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 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.

- 4. The issue and acceptance of this is form by instrained 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 07/07/2021 16:12 (SGT) Date of Accident 06/07/2021 15:50 (SGT) Exact Location of Accident 2 Tampines Central 5, #01-32 Century Square, Singapore 529509 Additional Location Information **CENTURY SQUARE** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SI R4244A

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner STARK HOLDINGS INN BIKE LEASING PTE LTD Company Reg No 201419069W **Email Address** starkholdingsinn@gmail.com Mobile Phone No (Phone) +65-98333880 Alternative Phone No +65-98333880

VEHICLE PARTICULARS

Manufacturer

Model Shuttle 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 - Claiming third party Vehicle Category Private car Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company Etiga Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Policy Number M0016412 Cover Note Number

DRIVER

Name of Driver **CHAN HONG WAI** NRIC No. S6931544E

Date Of Birth 09/09/1969 Occupation Outdoor Date Of Driving Pass 13/11/1995 Driving experience 25 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-98333880 Alt. Phone Number Email Address starkholdingsinn@gmail.com Address 415A NORTHSHORE DRIVE #11-547 Address complement Postcode 821415 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS WAITING BEFORE THE YELLOW BOX WHEN THE CAR C MOVED OFF, I STARTED TO MOVE OFF TO THE FRONT WHEN CAR B COLLIDED ONTO MY LEFT HAND SIDE PORTION OF MY BUMPER. THAT'S ALL. 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	SKT278E
Vehicle Manufacturer	_
Vehicle Model	_
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	_
NRIC No	S1800420H
Contact Number	_

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

SKETCH PLAN

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- 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) of:
 - 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:

201419069W

 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.

Policyholdey's Signature Date & Time: 21212

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

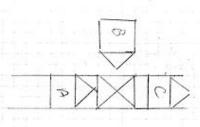
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKET	TCH	PLA	N
SILE		1.5	



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

1 was a 15 a b 1 also will b
I was waiting before the yellow box when ten (ar (c) monecl offed I Stated to more off to the frank when Car (b) collised into my left hand side of my bunger. That all.
tu (ar (c) monect offed, I Stated to more
off to due front when Car (b) colleged into
my left hand grole of my burner. That all.

DECLARATION

We declare the forgood But ticulars are true in every respect.

Policinolder's Signature 8 # 0)
Date & Time: 0 1 2

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

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

eTiQa Insurance

INTERVIEW FORM

Name (Driver)	: Chan Hon	e wai		
Policy No	7	,		
Vehicle No	:_SLR 42	44A		
Place of Accident	: beside con	tury Sq. Ter	upines Ctr	1
Insured Driver's relationship		V	1	
Drink Driving of Insured and	A. A.	P		
No of passenger(s) in Insured	vehicle:			
Injury to Insured and/or Insure				
Third Party Vehicle No (if any	O: SKTZ:	78F		
No of passenger(s) in Third Pa				
Injury to Third Party driver and			I: No	-
Type of collision and the exten	siveness of the damages	to all vehicles involved	! Heed to si	ide
Any witness to the accident (if	yes, please indicate Nam	e, Contact No and a co	py of the statement)	 No
Fraffic Police report (enclosed)	: Yes / (No)			
Please obtain a copy of the dri worker is involved)	ving licence of Insured	driver and/or work p	ermit (where forei	gn
Chas				
river (Name & Signature) affirmed the above informati	ion is given to	Attended by ()	Name & Signature)	
y best knowledge		Workshop Nan	ie;	
iqa İnstirance Berhad (Company Ro orth Bridge Road, #68-01 High Street Centr 65-6336-0477 ft: +65-6339-2109			1000	















M2400 31003841

Cov. Type: Comprehensive

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. M0016412 Index Mark and Registration

SLR4244A

Number of Vehicle 2. Name of Policyholder

Stark Holdings Inn Bike Leasing Pte Ltd

3 Effective Date of Commencement of

05/03/2021

Insurance for the purposes of the Act

Excess: Sect I Excess: Section II Excess: Windscreen

1,500

4. Date of Expiry of Insurance

07/02/2022

5. Persons or Classes of Persons entitled to drive

Engine No

: LEB4266415

Chassis No : GP71046143

Hire Purchase : Motor-Way Credit Pte Ltd

(A) THE POLICYHOLDER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS 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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION USE ONLY FOR SUCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.

THE POLICY DOES NOT COVER:

(i) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.

(ii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.

(iii) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

* 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 bindings.

Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

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).

