NATHONAL Assessment Centre	Services.	Just 1 Janog . *	: SN 09	211 R00	01	*
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TP Particulars: Veh No: GI	3K 3922 M	, INC(.)/Non-IN	Ö(+).		
Owner / Driver: (Tcl:)	
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SN09211R0001 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 27/01/2021 09:37 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (27/01/2021 09:37 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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.

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 27/01/2021 09:37 (SGT) Date of Accident 07/01/2021 13:30 (SGT) Exact Location of Accident Tembeling Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SMM9463R

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ADVANCE CR PTE LTD Company Reg No 2XXXXX997M Email Address PEIJIE@EXPRESSCAR.COM.SG Mobile Phone No (Phone) +65-91998131 Alternative Phone No. +65-91998131

VEHICLE PARTICULARS

Manufacturer

Model Noah Exact purpose for which vehicle was being used at time of Private hire accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance Type of Coverage ThirdPartyFireTheft Fleet Policy No Policy Number DMHCSNA00001932000 Cover Note Number

DRIVER

Name of Driver HISHAM BIN JUMA'AT NRIC No SXXXX871G Date Of Birth 27/08/1975 Occupation Outdoor

Date Of Driving Pass 26/09/2000 Driving experience 20 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-94681306 Alt. Phone Number Email Address PEIJIE@EXPRESSCAR.COM.SG Address BLK 221 BOON LAY PLACE #14-106 Address complement Postcode 640221 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 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 injure 1 conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 2 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name Gender Female 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 REFER TO STATEMENT. ATTACHMENT (S) Are accident photos available for attachment? Yes Was there any allow captured by Car Camera? No Was there any midlo recorded? No DETAILS OF OTHER VEHICLE PROPERTY 1 Vehicle Registration Number **GBK3922M** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Drive

Contact Number

Address	40
Address complement	- 0
Postcode	į.
nsurance Company Name	_
Nature Of Dan ang	101
Details of organizations and in perident	- 0
No. Of Passes are (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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)
 - 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: 20 01 21

Driver's Signature

(If driver is not the policyholder)

Date & Time: ノン(011 ユ)

the

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN				
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CLARATION				
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wholder's Signature	Driver's Signature (If driver is not the poli		Reporting Ce Name:	ntre Personnel's Signature







Motor Hire Car

MZ406L/B

N SN

BROOBSA

Cov. Type F

CERTIFICATE OF INSURANCE otor Vehicles (Third-Party Risks and Componisation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Componisation) Rules: 1960 Road Transport Act 1997 (Malaysia) Motor Vehicles (Third-Party Risks) Rules: 1959 (Malaysia)

CERTIFICATE No.

DMHCSNA00001932000

Engine No.: 2ZR0E01701 Cha. No. ZWR800396260

1. Index Mark and Registration

SMM9463R

Number of Vehicle

2. Name of Policy Holder

ADVANCE CR PTE, LTD.

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

4. Date of Expiry of Insurance

24/03/2021

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 disgualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor

- Use for the camage of passengers or goods in connection with the Policyholder's business.
 Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- Use for racing, pace-making, reliability trial or speed-testing.
 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)

13 Anson Road #16-00 Springleaf Tower Singapore 079909

O63896111

6222 1033

www.sg.cntaiping.com

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reason the vehicle d prior to the comm en commencemen an alternative vehi i alternative vehicle teposit (if any) pair shall have no other o deposit is paid, the

during the perio taken delivery ling which the Ow shall be recovera

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Vehicle insurance I ated in the current

of hire, the Hirer shi ccessories and equi stations in as god collected by the Hil

by the Owner in a ment shall prejudice der nor shall any w ent or continuing bra

required cash card w ne ERP system.

of the hired vehicle at rejudice.

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: Hisham Bin Juma'at

Nric No: S7524871G

Having his residential address at: Blk 221 Boon Lay Place #14-

106 S640221

Tel. (Residential) : 94681306 Next of Kin Contact: 89401301(wife)

Hereinafter also known at the 'The Hirer' of the other part

Additional Driver

Name:

Nric No:

Having his residential address at:

Tel. (Residential)

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 ins of the agreement vehicle with the belo w details, hereinafter referred to as 'The Vehicle" with the terms & conditions set out in The Agreement Contained herein: -

ref or any person to VEHICLE AND LEASE PERIOD

ehicle nor shall the O es or things not beldMake & Model: Toyota Noah the vehicle at the tim

Registration No: SMM9463R

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: 12Months Contract r shall indemnify the

med to have extended return the said vehicle ne said vehicle upon thi acement vehicle hired The Owner's Initial & Stamps]

e said vehicle.

The Hirer and/or Additional Hirer Initial & Stamps 30-Jul-2020

Linh

Date	of Accident	07/01/2021 Accident Time: 1330WS (24-HR-FORMAT)
Accid	lent Place	: Junction of tembeling Road Twrds Joo Chiat Place
Vehic	le Reg. No (Car plate No.)	SUM9463R Vehicle Make Model: Toyota Noah
Insura	ince Company	China Taiping Policy No. DMHCSNA00001932000
Name	of Registered Owner	: Company / Individual Advance of Pte. Ltd.
ID of	Registered Owner•	: Co Reg No: 201320997M Owner's NRIC No:
		: Co Contact No: 91998131 Owner's Contact No:
DRIV	ER'S Name	Hisham Bin Juma of DRIVER'S NRIC No. 575248719
DRIV	ER'S Date of Birth	27/08/1975 DRIVER'S License Pass Date 26/09/2000
Relatio	onship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others: Driver
DRIV	ER'S Address	BIK 221 Boon Lay Place #14-106 8(640221)
DRIV	ER'S Contact No./ Alt No.	1) 9468 1306 2)
DRIV		: INDOOR \OU DOOR (eg. working inside or outside of an ofc)
Email	Address	peijie @ expresscar. com.sg
Weathe	er & Road Surface	CLEAR & DRY \ RAINING & WET \AFTER RAIN & WET
Report		Reporting Only Claim Other Party Claim Own Insurance
Was the Was the	er of Passengers (including Dri e accident reported to the polic ere any video Captured by car	ver): I Famale I Male
		Party Driver's Particulars (if any)
Vehicle I	Reg No: GBK3912M	
Vehicle 2	Make Model:	
Name DF	RIVER:	Name DRIVER:
	RIVER:	
DRIVER	'S Contact & add:	DRIVER'S Contact & add:

*