

NATIONAL Assessment Centre Services.

Just 1 Jan 2001

SN0821160007

Date In: 06/01/2021 14:18	Job description	Date & Time Completed	Done by
Ref No: XBA/C1221000230/4	SAS e-filing		
Veh No: G50 61094	E-mail (by date time, AIC time)		
D.O.A: 06/01/2021 16:30	I-Motor Claims Form		
(ID) TP: Reporting Only	I-Motor W/O (with: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax/Hand to Owner/Whar		

Preferred Wkep / INC Assign Wkep / GW: (Tel:	Fax:
TP Particulars:	Veh No: GY 4711 R	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%. P: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of rapair.
() Total Loss Case: to e-mail Insurer URGENTLY.
Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: (

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: ()	
Damage: ()	
Other: ()	

NA2100550	1) AIC: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$10)	
Contact No:	3) TP: Towing Fee	\$120
Damage Portion:	4) PT: Follow-Through Survey	\$30
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey)	\$30
	For claimants at least INC Only (over 10 Jan 2003)	\$75
	6) TR: Re-inspection	\$160
	7) NI: IDA DA + SMRT Survey	
	8) NTUC Additional Services	
	ON:	
	*NS: Courtesy Car / Tpl Allowance	\$3
	*NS: Repairs Coordination	\$10
	*NT: Post Repair Inspection	\$25
	*NS: DV / Collect Excess Coordination	\$3
	TE (NI) / TP (NA INC) at least INC	\$20
	9) NI: IDA Mobile	\$30
	Invoice dated	
	Invoice dated	
	Fee Charged	
	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	06/01/2021 14:18 (SGT)
Date of Accident	02/01/2021 16:30 (SGT)
Exact Location of Accident	Chantek Flyover, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA3109Y
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SKYLINK VEHICLE RENTAL PTE LTD
Company Reg No	2XXXXX755G
Email Address	xdetox32@gmail.com
Mobile Phone No	(Phone) +65-90408800
Alternative Phone No	+65-83536266

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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	DMCVSNA00039462000
Cover Note Number	-

DRIVER

Name of Driver	GANESAN BABU
Passport No/FIN	GXXXXX675M

Date Of Driving Pass	07/04/2015
Driving experience	5 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83536266
Alt. Phone Number	-
Email Address	xdetox32@gmail.com
Address	49 ADMIRALTY ROAD
Address complement	COCHRANE 2
Postcode	757444
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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?	No
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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY4711R
Vehicle Manufacturer	Toyota
Vehicle Model	Hiace
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KOH HWEE MENG
NRIC No	SXXXX267G
Contact Number	-
Address	-
Address complement	-

Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category
Name of Driver
NRIC No
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

GBH8390E
Toyota
Dyna
-
-
Commercial vehicle
NG KIM SENG
SXXXX446A
-
-
-
-
-
-
-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

GANESAN BABU
-
-
-
-
SLIGHT INJURY
GBA3109Y
Yes
No

IMPORTANT NOTICE

THIS FORM IS A **MANDATORY** FORM FOR ALL OF THE INSURERS OF THE GENERAL INSURANCE ASSOCIATION OF SINGAPORE (GIA).

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:

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

06/01/2020
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

LEASING AGREEMENT

Date of Agreement : Saturday, 26 Sep 2020

Agreement No : SC20/0930

HIRER PARTICULAR

Name : HONSEI BUILDER PTE. LTD.
NRIC/ ACRA No. : 201621605Z
Address : 14 TAGORE LANE LAM CHUAN BUILDING SINGAPORE (787475)

Contact Person : CHIN KIM LUNG
Mobile Number : 9227 8670
Office Number :
Fax Number :
Email Address :

RENTAL DESCRIPTION

Make/Model : TOYOTA DYNA 100 MANUAL
Description :

Upper Structure :
Attachment : With Hood (Full - Retractable)
Accessories & Services :

Vehicle Plate No : GBA3109Y
Engine No : 1KD1633201
Chassis No : JTFNT24Y105000091

CONTRACT PERIOD

Total Duration : 2 Month(s)
Start Date : 26-SEP-2020
End Date : 25-NOV-2020

PAYMENT TERM

Deposit : \$1,200.00
Rental/Lease Rate : \$1,200.00 Per Month
GST 7% : \$84.00
Sub-Total Rental : \$2,400.00
Payment Term : \$2,484.00

Remark: This Leasing Agreement will renew on a monthly basis automatically after the contract period ended. Hirer is free to write in to stop the renewal with a 30 days notice.

