAY AUTO LEASING PTE LTD

21 TOH GUAN ROAD EAST #01-16/17 TOH GUAN CENTRE S608609

TEL: 6462 5828 FAX: 6468 1179 UEN NO 201310521C

Rental Agreement Number : LA29082020

This agreement is made on (Date) 29/8/20 between (Name) LAY AUTO LEASING PTE LTD
(Registration No.) 201310521C, a company incorporated in Singapore with its
registered officer at 21 TOH GUAN ROAD EAST #01-16/17 TOH GUAN CENTRE S608609
(hereinafter called the "OWNER") which expression shall where the context so admits, include the
successor(s) in title and Muhammed Alhasyir Bin Zakaria after
called the "HIRER") in respect of the hire of the motor vehicle ("THE VEHICLE") for the period ("THE
PERIOD") at the rate of the hire rental ("THE RENTAL") set out in the schedule of this agreement ("THE
SCHEDULE") and upon the terms and conditions stated hereunder.

SCHEDULE OF AGREEMENT

1. PARTICULARS OF THE VEHICLE

- a. Make/Model : Honda Shuttle Hybrid
b. Registration Number : SLX 7151 H
c. Chassis Number :
d. Engine Number : As per Log card.



2. COMMENCEMENT

- a. Effective Date : 29-8-20
b. Expiry Date : 22-2-21



3. HIRE RENTAL

- a. Security Deposit : \$5001-
b. Daily Hire Rates : \$601-
c. Additional Charges : Nil

4. DRIVERS

1st Driver

Name : Muhammed Alhasyir Bin Zakaria
D.O.B : 7-3-1986
License No. : S8605389 F
Contact No. : 8448 4472

SIGNATORY OF HIRER : [Signature]

ACCIDENT STATEMENT

ACCIDENT DATE: 15 / 11 / 2020 (DD/MM/YYYY), TIME: 10 : 10 (HH:MM)

LOCATION: Central Expressway towards City before Exit 7D

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLX 7151H
b) INSURANCE COMPANY: China
c) POLICY NUMBER: DMHC SNA 00001672000
d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: Honda Shuttle
f) TYPE: (SALOON) COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Rental
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Lay Auto Leasing Pte Ltd (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8829310521C CONTACT: 8797 3443
c) ADDRESS: 21 Toh Guan Road East Toh Guan
Centre #01-16/17 S 608609

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Muhammed Alhasyir Bin Zakaria (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8605389E CONTACT: 8448 4472
c) ADDRESS: Blk 701 #08-30
Fishon 760701

*d) DATE OF BIRTH: 17 / 3 / 1986 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 7 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) (NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hire

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES/NO) (NO)

7. a) REPORTED TO POLICE (YES/NO) (NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMA 60723 MODEL: Honda Fit
b) DRIVER'S NAME: Chan Mei Fong
c) NRIC/FIN/PASSPORT: S1813172C CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

Email = Joel @ layauto.com / Fiona @ layauto.com

Fax = _____

Video = _____



Motor Hire Car

MZ408L/B

E SN

AN0606A

Cov. Type:C

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.

DMHCSNA00001672000

Engine No.: LEB6544767

Cha. No.: GP71203804

1. Index Mark and Registration
Number of Vehicle

SLX7151H

AUTOSAFE

2. Name of Policy Holder

LAY AUTO LEASING PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

16/03/2020
(15:03:03)

Excess Sect I . S\$2,000.00

Excess Sect. I (Outside Singapore) S\$4,000.00

Excess Sect. II S\$2,000.00

Excess Sect.II (Outside Singapore). S\$4,000.00

EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

15/03/2021

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.

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.

HIRE PURCHASE CO. : SING INVESTMENTS & FINANCE 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: Ho Li Hwa Irene
Authorised Officer

Authorised Signatory