

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	08/02/2021 20:05 (SGT)
Date of Accident	07/02/2021 13:20 (SGT)
Exact Location of Accident	256 Bangkit Rd, Singapore 670256
Additional Location Information	ALONG ROAD SIDE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK6157K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	FLUX MOTOR RENTAL PTE LTD
Company Reg No	2XXXXX858C
Email Address	yongleeong@gmail.com
Mobile Phone No	(Phone) +65-93929069
Alternative Phone No	+65-93929069

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNA00087012000
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD AMEENUDDIN BIN JOHA
NRIC No	SXXXX421I
Date Of Birth	25/06/1996
Occupation	Outdoor

Date Of Driving Pass	24/09/2016
Driving experience	4 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98522415
Alt. Phone Number	-
Email Address	yongleeong@gmail.com
Address	BLK 344 CLEMENTI AVENUE 5 #06-108
Address complement	-
Postcode	120344
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	Clear
Road Surface	Dry

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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Male

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	SJP6925P
Vehicle Manufacturer	Toyota
Vehicle Model	Vios
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
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	YM2725P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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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.



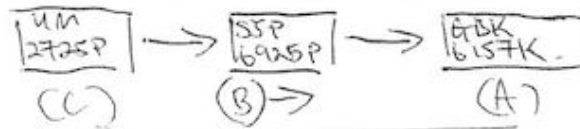
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

BLK 256
Bangkit Road



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car (A) was stationary along BLK 256 Bangkit Road when suddenly car B bang me from my back. A third party was also involve in the accident.

DECLARATION

I/We, the undersigned, declare that the particulars are true in every respect.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Reporting/Assessing Person's Signature
Name:







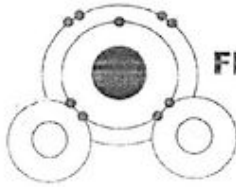










**FLUX MOTOR RENTAL PTE LTD**

Trusted. Reliable. Affordable.
Business Reg No : 201925858C

Main Office: 55 Serangoon North Ave 4 #02-11 S(555859)

Tel: 6226 6116 Fax: 6226 6118

Workshop: 55 Serangoon North Ave 4 #02-10 S(555859)

Lease Agreement Contract No: 20201016001

Date: 16/10/2020

This Rental Agreement made between us, FLUX MOTOR RENTAL PTE LTD (UEN: 201925858C) (hereinafter to be referred as "the Company", identified as the Leaser AND YOU, the person(s) identified as the Hirer below :

NAME OF HIRER(S) (IN FULL) : ARISING CLEANING MANAGEMENT PTE LTD

NRIC/PASSPORT/RC/RB NO. : 201937036H

ADDRESS : APT BLK 717A WOODLANDS DRIVE 70 #04-14 SINGAPORE 731717

CONTACT NUMBER : 88914491/84981216

PERSON IN CHARGE : SUYADI BIN SUJAYA

NAME OF DRIVER(S) (IN FULL) : SUYADI BIN SUJAYA

NRIC/PASSPORT NO. : S9605576H

DATE OF BIRTH : 21/02/1996

DRIVING LICENSE NO. : S9605776H

LICENSE ISSUE DATE : 22/01/2019

ADDRESS : APT BLK 717A WOODLANDS DRIVE 70 #04-14 SINGAPORE 731717

1. DESCRIPTION OF VEHICLE

REGISTRATION NO. : GBK 6157 K
MAKE/MODEL : HIACE MANUAL
COLOUR : SILVER
ENGINE NO. : 1KDB048621
CHASSIS NO. : JTFHT02P400250692

2. PERIOD OF LEASE

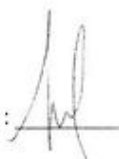
Monthly Basis

From 16/10/2020 ("Commencement Date") to 16/10/2021 ("End Date")

Upon the expiry of the Lease Period, unless this Agreement has already been terminated or the Hirer has served the required notice of termination pursuant to the terms herein, the lease of the vehicle under this agreement shall be renewed automatically on a monthly basis commencing the day immediately after the End date on the same terms and conditions herein.

Return Date: 16/10/2021

Page | 1

Hirer Signature : 

3. LEASE CHARGES

Amount of SGD\$ 1400 per month (collectively, "Lease Charges") payable in advance on 15th of each month ("Payment Date").

If the Payment Date falls on a non-business day, the Hirer shall make payment of the Lease Charges on the Business Day immediately prior to the Payment Date. Timely payment is to be expected.

4. DEPOSIT

Amount: SGD\$ 1000

5. INSURANCE, ROAD TAX AND MAINTENANCE

The Company will be responsible for the road tax, maintenance, insurance, and servicing of the Vehicle. The insurance coverage for the Vehicle will be as follows. The Hirer is to strictly comply with the terms and conditions of the insurance policy.

