

NATIONAL Assessment Centre Services.

Jan 1 Jan 2001

SN: 08311F0004

| | | | |
|---------------------------|---|-----------------------|---------|
| Date In: 15/01/2021 15:08 | Job description | Date & Time Completed | Done by |
| Ref No: W68109210007457 | SAS e-illing | | |
| Veh No: SCT 3852C | E-mail (6 Jula 3hrs, A/C 3hrs) | | |
| D.O.A: 16/09/2020 10:05 | I-Motor Claims Form | | |
| OD: TP: Reporting Only | I-Motor W/O (W/Incl: OD 3hrs, TP 4hrs) | | |
| TP Insurer: | I-Photo Uploaded | | |
| | Assessment/Survey Report | | |
| | Ass't Report by Fax / Hand to Owner/Witness | | |

Preferred Wkep / INC Assign Wkep / QW: () Tel: () Fax: ()

TP Particulars: Vch No: SMC 5183K 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 repair.

() 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: _____

| | | |
|---------------------------------|--|------------|
| Driver/Owner: | 1) All Accident Reporting (\$30) | |
| Contact No: | 2) DA + Damage Assessment (\$100) | INC (\$10) |
| Damaged Portion: | 3) TP Towing Fee | \$40/\$43 |
| QC Checked by (Engr-In-Charge): | 4) PT Follow-Through Survey | \$120 |
| | 5) PT Follow-Through Survey (Resurvey) | \$30 |
| | 6) TR: Re-inspection | \$73 |
| | 7) NI: Idea DA + SMRT Survey | \$160 |
| | 8) NTUC Additional Services: | |
| | ON: | \$3 |
| | *NI: Courtesy Car / Tpt Allowance | \$10 |
| | *NI: Repair Coordination | \$23 |
| | *NI: Post Repair Inspection | \$3 |
| | *NI: DY / Collect Excess Coordination | \$20 |
| | TP (NI) + TP (NI) INC + Late DNG | \$0 |
| | 9) NI: Idea Mobile | |

Invoice dated _____ Fee Charged _____

Invoice dated _____ Fee Charged _____

MA9710624

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 | 15/01/2021 15:08 (SGT) |
| Date of Accident | 16/09/2020 10:05 (SGT) |
| Exact Location of Accident | PIE, Singapore |
| Additional Location Information | AFTER PAYA LEBAR EXIT |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SKT3852C |
| INSURED/POLICYHOLDER | |
| Is company? | Yes |
| Name Of Registered Owner | GO-RENT PTE LTD |
| Company Reg No | 2XXXXX747D |
| Email Address | xdetox32@gmail.com |
| Mobile Phone No | (Phone) +65-92223331 |
| Alternative Phone No | +65-91154422 |

VEHICLE PARTICULARS

| | |
|--|---------------------|
| Manufacturer | Volkswagen |
| Model | Golf |
| Variant | - |
| 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 - Reporting only |
| Vehicle Category | Commercial vehicle |

INSURANCE COMPANY

| | |
|---------------------------|-------------------------|
| Name of Insurance Company | China Taiping Insurance |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | DMHCSNA00000742000 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------------|
| Name of Driver | YAZID MUNIR SUNGKAR |
| NRIC No | SXXXX479D |

| | |
|--|------------------------------|
| Date Of Driving Pass | 27/10/2012 |
| Driving experience | 7 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-91154422 |
| Alt. Phone Number | - |
| Email Address | xdetox32@gmail.com |
| Address | BLK 607 BEDOK RESERVOIR ROAD |
| Address complement | #02-624 |
| Postcode | 470607 |
| 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 - Head to Rear |
| Weather Conditions | Clear |
| Road Surface | Dry |

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? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| 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 | SMC5183E |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | - |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |

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

STANDOFF AND NOTICE

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.

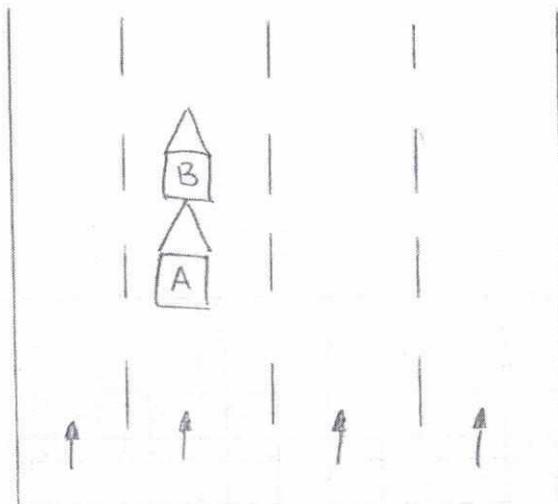


Policyholder's Signature
Date & Time:

[Handwritten Signature]

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

[Handwritten Signature]
15/01/2021
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



A: SKT3852C

B: SMC5183E

PIE TUAS After Paya Lebar Rd

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above stated date and time, I was traveling along
 PIE TUAS After Paya Lebar Rd. I was traveling straight when
 Suddenly vehicle B Jammed brake abruptly and I couldn't
 stop in time and collided on to vehicle B rear portion.

