

NATIONAL Assessment Centre Services			
Date In: 19/12/2020 12:15	Job description	Date & Time Completed	Done by
Ref No: NA/CP/20014136/1	SAS e-filing		
Veh No: SMD 6389T	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 18/12/2020 15:37	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: GBG 14937	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 or) Inc: 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: ( )
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Date/Time	Action

NA2100148	Invoice Preparation Checklist	Am (\$)	Am (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	In Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Assessors' Comments:	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: 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		
	TE (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 Submission	19/12/2020 12:15 (SGT)
Date of Accident	18/12/2020 15:37 (SGT)
Exact Location of Accident	Venus Dr, Singapore
Additional Location Information	ISLAND CLUB ROAD JUNCTION
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD6389P
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ASIA EXPRESS CAR RENTAL PTE LTD
Company Reg No	2XXXXX882D
Email Address	peijie@expresscar.com.sg
Mobile Phone No	(Phone) +65-91198131
Alternative Phone No	+65-91155526

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	DMHCSNA00001942000
Cover Note Number	-

#### DRIVER

Name of Driver	PANG CHEE HWA (PAN ZHIHUA)
NRIC No	SXXXX714B
Date Of Birth	27/07/1974
Occupation	Outdoor

Date Of Driving Pass	22/02/1995
Driving experience	25 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91155526
Alt. Phone Number	-
Email Address	peijie@expresscar.com.sg
Address	BLK 684A CHOA CHU KANG CRESCENT
Address complement	#05-308
Postcode	681684
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	AFTER RAIN
Road Surface	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20201218/2142

#### 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	GBG1493T
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LIM KOON SENG
NRIC No	SXXXX661D

Contact Number .....	(Phone) +65-90905853
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person .....	PANG CHEE HWA
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SMD6389P
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No



## 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.
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. 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.



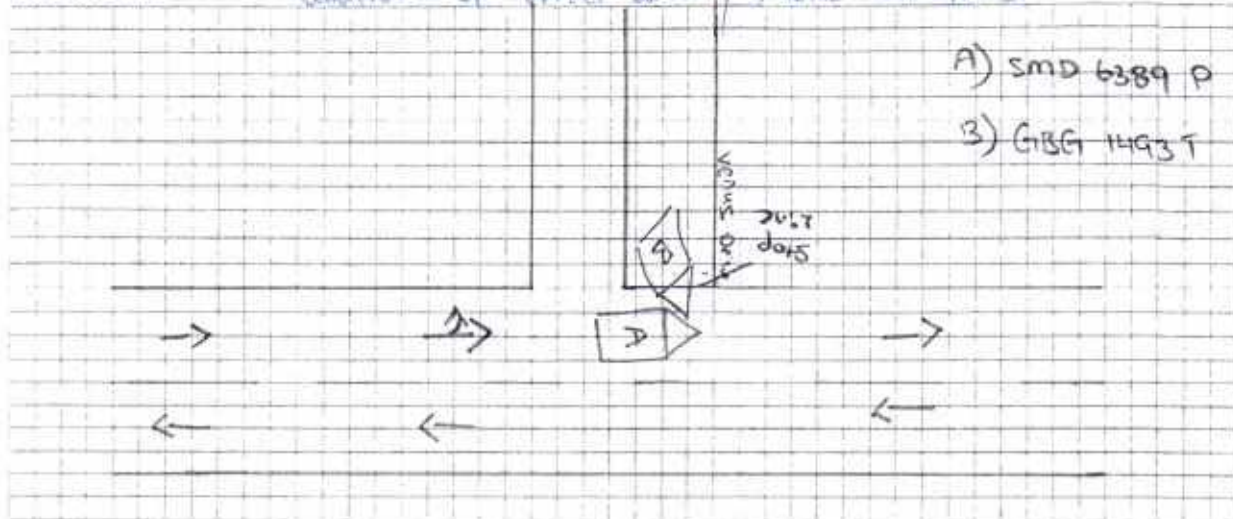
Policyholder's Signature  
Date & Time: 18/12/20

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 18/12/20

19/12/2020  
Reporting Centre Personnel's Signature  
Name: [Signature]  
NRIC/FIN No.: [Signature]

# SKETCH PLAN

Junction of Venus Drive / Island Club Road



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 7/20201218/2142

## DECLARATION

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

Policyholder's Signature

Date & Time: 18/12/20

Driver's Signature

(If driver is not the policyholder)

Date & Time: 18/12/20

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Date of Accident : 18/12/2020 Accident Time: 1537 (24-HR-FORMAT)  
Accident Place : Venus Dr / Island Club Rd  
Vehicle Reg. No (Car plate No.) : SMD 6389P Vehicle Make/Model: Toyota Noah  
Insurance Company : China Taiping Policy No. DMHCSNA00001942000  
Name of Registered Owner : Company / Individual Asia Express Car Rental Pte Ltd  
ID of Registered Owner : Co Reg No: 2011168820 Owner's NRIC No: \_\_\_\_\_  
: Co Contact No: 9199 8131 Owner's Contact No: 91155526  
DRIVER'S Name : Pang Chee Hwa DRIVER'S NRIC No: S7423719B  
DRIVER'S Date of Birth : 27/07/1974 DRIVER'S License Pass Date 22/02/1995  
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Driver  
DRIVER'S Address : Blk 684A Choa Chu Kang Crescent #05-308 S'681684  
DRIVER'S Contact No./ Alt No. : 1) 9388 0882 2) 8186 1435  
DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)  
Email Address : pejie @ expresscar.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 Driver): 1  
Was the accident reported to the police? YES \ NO  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>GBG 1493T</u>	Vehicle Reg No: _____
Vehicle Make/Model: <u>Toyota</u>	Vehicle Make/Model: _____
Name DRIVER: <u>LIM KOON SENG</u>	Name DRIVER: _____
IC No. DRIVER: <u>S1582661D</u>	IC No. DRIVER: _____
DRIVER'S Contact & add: <u>9090 5853</u>	DRIVER'S Contact & add: _____



# SINGAPORE POLICE FORCE



T/20201218/2142

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

1 of 3

Report No. T/20201218/2142

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/12/2020 20:55	Vide Report No.:	Station Diary No.: 97
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**Informant's Particulars**

Name of Informant: PANG CHEE HWA			Address: APT BLK 684A CHOA CHU KANG CRESCENT #05-308 SINGAPORE 681684		
ID Type / ID No.: NRIC NO / S7423714B			Contact No.: Home/Office: Mobile: 93880882		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 27/07/1974	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4,5		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/12/2020 15:35	Type of Location: T-Junction
Location:  ISLAND CLUB ROAD				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG1493T	Van	TOYOTA	HIACE 3.0 DX DIESEL TURBO MT 2WD LGV	Silver	Slightly Damaged	0
SMD6389P	Car	TOYOTA	NOAH HYBRID 7- SEATER 1.8X CVT	Brown	Seriously Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20201218/2142

2 of 3

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

Report No. T/20201218/2142

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	LIM KOON SENG	ID No.	S1582661D
Related Vehicle	GBG1493T (Van)	Contact No.	90905853
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	PANG CHEE HWA	ID No.	S7423714B
Related Vehicle	SMD6389P (Car)	Contact No.	93880882
Hospital/Clinic	UNIHEALTH CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	18/12/2020	Date Discharge	18/12/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

On 18/12/2020 at about 1537hrs, I was travelling along Island Club Rd towards Country Club and there was a van (GBG1493T) coming from the left which was Venus Drive which was a T-Junction who did not stop and had collided into my vehicle (SMD6389P). There was damage on my left front side of the vehicle near to the wheel and subsequently both of us exchanged our details. The said driver also informed me that he was at wrong.

I would like to state that at that point of accident, I did not experience any pain or so however after I left the scene back to my rental car company, I felt some pain on my shoulder as such went to seek treatment at Unihealth Clinic (Bedok) and was given 5 days of MC.

Favordrive Car Rental  
25 Kaki Bukit Road 4 #01-56 Synergy@KB Singapore 417800

Favordrive Car Rental  
25 Kaki Bukit Road 4  
#01-56 Synergy@KB  
Singapore 417800

## Vehicle Lease Agreement

This **VEHICLE LEASE AGREEMENT** (hereinafter referred to as 'The Agreement' is made on

Between

**Favordrive Car Rental**  
(Business Registration No.: 53356674J)  
Having its office at:  
25 Kaki Bukit Road 4 #01-56 Synergy@KB Singapore 417800  
Hereinafter referred to as 'The Owner' of the one part

And

**Name: Pang Chee Hwa (Pan ZhiHua)**  
**Nric No: S7423714B**  
Having his residential address at: Blk 684A Choa Chu Kang  
Crescent #05-308, Singapore 681684  
**Tel. (Residential) : 9388 0882**  
**Next of Kin Contact : 8186 1435 (Annie – Wife)**  
Hereinafter also known at the 'The Hirer' of the other part

Additional Driver

**Name: Yap Yan Ni**  
**Nric No: S7972250B**  
Having his residential address at: : Blk 684A Choa Chu Kang  
Crescent #05-308, Singapore 681684  
**Tel. (Residential) : 8186 1435**  
**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: -

### **VEHICLE AND LEASE PERIOD**

Make & Model:	Toyota Noah
Registration No:	SMD6389P
Effective from:	11/08/2020 – 18/02/2021
Period	: 6 Months Contract



[The Owner's Initial & Stamps]

The Hirer and/or Additional Hirer Initial & Stamps  
07-Aug-2020





中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406L/B

N SN

BR0085A

Cov. Type F

### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMHCSNA00001942000

Engine No.: ZZR0895670

Chassis No.: ZWR800330945

1. Index Mark and Registration  
Number of Vehicle

SMD6339P

2. Name of Policy Holder

ASIA EXPRESS CAR RENTAL PTE. LTD.

3. 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

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. / CING DIEN CREDIT 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

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com