NATIONAL Assessment	Coure Services	Fair - Sa T g			
Date In: 01/09/21	Jcb description	n Date	& Time Completed	Done	by
Reino NA/LIP 21009172	// SAS e-filing				
Veh No SXJS13/G	E-mail (with)	Shrs. Mr. 2lus,			
DOA 31/08/21 0	830 i-Motor Cla	im Form			
OD TP (Reporting Only)	i-Motor W/	O (Within: OE 2hrs, TP 4hi oaded	3)		Ş
		urvey Report			
TP Insurer: Ass't Report by Fax / Hand to Owner/Wksp					
Preferred Wksp / INC Assign Wksp /	QW: (Tel:	Fax:		
TP Particulars: Veh N	No: PC83192	INC()/	Non-INC ()		
Owner / Driver: (Те)	
Policy No: () Period: () Cove	er Type: ()	
Confirmed by : (Date:	Times)	
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; I	2: 21-79%. F: 80-1009	/o]	
Year of Registration: () Warranty: YES ()/NO()			
Excess: (\$) Loadi	ing: \$1,000 () / \$2,000	0()			
General Remarks:-					
	; Invoice: YES () /			Done) by
Remarks:- (INC horline: 6788		Date	&Time Completed	Done	by
1) Apply for Transport Allowance ()			
2) QC Check / Post Repair Inspection)			
3) Upload Resurvey Photo [Repair	Cost > \$3000] (,			
Injury:					
Date/Time Actions					
.; Nao	103867	Invoice Preparat	ion Checklist	Amt (S) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-		1) AR : Accident Report 2) DA : Damage Assessr	nent (\$100); INC (\$80)		
		3) TF : Towing Fee 4) FT : Follow-Through	\$40/\$4: Survey \$120	-	
5) i'T : Follow-Through Survey		Survey (Resurvey) \$30	0		
6) TR: Re-inspection \$75 7) N1: Idac DA + SMRT Survey \$160			1111111111111111		
C Checked by (Engr-In-Charge)	S) NTUC Additional Services On:				
Auditors' Comments :-		*N7: Fost Repair Inspection \$25 *N8: DV / Collect Excess Coordination \$5			
at 1:	TP (N11): TP (N:n INC) against INC S20			0	Lance -
at 2/3:		9) N12: Idac Mobile Invoice dated	Fee Charged		
		Issuite dated	Fee Charret		

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

 This Form must be completed by the Policyholder and/or the Authorised Driver
 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

01/09/2021 10:48 (SGT) 31/08/2021 08:30 (SGT) BKE, Singapore TWDS PIE B4 BUKIT PANJANG EXIT 3 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLJ5121G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner

Company Reg No Email Address

Mobile Phone No Alternative Phone No Yes

WIN WIN RENT-A-CAR PTE LTD

2XXXXX115E

winwincarrental@gmail.com (Phone) +65-98330807

+65-98330807

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Toyota ALTIS

Private use

No - Reporting only

Private car Auto

1598

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number Cover Note Number Liberty Insurance Pte Ltd ThirdPartyFireTheft

SD21V01962/VPZ/R01

DRIVER

Name of Driver NRIC No

SELVARAJU SUBRAMANIAM SXXXX286G



Date Of Birth Occupation Date Of Driving Pass

Driving experience Gender

Mobile Number Alt. Phone Number

Email Address Address

Address complement Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

No No

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model

Vehicle Variant Vehicle Colour

Vehicle Category

Name of Driver Contact Number

Address Address complement PC8319Z

27/05/1971

04/02/2000

21 YEARS AND 6 MONTHS

winwincarrental@gmail.com BLK 887C WOODLANDS DR 50

(Phone) +65-91715538

Collision - Head to Rear

Outdoor

Male

#09-605 733887

No

No

Hirer

Raining

Wet

No

No

Yes

No

No

No

1

Commercial vehicle

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

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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' law yers/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.

Policy holder's Signature / Date &

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

Witnessed by Reporting Centre

Sketch Plan

IANBO

BKE towards PIE

A To Bt Admicry.

(B) PC 83192

	Un 31/08/2021 at about 0830 hk at along BKE
	towards PIE before Bukit Panjong Exit. I was
	travelling on the extreme left Lone and when me
	front vehicle stop hence I try to follow suit
	but was in vain.
	the carn,
	(A) SLJS1216
	(B) PC 8319 Z
212	
W. C.	9
135 3	
117/	

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

SINGAPORE ACCIDENT STATEMENT

Accident Date: 31/08/2021 Time: 0830 hy (hh:mm) 24 hr form	at
Location RKE towards PIE before Bukit Panjong Ex	at .
oge som range ex	7
Vehicle Number 52 J 5121 G	
Insured Name was was Reat A car the Ltd	
NRIC /FIN DAISASUSE	-
Make Totota Model (DV) 14 Alks.	-
Are you claiming under your own insurance policy for repair to your vehicle?	-
() Yes If No,Pls select: () Third Party (/) Reporting	-
Insurance Company Liberty	-
Type of Policy () Comphanius () This is a mineral	-
Policy Number SD 2 VO 962 / VPZ / ROI () TP Only	
Name of Driver COLVAVATA COLVA	-
Same as Insure	d
NRIC/FIN (1/89) Ph/ Contact Number (2/11) 5538	
Contact Number	
Deixing Dear Dear	
Driving Pass Date 04/02/2000	
Occupation () Indoor () Outdoor Gender () Male () Female	
() I chiaje	
Email Address WINWINCARRENTAL & GMAIL. COM ()NO EMAIL	
Address of Driver BIK 8870 woodlands dure 50 #09-605	
5 (733887)	
Was driver an employee of the Insured's Company? () Yes () No	
If No, Relationship of the Driver with the Insured Hove	
Does the Driver Own Any Oth William () Kelative () Children () Sibling	
If Yes Vehicle Registration Number CD: 100	
If Yes, Vehicle Registration Number of Driver's Own Vehicle Insurance Company of Driver's Own Vehicle	
Wastley C. Tit. () C.	
Pood Surface () Naming () Others	
Was any foreign vehicle involved in the	
Was anybody injured in the accident? () Yes (/) No Was anybody injured in the accident? () Yes (/) No	-
If yes, injured detail	-
Was there any video captured by Car Camera? () Yes (/) No	
Was the Accident reported to the Police? () Yes () No. If we attach police report	
DETAILS OF 3rd party Name / Nric Contact	-
Veh B / C 8319 Z	-
Veh C	-
Veh D	
Veh E	
Veh F	7





Liberty Insurance Pte Ltd

Registration no.199002791D

51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Fax: (65) 6225 6890 Website: http://www.libertyinsurance.com.sg

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) RIJI ES 1950

Certificate No	SD21V01962 /VPZ /R01	(Fig. 1977)
Form	MZ406	
Date Of Issue	27-JAN-2021	
1.Index Mark and Registration No. of Vehicle:	SLJ5121G	-
2.Chassis number of Vehicle:	MR053ZEE106137224	
3.Name of Policyholder:	WIN WIN RENT-A-CAR PTE LTD	
4.Effective date of Commencement of Insurance for the purpose of the Act:	01-FEB-2021 00:00 AM	

5.Date of Expiry of Insurance:

31-JAN-2022 23:59 PM

6.Persons or Classes of Persons entitled to drive*:

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

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

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

imitations as to use*:

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

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

B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

*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 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.

> For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers

Authorised Signature

For Information only:

COVERAGE:

Third Party Fire & Theft

SUM INSURED:

MARKET VALUE AT THE TIME OF LOSS

FINANCE COMPANY:

PRODUCER NAME:

INSURED UNITED AGENCY PTE LTD

PLFM/-/27-JAN-21

S1_CI_T1_T3_OE_Template2-Ver1

27-JAN-21

WIN WIN RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875 Tel: 6315 8479 H/P: 9833 0807

VHA No: 6170

Invoice No:

Hirer's Vehicle No : SJIC 6370 R.

UEN: 201505115E

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS	3310 6			
Name: (as in I/C) SELVARAJU, SUBRAMANI AM	Vehicle No: SLT 512 G Replace Veh No:			
NRIC/FIN No: 5 7/89286 G	Mileage Out: 22 4533 Mileage Out:			
Name: (as in I/C) SELVARAJU SUBRAMANIAM NRIC/FIN No: 5 7189286 G Address (Res): BUK 887C WOODLANDS OR 50 # 09 - 605 S (733887)	Make & Model: ALTIS AUTO/Manual			
Name & Address of Employer:	our. bate 26/8/2/ Time: /1 = 20			
	HIRE / PERIOD EXPIRY Time:			
Occupation: Driving Exp:	NON-WAIVER EXCESS=\$ 2000 /			
Singapore Driving Licence No:	CHARGES			
Issue Date: 31 7 18 Date of Birth: 25 5 7)	Daily @\$ per day			
Tel: (0) (R) HP: 9171 5538	Weekly @\$ per week			
ADDITIONAL DRIVER'S PARTICULARS Name: (as in I/C)	Monthly @\$ per month			
NRIC / FIN No:	Hours @\$ per hour			
Address (Res):	Extension @\$			
200	Delivery/Collection Service			
Occupation: Driving Exp:				
Singapore Driving Licence No:	SUB-TOTAL \$			
Issue Date: Date of Birth: Tel: (O) (R): H/P:	PETROL LEVEL			
	Out E 178 1/4 3/8 1/2 5/8 3/4 7/8 F			
VEHICLE CHECK LIST	In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F			
# #	Fuel			
SCRATCHES SCRATCHES	Traffic / Parking Fines			
	TOTAL CHARGES \$			
REMARKS:	Hirer's Signature			
	Additional Driver's Signature			
	Oliver 3 Gigilature			

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given WIN WIN RENT-A-CAR PTE LTD in connection

*IMPORTANT

- 1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
- 2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- 3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF COW AND/OR PAI WHERE APPLICABLE.
- 5. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY, IF THERE IS BODILY INJURIES: A POLICE REPORT MUST BE MADE WITHIN 24 HOURS. 6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER " FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	m
					- 10 Min
					SIGNATURE OF HIRER/DRIVER