Excess Amount	:	As stated in the Terms and Conditions annex
Insurance Coverage	:	Third Party Insurance Policy
		Others

6. PURPOSE OF USE

Domestic / Commercial / Others* _____

7. EARLY TERMINATION OF AGREEMENT

The Hirer shall be liable to the Company for early termination as stated under the Terms and Conditions in the annex.

8. MODE OF PAYMENT

Cash payments are to be made over the counter at the Company's Main Office registered address as stated above.

Bank transfer account number: UOB Current Account 344-313-7244

Company Paynow account number: 201925858C

Cheque can be made payable to: **FLUX MOTOR RENTAL PTE LTD**

Any payments sent to the Company by post will be at your own risk.

The Agreement Contract herein comprises of the information above and the Terms and Conditions in the annex. The Hirer hereby confirms that he has read, understood, and agreed to the Agreement Contract and Terms and Conditions. I, the Hirer and/or driver(s) understand the Agreement Contract and Terms and Conditions, which were explained to us by the Company's staff. Should there be any breach of the terms of the Agreement Contract herein, all costs and expenses (including legal costs on an indemnity basis) will be borne by the Hirer and Guarantor. Once the Agreement contract has been signed, all Lease Charges and Deposits are not refundable in accordance with the terms herein.

IN WITNESS whereof the Parties hereto have agreed on the day and year above written.

Signed by the Hirer



Name: _____

Designation:

Company Stamp:

Page | 2

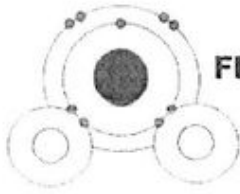
Signed for and on behalf of FLUX MOTOR RENTAL PTE LTD

Name: Xiao

Designation:

Company Stamp:

Hirer Signature : _____



FLUX MOTOR RENTAL PTE LTD

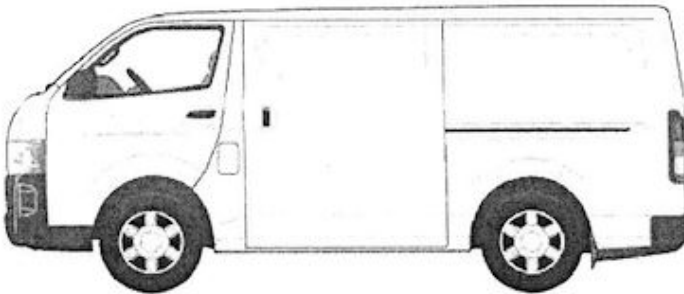
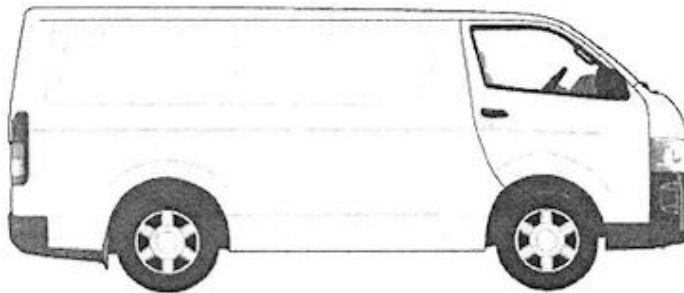
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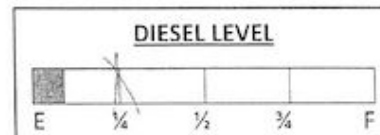
Workshop: 55 Serangoon North Ave 4
#02-10 S9 Building Singapore(555859)
Tel: 6226 6116 Fax: 6226 6118

VEHICLE CHECKLIST FORM

AGREEMENT NUMBER: 20201016001 VEHICLE NUMBER: SRK 6157K
HIRER NAME: Arising Cleaning Management
HIRER CONTACT NUMBER: 88914491
HIRER ADDRESS: _____
RELEASE DATE & TIME: 16/10/2020 2000 RETURN DATE & TIME: 16/10/2021



SERVICING DECAL	<input checked="" type="checkbox"/>	RADIO	<input checked="" type="checkbox"/>
TOOLS	<input checked="" type="checkbox"/>	SPARE TYRE	<input checked="" type="checkbox"/>
BREAKDOWN SIGN	<input checked="" type="checkbox"/>	SPEED LIMIT STICKER	<input checked="" type="checkbox"/>
F/CAMERA	<input checked="" type="checkbox"/>	R/CAMERA	<input checked="" type="checkbox"/>



REMARKS: Brand New vehicle

NOTE**

HIRER AGREES TO THE ABOVE CONDITIONS OF THE VEHICLE

HIRER AGREES TO ABIDE TO TERMS AND CONDITIONS AS STATED IN THE AGREEMENT

PENALTY OF \$40+ DIFFERENCE OF DIESEL LEVEL IF DIESEL LEVEL IS RETURNED LOWER THAN ABOVE MARKED LEVEL.

HIRER SIGNATURE: [Signature]
MILEAGE RELEASE: 11 km
MILEAGE RETURN: _____

RELEASE BY: _____
RELEASE DATE: _____
RELEASE TIME: _____