NATI	ONAL Assessment Ce	cuire Service	Y ************************************			
Date In	19/8/21	Jeb descri		Date & Time Completed		one by
Ref No	NA (CT12100 8704	STI SAS e-fi	ling			
Veh No	SML 6357P.	1	within Shrs. AIC 2hrs)			
D.O.A	the state of the s		Claim Form			
66.3			W/O (Within: QD 2hr			
	P / Reporting Only		Uploaded	s. TP 4hrs)		
Th. I			nt/Survey Report			
TP Insui	er:		ort by Fax / Hand t	0 Own (WI		
Preferred	Wksp / INC Assign Wksp / QW:	(	ore by <u>Pax / Hand</u> (			
TP Partic		GRF 1982	D. INC (	14	×:	
Owner /	Driver: (	0(171 1182	· (). INC(	) / Non-INC ( ) Tel:		
Policy N	lo: ( )	Period: (	)	Cover Type: (	)	have a second discountry
(	Confirmed by : (		Date:	Time:	)	m - 1
Insured	Driver Liability: ( %	6) [Note-Est Statu		7thte: 9%; P: 21-79%. F: 80-10	)	
	Registration: (			770, P. 21-79%. P: 80-10	J%] 	
Excess:	/			)		M 1/2000 (**********************************
General R		, , , , , , , , , , , , , , , , , , , ,				
( ) Wa	Ik-In Current of Customeric	:-f			* *	
( ) Tot	Ik-In Customer: Customer's		Confidential & Stri	ctly NO rafer of repairer.		
	al Loss Case : to e-mail Ins		Υ.			
Drive-In (	)/ Towed-In ( ); Invo	pice: YES ( )	/ <b>NO</b> ( ) ; To	wing Co. (		)
Remarks:-	(INC horline: 6788 6616	))		Date&Time Completed	Do	
1) Apply fo		/ Courtesy Car (	)	Dateern: ie evinpie-sci	Doi	ne by
	ck / Post Repair Inspection	(				
	Resurvey Photo [Repair Cost >	\$30001	)			
Injury:		(	)			
				"		
Date/Time	Actions					
				The second secon		
				,		
	NA2104380		Invoice Prena	ration Checklist	Anit (\$)	Amt (S
laimant's P	articulars :-		1) AR : Accident Re		1st Bill	Add Bil
			2) DA: Damage As		+	+
river/Owner	:		3) TF: Towing Fee	\$40/\$45	-	
ontact No:			4) FT : Follow-Thro	ough Survey \$120 ough Survey (Resurvey) \$30		<del> </del>
amaged Daw	·		For claiming agai	nst INC Only (wef 10 Jan 2005)		†
amaged Por	HOII:		6) TR: Re-inspection 7) N1: Idae DA + S			
C Charles		-	8) NTUC Additiona			
Checked	by (Engr-In-Charge):	8	*N5: Courtesy Ca	r/Tpt Allowance \$5		
nylit i a			*N6; Repair Co-o	rdination \$10		
uditors' Co	mments :-		*N7: Fost Repair *N8: DV / Collect	Inspection \$25 Excess Coordination \$5	·	
1. 1:	To 30 1990 1990 1990		<u>TP</u> (N11) : TP (N	n INC) against INC \$20		
. 2 / 3:			9) N12: Idac Mobile Invoice dated	50		<b>医性变似地的由于一面</b>
			Invoice dateil	Fee Charged		

SN09218J0001 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 19/08/2021 12:44 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (19/08/2021 12:44 (SGT))



# 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.

  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 19/08/2021 12:44 (SGT) Date of Accident 18/08/2021 20:15 (SGT) **Exact Location of Accident** Singapore T-JUNCTION OF BUKIT BATOK WEST AVE 4 & BUKIT BATOK Additional Location Information WEST AVE 2 Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SML6357P

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner WHEELS EXPRESS RENTAL & LEASING PTE LTD Company Reg No 2XXXXX594C **Email Address** WHEELSEXPRESSRENTAL@GMAIL.COM Mobile Phone No (Phone) +65-90603343 Alternative Phone No. (Office) +65-90603343

#### VEHICLE PARTICULARS

Manufacturer Honda Model Shuttle Variant 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? Vehicle Category Transmission

CC

1496

No - Reporting only Private hire Auto

#### INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Policy Number Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd. Comprehensive

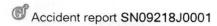
Yes

DMHCSNA00004832101

DRIVER

Name of Driver

**ROSLAN BIN ALI** 



NRIC No SXXXX284F Date Of Birth 29/06/1970 Occupation Outdoor Date Of Driving Pass 11/04/2006 15 YEARS AND 4 MONTHS Driving experience Gender Mobile Number (Phone) +65-81193640 Alt. Phone Number ROSLANBINALI70@GMAIL.COM Email Address BLK 17 TECK WHYE LANE Address Address complement #06-159 680017 Postcode 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 Wet 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 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO CIRCUMSTANCES OF ACCIDENT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBF1982D Vehicle Manufacturer

# Vehicle Model Vehicle Variant

Vehicle Colour

Vehicle Category Commercial vehicle Name of Driver RAMAN VABIVELU Contact Number (Phone) +65-85060584 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

- 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. 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 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)

Lunderstand, 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

THE STEEL ST

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

## Sketch Plan

	Bukit Batak We	et Ave 2	
Veh A-SML 6357P	7		
Veh 8-GBF1982D	<u> </u>		
		AAM	+
			+
		Bukit Bankit	
		14 1 4 12 2	

Describ	e Circun	nstan	ces of th	e Accid	ent								
As de	r ab	vie	date	and	time	, I	hes	drivin	Nam	heh:	h (Sm	L 63571	P)
alon	Bukit	Ba	Ack	nest	AVE	4	tov	driving	Ave.	2 - I	has	molina	2
a	riabo	turr	from	Bul	g+	Botok	mer	Ave	h	onto	into	B-Bertin	nest
Ave	2	on	the	T	Jan	cthr.	While	me	han -	th tur	n. bel	L(B) Su	ndolehla
colline	1 0	nto	m	iveh	icle 1	rear	right	ic ordi	m l~	ex a	hono	pautie	lan
and	124	1	the	Sci	INL .	A 10	one	parti mos	(A)	Md.		1	
- V						0	Miles and the second of the second of the second of		J				/
Veh	A - Sr	1 be	357 P										
			982 P								·	/	
											/	/	
											/		
										/			
									/				
									/				
								/					
											MM - 55 W - 5 - 5 - 5 - 5		
						/	/					A-A-C	
						/		THE STATE OF THE S	m de la				
					/								
					/								
				/	/								
				/									
					Marche Living Committee							-	
			/					<del>/</del>					
			/			e e e e e e e e e e e e e e e e e e e							
		/										***************************************	
		/										e editorio como de com	
		***************************************											
	/					**************************************	——————————————————————————————————————		2002/00/00				
	/												
	,					V							

## Declaration

 ${\ensuremath{\mathsf{IVVe}}}\ \ {\ensuremath{\mathsf{declare}}}\ \ {\ensuremath{\mathsf{true}}}\ \ {\ensuremath{\mathsf{in}}}\ \ {\ensuremath{\mathsf{every}}}\ \ {\ensuremath{\mathsf{respect}}}.$ 