For and on behalf of Etiqa Insurance Pte. Ltd. Approved insurer

GOPFAD 02/03/2021 11:03:09



Authorised Signature



STARK HOLDINGS INN BIKE LEASING PTE LTD Reg. No.: 201419069W

Gst No: 201419069w

149 Shun Li Industrial Park Kaki Bukit Ave 1 Singapore 416009 HP: 92201069

No: STK-6931544E

VEHICLE'S PARTICULARS Vehicle No.: SLR 4244 Model: HONDA SHUTTE	CHECK OUT / CHECK IN					
TOTAL SER TENTANCOSE HONDA SHUTTE	BATE OU	X24 TO3	DI TI	MEOUT: 170	50	HR
A	PETROV	DIESEL LEVE	1	8 1/4 3/8 1/2 5/		-
HIRER'S / GUARANTOR PARTICULARS	Dave	04 100	0.30			-
Name: Chan Hong Wall	ZY	12,1	-	ME AN	-	HR
Address: DIK DADA Punggol Walk 408-560	PERKOR	DIESEL LEVE	LIN: E 1/	8 1/4 3/8 1/2 5	/8 3/4 7/8	F
(cFC1C8)2	Late dhargers@\$30 per half hour					
PPA.C.No.: S6931544E	Cay must be washed and vacuum upon return if not \$20 will be imposed					
Contact Person: Tel: 983773880		EXT	ENSION	OF RENTAL		_
DRIVER'S PARTICULARS	-	,				
Name: Yeo kee Seng (Yang Qicheng)	Dae	I hereb	y sign	upatract	FOR	
Address: PLKIOI PASIC KIS St. 12 #12-09	Amount	TOOM CI	hs and	t be payin	10-	-
\$ (10101) 3	Expiry					-
Tel No: \$3686368	Initial			19 Weekl		-
PP.I.C.No.: S8107660Z	Initiat	Jel bire	A MONTH	marker re	rtale r	æ
Date of Birth:			CHARG	GES		1
Vationality;	Months	has t	110		Noun	
Purpose of use;	MODELLS	14 (6) 1	7 10	per month	\$1410	-
908 TADRI	Weeks	@\$		per week	,	
	Days	@\$		per day	(
	Hours	@\$		Per hour	1	
				-	-	
	7% Gst SUB-TOTAL(1)				1	
	Delivery / Collection @\$				1-/	_
FROM NEW ASAN NEW	Repairs / Damages			1	L	
UFT SDE		Friday/Saturday Return @12pm				
A-ACCIDENTS C-CRACKED D-DENTS S-SCRATCHES			TOTA	AL CHARGES	\$18,9	110
IMPORTANT: (1) ONLY persons above 18 and below 65 years of age with rain 1 years driving experience; authorized, licensed and signing this agreement may drive the vehicle: (2) THIS vehicle insurance is covered in Malaysia and is Singapore USE.	PRE-PAYMENT					
of any accident the hirer will liable for all consequences, FOR extension of tental		SECURITY DEPOSIT (\$ DED POYNOW)			T	Г
process inform us as least 24 hrs before the expiry time and payment for the extended rental, will have to be made within 24 hrs. Late charges at 1/5 (One-fith) of the daily rate of rental for each thour exceeding the time will be imposed, (4) HRER is responsible for all parking and traffic violations and missing thems. (5) HIRER is responsible for the FIRST SS 2000/- & 4000/- excess under Section 1 & it in any accident plus loss of rental income while hired variable is under report, (5) No refund with be given for vehicle returns, such and neteral.	ADVANCE RENTAL PAID				-	
	By: CASH NETS			<u> </u>		
				1	_	
diseal left in vehicle. (7) Hiver/guerantor declares that vehicle with not be used for any unlawful purposes which will result in storiciture by the relevant authorities. In event of vehicles being seized, conflictation for referred to the hiner (guerantor /rider shall indemnity. Stark Heldings Inn Bike Leasing Pte. Ltd the full value of vehicle at limeloss.		AMOUNT DUE REFUND			1	
		D	E	3Y		
				2		
RER'S DECLARATION TO the service and conditions above and as set overlead declare that 30 armatics are not first form are true and accurate.		RECEIVED S		RECEIVED:		

SIGNATURE

HIRER'S / GUARATOR SIGNATURE

DRIVER'S SIGNATURE





STARK HOLDINGS INN BIKE LEASING PTE LTD 149 SHUNLI INDUSTRIAL PARK KAKI BUKIT AVNUE 1 SINGAPORE 416009 H/P: 92201069

Email: smithstarkholdingspteltd@gmail.com

52/03/51

Letter of Undertaking

Chan Hong Wai	Nric No: _ S&97154AE
Address: BLK 570 A Punagol Walk \$08-5	would undertake that I will bear all cost
if there is any breakdown during my rent for the said vehicle	
that the above companies does not cover tyres and tyres while	the above vehicle is in my possession. I affirm that
the said vehicle above will be used by me only and not any other	er party, in the event if the said vehicle is used by
other party and if there is an accident / self-skid or claim by third	d party I will bear all claims cost and legal cost. I will
authorize the above company to claim all legal, access and rep	air costs due from me when the said vehicle is
damaged or there is a loss of use, I also would like to declare the	hat I am not a bankrupt at the point of time while riding
the above vehicle and my address, which is declared to the abo	ove company, is the true and correct address and my
license is valid. Cars should be returned to the companies above	ve in person and not leaving the cars overnight
unattended or simply leaving the Cars without prior checking be	ofore returning has, I will take full responsibility for all
damages and will be black listed by the company and will not b	e able to rent cars from the above companies. At any
point when there is an accident the excess amount will be paya	able at \$4000 for non- experience driver & third party
excess of \$2000 for experience driver. Singapore dollars withou	If prior notice. At any point of time I am authorize to
leave the country with the above vehicle, if I do so I will be	ar breakdown chargers and in the event vehicle is
lost in Malaysia I will pay the full excess amount of \$4296 t	o the above companies. Late chargers are \$20 per
half and hour if I come in later than the time I am suppose	to report. I willingly sign this letter of undertaking
without any coercion	

Your Faithfully

Name: chan Hong Mati Nic No: Sago1544E Address: PLK575A Punggot Walk # 08-563