DECLARATION

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


 Police Officer's Signature
 Date & Time:


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


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

5

Date of Accident : 16/09/2020 Accident Time: 1005 (24-HR-FORMAT)

Accident Place : PIE TUAS After Paya lebar Exit

Vehicle Reg. No (Car plate No.) : SKT 3852 C Vehicle Make/Model: Volkswagen Golf

Insurance Company : China Taiping Policy No. DMHCSNA 00000 742 000

Name of Registered Owner : Company / Individual Go-Rent Pte Ltd

ID of Registered Owner : Co Reg No: 2018 24747 D Owner's NRIC No: _____
 Co Contact No: 9222 3331 Owner's Contact No: _____

DRIVER'S Name : Yazid Munir Sungkar DRIVER'S NRIC No: 58511479D

DRIVER'S Date of Birth : 12/04/1985 DRIVER'S License Pass Date 27/10/2012

Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Hirer

DRIVER'S Address : Blk 607 Bedok Reservoir Road #02-624 S(470607)

DRIVER'S Contact No./ Alt No. : 1) 9115 4422 2) _____

DRIVER'S Occupation : INDOOR INDOOR (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: <u>SMC 5183 E</u> | 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: _____ |

Go-Rent Pte Ltd

Office Address: 2 Venture Drive #14-28 Vision Exchange Singapore 608526

AUTOMOBILE LEASE AGREEMENT

Agreement No.: SK001424

Agreement Date: 09.04.2020

| | | | |
|---------|--|------------|------------|
| Lessor | Go-Rent Pte Ltd | ROC No. | 201824747D |
| Address | 2 Venture Drive #14-28 Vision Exchange S(608526) | Office No. | 6904 8608 |

| | | | | | |
|-------------------|--|---------------|------------|------------|----------|
| Lessee | YAZID MUNIR SONG SUNGKAR | NRIC/UEN No. | S8511479D | Contact 1 | 91154432 |
| Address | BLK 607 BEDOK RESERVOIR #02-590 S470607 | | | Contact 2 | |
| Email Address | yazidsungkar@rocketmail.com | Date Of Birth | 12.04.1985 | Contact 1 | |
| Address | | | | Contact 2 | |
| Company | | | | Occupation | |
| Co. Address | | | | | |
| Driving Pass Date | 27.10.2012 | Driving Class | 3 | D.O.Birth | |

| | | | | | |
|-------------------|--|---------------|--|------------|--|
| Co-Lessee / GTR | | NRIC/UEN No. | | Contact 1 | |
| Address | | | | Contact 2 | |
| Named Driver 2 | | NRIC/UEN No. | | Contact 1 | |
| Company | | | | Occupation | |
| Co. Address | | | | | |
| Driving Pass Date | | Driving Class | | D.O.Birth | |

DESCRIPTION OF VEHICLE(Personal/Private Hire)

| | | | |
|------------------|----------------------------|-------------|---------------|
| Registration No. | SKT 3852C | Colour | BLACK |
| Make / Model | VW GOLF | Chassis No. | AS PER RECORD |
| Reg. Date | ** (New / Used) 03.06.2015 | Engine No. | AS PER RECORD |

TERMS OF RENTAL PAYMENT & PERIOD 1 DAY FREE RENTAL

| | | | |
|--------------------|-----------------|----------------------------|------------------------------------|
| Leasing Period | 1 MONTH | Deposit | \$500 TOP UP WEEKLY |
| Leasing Start Date | 09.04.2020 | 1 st Rental Fee | \$500 (RENTAL \$256 + DEPOSIT 244) |
| Leasing End Date | 09.05.2020 | Weekly Rental Fee | \$256 |
| Termination Charge | AS PER CONTRACT | Weekly Rental Due on | EVERY WEEK 8PM |

ADMIN CHARGE \$150
APPLIES FOR AHU STICKER

\$500 PAYMENT
09.04.2020 15:44:10

1. Payment of deposit & 1st rental fee must be cleared upon collection of the car from Go-Rent Pte Ltd.
2. Subsequent weekly rental fee can be made by telegraphic transfer to: **DBS : 072-003207-1** (with clear indication of the car registration number on remarks).
3. In the event that the Lessee decided to cancel a reservation whereby a booking deposit has already been placed, there shall be no refund on the deposit collected. Strictly no refund after deposit.
4. You shall pay Go-Rent Pte Ltd a late fee of 5% of the late weekly / monthly payment, and an admin charge of S\$25 for each late payment which is not paid within 1 days.