STATE STATE OF THE STATE OF THE

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

VEHICLE NO: SML 6357P	MAKE & MODEL: Honda Shuttle Hybrid AUTO/MANUAL
DATE OF ACCIDENT:	181 08 1 2021 CC: 1.5
TIME OF ACCIDENT:	2015 HRS
LOCATION OF ACCIDENT:	T-Junction of Bukit Botok West Ave 4 & B. Botok West
EXACT PURPOSE USE DURING ACCIDENT:	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE Ave 2.
NAME OF OWNER:	wheele Express rental & leasing the Hd.
TEL NO:	H/P: 9060 3343 OFFICE: HOME:
NRIC:	2018 1059 46
ADDRESS:	2 Sims Close #01-08 Genin: @ Sins S(387298)
EMAIL:	Whelsexpress Cental Ogmail.com
CLAIM TYPE:	OD / THIRD PARTY / REPORTING ONLY
FLEET POLICY:	YES / NO ?
INSURANCE COMPANY:	China Taiping.
TYPE OF COVERAGE:	Comprehensive / Third Party / Third Party Fire & Theft
POLICY NO:	DMH CSN 40000 H 832 101
NAME OF DRIVER:	· · · · · · · · · · · · · · · · · · ·
NRIC:	AS ABOVE / IF NO: ROS IGN BIN Ali S7021284 F ANY PASSENGER: /(Male)
DATE OF BIRTH:	291 06 11970 LICENCE PASSED DATE: 11 1 04 1 2006
OCCUPATION:	OUTDOOR / INDOOR
GENDER:	MALE / FEMALE
CONTACT NO:	H/P: \$119 3640 OFFICE: HOME:
	17 Teck whye lane # 06-159 SC680017>
ADDRESS:	
EMAIL:	NO) IF YES, REG NO: INSURER:
DOES DRIVER OWNED ANY VEHICLE:	Hirer
RELATIONSHIP:	CLEAR / RAINING / OTHERS:
WEATHER CONDITION:	DRY / WET OTHER:
ROAD SURFACE:	NO IF YES, WHO?
ANY INJURIES:	NO/ IF YES, WHO?
NAME & CONTACT:	
NAME & CONTACT:	COLUMNIC MATERIA
POLICE REPORT:	NO / IF YES, WHERE?
NOTICE OF INTENDED PROSECUTION GIVEN?	GBF 1982 D ANY PASSENGERS: N.A.
VEHICLE B REG NO:	
NAME OF DRIVER:	Raman Vabively CONTACT NO: \$506 75 0584  ANY PASSENGERS:
VEHICLE C REG NO:	
VEHICLE D REG NO:	ANY PASSENGERS:
VEHICLE E REG NO:	ANY PASSENGERS:
VEHICLE F REG NO:	ANY PASSENGERS:
VEHICLE G REG NO:	ANY PASSENGERS:
ANY WITNESS? IF YES, NAME:	WITNESS CONTACT:
WAS THERE ANY VIDEO CAPTURE? WAS THERE ANY AUDIO RECORDED?	YES / NO
ACCIDENT SCENE PHOTOS TAKEN?	YES / NO
ACCIDENT SCENE PHOTOS TAKEN:  ACCIDENT PORTION:	3 /
Have you been approach by unknown person soliciting (s	s) / offering accident claims assistance? YES /(NO)
WORKSHOP PARTICULAR:	N-51 Automotive Ple Ltd.
CONTACT NO:	68420051 / 67440510
CONTACT PERSON:	Jun Ming.
FAX NO:	67410510
WORKSHOP EMAIL:	sales@n51.com.sg



# Wheels Express Rental & Leasing Pte Ltd

DBS CURRENT : 072-013899-6

PAY NOW UEN :

51 Ubi Ave 2, Automobile Megamart, #05-04 Singapo CHEW 9060 3343 / MARK 9832 5030 / TEO 9107 6963

Hirer's Name VEHICLE RENTAL &	LEASING AGREEMENT
NSICNO: 702/284 /F	
102/284 / 1	Herer's Contact No. 8119 36 70
11-4-2006	Next of Kin Name & Contact No (in Case of Emergency):
Address: BLK 17 TECK WHYE LOVE \$406-15	(Singapore aposi7
Office Address Full Time Dover	(Singapore )
Smk 13833 Smt 63578	Howla Stuff12
landover Time:	a months
13 - Su	Hardover Time:
ental Per Day/Week/Month:	Deposit:
# Drive gury on - 18-3-3031 cense Pass Date: Time - 11: 40pm   %	NRIC No: ** payment overy Thursday.  Contact No:
Idress:	(Singapore )
marks: insulance exces - 40500 - 6	
- \$2500 =	thing party clam.
in the event Hirer decides to terminate the contract before the contract e	

- osit will NOT BE REFUNDED, ADDITIONAL PENALTY will be enforced upon 50% of the remaining outstanding rental.
- 2. In the event Hirer decided to cancel a reservation whereby a booking deposit is already been placed, there
- shall be NO REFUND on the deposit collected. Strictly no refund after deposit.
- 3. Failing to inform us of any existing scratches, dents & faults(if any) within 30 minutes after the collection of the vehicle, repair charges will incur when the vehicle is returned.
- 4. In the event that rental payment is not paid on expected date and result in towing of the rental or leased vehicle, charges of towing fee, lost of key charges, vehicle repair charges, admin fee etc will be borne by the Hirer. Therefore all belonging left in the vehicle will be discarded.
- Wheels Express Rental & Leasing Pte Ltd shall at no time be liable for the loss of belongings left in the vehicle.
- 5. Late payment of \$10 will be imposed per day due to any reasons if rental not received on rental due date.
- 6. Upon signing the contract, Hirer will be obliged to maintain the vehicle with due diligence at our respective workshop, failing to maintain the vehicle thereafter resulting in major faults, repair cost will be borne by the Hirer.
- 7. In the event where debts collector is involved, hirer shall bear all cost for debts collector commission and admin charges