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

INSURANCE COVERAGE INSIDE SINGAPORE		
Driver's Age &/or Driving Experience	Above 26 Year Old & 2 Years Experience	Below 26 Year Old & 2 Years Experience
Own Damage Excess (Section I)	\$3,000.00	\$5,000.00
3rd Party Excess (Section II)	\$3,000.00	\$5,000.00
INSURANCE COVERAGE OUTSIDE SINGAPORE (APPLICABLE TO ALL DRIVERS)		
Additional Own Damage Excess	NA	Additional 3rd Party Excess
		NA

Authorised Driver: Only Registered Drivers/ Employees of Hirer (Please furnish us copies of all Drivers' Licences and Ics)

IMPORTANT NOTE

- The above subject is subjected to approval stock availability, taxes and government registration.
- Rates does not include usage outside SINGAPORE, additional charges apply for usage outside Singapore (Subject to prior approval).
- Above rental rates include vehicle replacement (subject to availability), road side assistance 24/7 and new tyre change once annually.
- Rental rates includes vehicle insurance, road tax and registration, maintenance, servicing and repair due to wear and tear (sprung parts, tyres and flat batteries not included). Loss of key, accident outside of vehicles and empty fuel tank do not comprise as breakdowns and any recovery services incurred shall be chargeable to the hirer.
- Only drivers registered and accepted by Skylink Vehicle Rental Pte Ltd (Owner) are authorised to drive the vehicle. Should the vehicle be damaged or stolen while being driven by unauthorised drivers who are not registered with the Owner, hirer shall be liable for full cost of repair and/or the full value of the vehicle and/or any other associated losses suffered by the Owner.
- In the event of default payment, the Owner has the absolute rights to repossess the vehicle without prior notice. The hirer shall be liable for late payment fee of 5% per month on prevailing monthly rental rate, and/or repossession fee of not less than \$100.00 and/or any other associated cost thereafter.
- The hirer shall ensure that the vehicle is not used for any purposes which conflict with the law in connection with theft, drug peddling or trafficking, smuggling and/or any other criminal act. Should the vehicle be confiscated by the authority, the hirer shall indemnify the Owner the full value of the vehicle plus all other associated costs and expenses incurred.
- Driver must keep proper check and ensure sufficient water for radiator & engine oil of vehicle at all times. If the vehicle breakdown due to improper usage, lack of care and/or negligence, the hirer shall bear full responsibilities for all repair cost.
- Vehicles returned after 24hrs (for daily rental) or after 6am shall be considered as additional rent every day rental.
- The hirer shall at all times use only the recommended grade of fuel and lubricant as specified by the vehicle's manufacturer. Failing which any resultant damages to the vehicle shall be borne by the hirer.

All content contained herein is subject to change without notice. Skylink Vehicle Rental Pte Ltd reserves the right to change or modify the terms and conditions at any time.

Prepared By (Sales)

Approved By (Manager)

Agreed & Accepted By HIRER

Skylink Vehicle Rental Pte Ltd
Name : Yap Jing Rou
Designation : G8776817T

Skylink Vehicle Rental Pte Ltd
Name : Shen Yongzhong
Designation : G5390526P

Customer SIGN & CHOP
Name : CHIN KIM LUNG
Designation : Director

Date of Accident : 2/1/2021 Accident Time: 1630 (24-HR-FORMAT)
 Accident Place : FTT Chantek Flyover
 Vehicle Reg. No (Car plate No.) : GBA3109Y Vehicle Make/Model: Toyota Dyna
 Insurance Company : China Taiping Policy No. DMCVSNA00029462c
 Name of Registered Owner : Company / Individual skylink vehicle rental Pte Ltd
 ID of Registered Owner : Co Reg No: 201710755G Owner's NRIC No: _____
 : Co Contact No: 9040 8800 Owner's Contact No: _____
 DRIVER'S Name : Ganesan Babu DRIVER'S NRIC No: G2342675M
 DRIVER'S Date of Birth : 17/6/1989 DRIVER'S License Pass Date: 07/04/2015
 Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Hirer.
 DRIVER'S Address : 49 admiralty road west cochrane 2
 DRIVER'S Contact No./ Alt No. : 1) 8353 6266 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)
 Email Address : xdetox32@gmail.com
 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): 01
 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: GY4711R
 Vehicle Make/Model: Toyota Hiace
 Name DRIVER: Koh Hwee Meng
 IC No. DRIVER: S1801267G
 DRIVER'S Contact & add: _____

Vehicle Reg No: GBH 8390F
 Vehicle Make/Model: Toyota Hiace
 Name DRIVER: Ng Kim Seng
 IC No. DRIVER: S7A 71446A
 DRIVER'S Contact & add: _____

Injury

Ganesan Babu. — Male.

Motor Commercial

MZ407/C

E SN

AN0478A

Cov. Type: F

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.

DMCVSNA00029482000

Engine No.: 1KD1633201

Cha. No.: JTFNT24Y105000091

**1 Index Mark and Registration
Number of Vehicle**

GBA3109Y

2 Name of Policy Holder

SKYLINK VEHICLE RENTAL PTE LTD

**3 Effective date of the Commencement of
insurance for the purposes of the Regulations,
Ordinance or Enactment**

15/09/2020

Excess Sect. II S\$2,000.00

4 Date of Expiry of Insurance

22/04/2021

5 Persons or Classes of Persons entitled to drive*

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*

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

* 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.

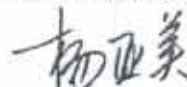
I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

Issued By


Authorized Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorized Signatory