VEHICLE DELIVERY

| | | | | | | |
|---------------------|---|------------|------|--------|-----|-----------|
| Vehicle check out | Date | 09.04.2020 | Time | 1500HR | By: | DAVE / SK |
| Vehicle is due back | Date | | Time | | By: | |
| Vehicle returned | Date | | Time | | By: | |
| Late Return | Every late hour is chargeable at S\$10 for cars below 1600cc and below; S\$20 per hour for cars above 1600cc up to the 4 th hour. Further delays will result in the Lessee(s) being charged for a whole day rental for that particular vehicle. | | | | | |

OTHER TEMRS

| | |
|----------------------|--|
| Belonging | All belonging left in cars will be discarded. |
| Excessive wear & use | You may be charged for excessive wear based on our standard for normal use and for mileage in excess of _____ kilometer (Clause 7.1.10) |
| Insurance | Mandatory excess of S\$6,000.00 before GST (in Singapore) in respect of each and every single accident. Mandatory excess of S\$8,000.00 before GST (in Malaysia) in respect of each and every single accident. |
| Others | Shall you failed to make / clear any due payment to Go-Rent Pte Ltd and result in towing of the rental / leased vehicle, charges of towing fee, lost of keys charges, vehicle repair charges, admin fee etc will be charged. |

By signing below, you acknowledge that you have read the entire Lease before signing it, and both you and we agree to the terms, conditions and obligation of the Lease.

| | |
|----------------------------------|-----------------------------------|
| Signed By Lessee | Signed by Lessor: Go-Rent Pte Ltd |
| X | X |
| Name / NRIC: YAZID MUKER SUNGKAR | Name / NRIC: Dave Lee S7532623H |
| X | |
| 58511479D | |
| Name / NRIC: | |



For Singapore Usage only.

Additional Premium for Malaysia Usage applies.

Only Applicable to Named Driver Stated In the Contract.

Vehicle must be washed and vacuum upon returned.

Smoking is prohibited in Vehicle. Penalty of \$150 will be imposed if Vehicle is returned in such condition.

Motor Vehicle

MZ406L/B

N SN

AN0214A

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. | DMHCSNA00000742000 | Engine No.: CJZ602935 | |
| 1. Index Mark and Registration Number of Vehicle | SKT3852C | Cha. No.: WWWZZAUZFW270482 | |
| 2. Name of Policy Holder | GO-RENT PTE. LTD. | AUTOSAFE | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment | 30/01/2020 | Excess Sect I. | S\$3,000.00 |
| 4. Date of Expiry of Insurance | 29/01/2021 | Excess Sect. I (Outside Singapore) | S\$4,000.00 |
| | | Excess Sect. II | S\$3,000.00 |
| | | Excess Sect. II (Outside Singapore). | S\$4,000.00 |
| | | EX ON WINDSCREEN. | S\$100.00 |

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.

ANY EMPLOYEE OF THE COMPANY

ANY AUTHORISED HIRER/DRIVER

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. : TAI HUAT CREDIT PTE LTD AS HP OWNER

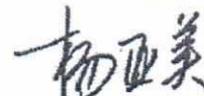
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

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: Chua Suat Lay Sally
 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

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SNEB211F0004 Vehicle Registration No: SKT 3852C
 Name (as shown in NRIC) : YAZID MUNIR Samskar NRIC/FIN/Passport No : Sxxxx479D
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : _____ Singapore ()
 Contact (Tel) : _____ Mobile No. : 91154422
 Email Address : _____
 Date of Accident : 16/09/2020 Time of Accident : 10:05
 Place of Accident : Pike at the Bay Landed Exit
 Insurance Company : China Re P&A

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

DATE OF ACCIDENT TO 16/09/2020

Policyholder / Driver's Signature
Date:

[Signature] 15/10/2021
Reporting Centre Personnel's Signature
Name: