

NATIONAL Assessment Centre Services.

[ver 1 Jan 08]

SN0821300002

Date In: 24/03/2021 15:49	Job description	Date & Time Completed	Done by
Ref No: NPA/INC 20032874	SAS e-Milling		
Veh No: PRE 0034 H	E-mail (Vehicle Mtr, A/C Mtr)		
D.O.A: 05/03/2021 17:22	I-Motor Claims Form	MT112019-002	24/03/2021 15:55
QID: TP / Reporting Only	I-Motor W/O (With/Out OD Mtr, TP Mtr)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Victim		

Preferred Wkep / INC Assign Wkep / OW: (Tel:	Fax:
TP Municipality: Vch No: SW 88979	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 reporter.

() 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: _____

NA2102072

Driver/Owner:	1) All Accident Reporting (500)	
Contact No:	2) DA1 Damage Assessment (\$100)	INC ()
Damaged Portion:	3) TP Towing Fee	\$120
QC Checked by (Engn-In-Charge):	4) PT Follow Through Survey	\$30
	5) PT Follow Through Survey (Resurvey)	\$30
	6) PT Follow Through Survey (Resurvey) (over 10 min)	\$75
	7) NI / DA + SMRT Survey	\$160
	8) NTUC Additional Services	
	9) NI / DA + SMRT Survey	\$3
	10) NI / DA + SMRT Survey	\$10
	11) NI / DA + SMRT Survey	\$20
	12) NI / DA + SMRT Survey	\$3
	13) NI / DA + SMRT Survey	\$25
	14) NI / DA + SMRT Survey	\$30
	15) NI / DA + SMRT Survey	
	16) NI / DA + SMRT Survey	
	17) NI / DA + SMRT Survey	
	18) NI / DA + SMRT Survey	
	19) NI / DA + SMRT Survey	
	20) NI / DA + SMRT Survey	

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	24/03/2021 15:49 (SGT)
Date of Accident	05/02/2021 17:23 (SGT)
Exact Location of Accident	Serangoon Rd, Singapore
Additional Location Information	TOWARDS BARTLEY ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE8031H
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	RENT 2 WHEELS
Company Reg No	5XXXX944L
Email Address	miloloved@gmail.com
Mobile Phone No	(Phone) +65-85888353
Alternative Phone No	+65-90296641

VEHICLE PARTICULARS

Manufacturer	Yamaha
Model	T135
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	Motorcycle
Transmission	Manual
CC	135

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	ThirdParty
Fleet Policy	No
Policy Number	5120477657
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD NURAILNIL BIN SHAROM
NRIC No	TXXXX325A

Date Of Birth	06/07/2000
Occupation	Indoor
Date Of Driving Pass	03/10/2019
Driving experience	1 YEAR AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90296641
Alt. Phone Number	-
Email Address	miloloved@gmail.com
Address	BLK 214 LORONG 8 TOA PAYOH
Address complement	#15-749
Postcode	310214
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	SLJ8897G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ADIE ARIES BIN KASIN
NRIC No	SXXXX385E
Contact Number	(Phone) +65-98514184
Address	-

• Address complement	-
Postcode	-
• Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

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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**.
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5. **Any false reporting may be referred to the Police for investigation**.
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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.

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.



Policyholder's Signature / Date & Time

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

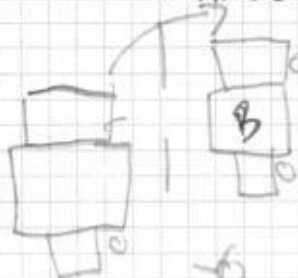
Witnessed by Reporting Centre Personnel

Sketch Plan

UPPER SHANGHAI RD TOWARDS BANGKAY

A) PRE 8034

B) SLJ 8897H



Describe Circumstances of the Accident


On the first lane Seranggon to banting. The condition of the road was jam. So I was riding under the speed limit and was not tail gating when a car from the second lane swerve into the first lane in jam road that forces me and the driver in front to jam break and collide. #

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

 24/march/2021

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

 24/03/2021

Witnessed by Reporting Centre Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: (5 / 2 / 2021) (DD/MM/YYYY), TIME: (5 23) (HH:MM)

LOCATION: Seranggon towards banting

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: FBE 8031H
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5120477657
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Yamaha Sport
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Normal riding
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Rent 2 wheel (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: CONTACT:
c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Muhammad Nuradilnu Bike Shop (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: 7002232x18 CONTACT:
c) ADDRESS: 115-119 (310214)

* d) DATE OF BIRTH: () (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 21/02/2019

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / (NO))
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Rental

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLI 8897G MODEL:
b) DRIVER'S NAME: NIE Aides Binkasin
c) NRIC/FIN/PASSPORT: 57410385E CONTACT: 9851 4184

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
e) DRIVER'S NAME:
f) NRIC/FIN/PASSPORT: CONTACT:

Email: = milokwed@gmail.com

VIDEO

Claim Handling

Accident MT/1120779

Policy No.	5120477657	Vehicle No.	FBE8031H	GST Registration No.
Certificate No.				
Policyholder Name	RENT 2 WHEELS			Policyholder NRIC
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	10/02/2021 14:41	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	05/02/2021	Time of Accident hh:mm	17:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG BRADELL ROAD			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess	0.00	TP Standard Excess	0.00	Driver is Covered?
YIED OD Excess		YIED TP Excess		
Additional Excess				
Total OD Excess Applicable	0.00	Total TP Excess Applicable	0.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	10/02/2021 14:42:20 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	25 KAKI BUKIT ROAD 4	Address 2	#03-24 SYNERGY @ KB	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	03-24	Related Policy Number	5120499091	

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC		Driving Experience
Register Date of Driver License		Driver Age		Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1		Address 2		Post Code
Address 4		Address Type	Foreign address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company

Modification History

Claim 002 **New**

Claim Type *	OD-MX	Insured Name	RENT 2 WHEELS	Insured NRIC
Contact No.(Mobile)	81801342	Contact No.(Home)	NIL	Contact No.(Office)
Email Address		OI Vehicle Number	FBE8031H	TP Vehicle Number
Claim Description	FBE8031H / SLJ8897G ON 5 Feb 2021			
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	Name of Preferred Workshop
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	24/03/2021 15:53	Claim Close Date		Date Received
Report Taken By	ROSLI WAHAB			
<input type="checkbox"/> Print AK letter				
<div>Save Submit</div>				

Attachment



Accident No.	MT/1120779	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	24/03/2021 15:55
Path *		Category *	Confidential Urgen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen



Choose File No file chosen

Choose File No file chosen

Remove Photo

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:55	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	Photos		Normal	Photos 2021-3-24
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 24 Mar 2021 15:53	SAS		Normal	SAS 2021-3-24

Video List

Uploaded By/Date	Folder Date	File Name		Sou
		Display in New Window	Scan and uploading	

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5120477657

Cover : Third Party

1. Index mark and Registration Number of Vehicle : FBE8031H
Chassis Number : SYP302724
2. Name of Policyholder : RENT 2 WHEELS
3. Effective Date of Insurance : 31 Dec 2020
4. Expiry Date of Insurance : 30 Dec 2021
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.
This Policy does not cover
(a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : SININS AGENCY PTE. LTD. (00000615123)
Date of Issue : 31 Dec 2020 14:33 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

Our Ref: MT/CA/TP/059/1120779-001/CY/VU

10 Feb 2021

RENT 2 WHEELS
25 KAKI BUKIT ROAD 4
#03-24 SYNERGY @ KB
SINGAPORE 417800

Dear Policyholder

CLAIM NUMBER: MT/1120779-001
ACCIDENT INVOLVING FBE8031H / SLJ8897G on 5 Feb 2021

We would like to inform you that a claim for S\$3,074.68 has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely



Goh Peng Hong
Manager
Motor Insurance

RENT 2 WHEELS

Reg. 53425944L

**25 KAKI BUKIT ROAD 4 #03-24
SINGAPORE 417800**

Handphone 85888353

RENTAL AGREEMENT

Hirer's name: Muhammad Nuzaidilhil Bin Shurur NRIC: T0022325A
Address: Blk 214 Long 8 Tan Payoh #15-749 HP No.: 9026 9029 6641
S 30214

Rental DetailsLicense Plate: FBE 503114Make/ Model: Yamaha / sport 135Start Date: 5/01/2021Return date: 24/3/2021

Authorised Rider (Hirer) - Hirer must produce a valid Singapore NIRC and Class 2B license. The Hirer is NOT ALLOWED to sublet or lend the hired vehicle to a third party, during or within the rental period. If the vehicle is found to be ridden by anyone other than The Hirer named in the Rental Agreement, the vehicle will be seized by The Company without any refund. If The Hirer lend the vehicle to a third party without notification to The Company, and the vehicle is involved in an accident, The Hirer will bear the whole cost of the claim and repair costs of the vehicle rented and other third party claims.

Collection & Return of Vehicle / Rental Extension - Collection of vehicle can be arrange at any time and return of vehicle is strictly before 6pm. If hirer fail to return vehicle before 6 pm, each excess hour is charged at S\$5. At any point if The Hirer wish to extend the hire period, The Hirer is to inform The Company 1 day before the return date and to make advance payment immediately for the extension period, provided the hire extension is acceptable by The Company.

Damange to Vehicle - If the vehicle is involved in an accident, The Hirer has to inform The Company, the Police or other relevant authorities in writing of the accident and shall also notify The Company in respect of any claim arising thereafter from the accident. No admission compromise offer payment or indemnity shall be made by The Hirer without The Company's consent in writing. The Hirer shall render such information and assistance in connection with the accident as The Company or its insurers may require. Lost or damage of the key will be chargeable at S\$80.00. Any damage to the vehicle will be charged to The Hirer accordingly to the repair costs to rectify the vehicle to the same condition as it was at the start of the rental.

Other Conditions - No repair & modification is to be done without The Company approval. If The Hirer is caught repairing / modifications of the vehicle without The Company Approval, compensation of S\$400.00 is payable to the company. The Hirer is REQUIRED to return the vehicle and key tag in the same condition when he / she rented from The Company. If the vehicle was used for racing without written consent, sublet / or lend without authorization by The Company, each causes will be payable as an "compensation" of S\$1,000.00 to The Company by The Hirer.



RENT 2 WHEELS

Hirer's Signature/NRIC/Date