1st Party Excess: \$3000	3rd Party Excess: \$3000	CDW: Y / N (additional \$3.21/day)
* received	- \$450 MUH	CDW if yes, excess @ \$1,500
~ ^ ·	-410 will top up ment	
Lotter	week.	has the
Signature of Hirer		Signature of Authorized Person
	LOCAL TOW SERIVCE (24HRS) : 918	(0)
MALAY	SIA TOW SERVICE (24HRS) : YONG - 016-704	28211

TYRE & BATTERY SERVICE (24HRS): AH KEE 98751699

BENEFIT AUTOCARE: ERIC 9489 4845 | 11 Kaki Bukit Raod 1 #01-02 Eunos Technolink (S415939) LUSH AUTOMOTIVE: PATRICK 94357824 | 8 Kaki Bukit Ave 4, #03-47 Premier @ Kaki Bukit (S415875) AIRCON: PATRICK 94357824 | Blk 3021A, Ubi Road 1, #01-39 (\$408715)

# **Enquire Vehicl** nation

Vehicle No	riicle li	Horn
Lie M	The second second	District Land

Vehicle No. Vehicle Details

Vehicle Type

Vehicle Attachment 1:

Make / Model :

Primary Colour Year of Manufacture

Maximum Laden Weight: Unladen Weight:

No. Of Axles:

Engine No.: Chassis No.:

Motor No.:

Engine Capacity Power Rating:

Maximum Power Output:

Propellant:

Passenger Capacity:

Original Registration Date: First Registration Date:

Open Market Value:

Additional Registration Fee Rate:

Actual ARF Paid:

PARF Eligibility Minimum PARF Benefit:

PARF Eligibility Expiry Date:

COE No .:

COE Category:

COE Expiry Date Quota Premium (QP):

QP Paid:

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

CO2 Emission: CEV/VES Rebate Utilised Amount:

CO Emission:

HC Emission: NOx Emission: PM Emission:

5ML6357P

Private Hire (Chauffeur) Motor Car

No Attachment

HONDA / SHUTTLE HYBRID 1.5 AUTO

Blue

2018

1,465 kg 1190 kg

2

LEB7104084 GP72003098

H13803721

1496 cc 22.0 kW

101.0 kW (135 bhp)

Petrol-Electric

4

29 May 2019

29 May 2019

\$22,755.00

First \$20,000.00 (100%), next \$2,755.00 (140%)

\$13,857.00

Yes

\$6,928.00

28 May 2029

2019050103001621K

B - Car above 1600cc or 97kW (130bhp)

28 May 2029 \$48,000.00

\$48,000.00

No

\$48,000.00

89.00 (g/km)

\$10,000.00

0.029000 (g/km)

0.013000 (g/km)

0.006000 (g/km) 0.200000 (mg/km)

**Previous** 

OK



## 中国太平保险 (新加坡)有限公司

Motor Hire Car

MZ406L/B R SN AN0721A

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chacter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1997 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Cov. Type:C

CERTIFICATE No.

DMHCSNA00004832101

Engine No.: LEB7104084 Cha. No: GP72003098

index Mark and Registration

SML6357P

AUTOSAFE

WHEELS EXPRESS RENTAL & LEASING PTE. LTD.

Effective date of the Commercement of insurance for the purposes of the Regulation Commerce or Engineers

Excess Sect 1

\$\$2,000.00 \$\$2,000.00

Excess Sect. If EX ON WINDSCREEN

\$\$100.00

4 Date of Expiry of Insurance

21/05/2022

5. Persons or Classes of Pencins 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 regulations in that behalf from driving the Motor.

(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.: BENEFIT AUTO ENTERPRISE 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 (Melaysia), 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 (S GAPORE) PTE. LTD.

Issued By.

Chua Suat Lay Salty Authorised Officer

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

**6**6222 1033

www.sg.cntaiping.com