

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 02/11/2021 13:24 (SGT)
Date of Accident 01/11/2021 14:11 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information TWDS CHANGI NEAR TOA PAYOH
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH7510H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner WELLCOME MOTOR AGENCIES
Company Reg No 39853800W
Email Address admin@wellcome.com.sg
Mobile Phone No (Phone) +65-63453140
Alternative Phone No +65-63453140

VEHICLE PARTICULARS

Manufacturer Toyota
Model Dyna
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
Transmission Auto
CC 3000

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5113942309-01-000039
Cover Note Number -

DRIVER

Name of Driver MADHAVAN SURESH KUMAR
Passport No/FIN G3847197Q

Date Of Birth	04/06/1994
Occupation	Outdoor
Date Of Driving Pass	01/09/2020
Driving experience	1 YEAR AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91627950
Alt. Phone Number	-
Email Address	tncprojectsuresh@gmail.com
Address	BLK 275 TAMPINES ST 22 #01-100
Address complement	-
Postcode	520275
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Raining
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)	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

I STOP MY LORRY TO GIVE WAY TO MAIN ROAD TRAFFIC. SUDDENLY, VEHICLE B HIT MY VEHICLE FROM BEHIND.

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	SMD9444T
Vehicle Manufacturer	-
Vehicle Model	-
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	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.
- (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.

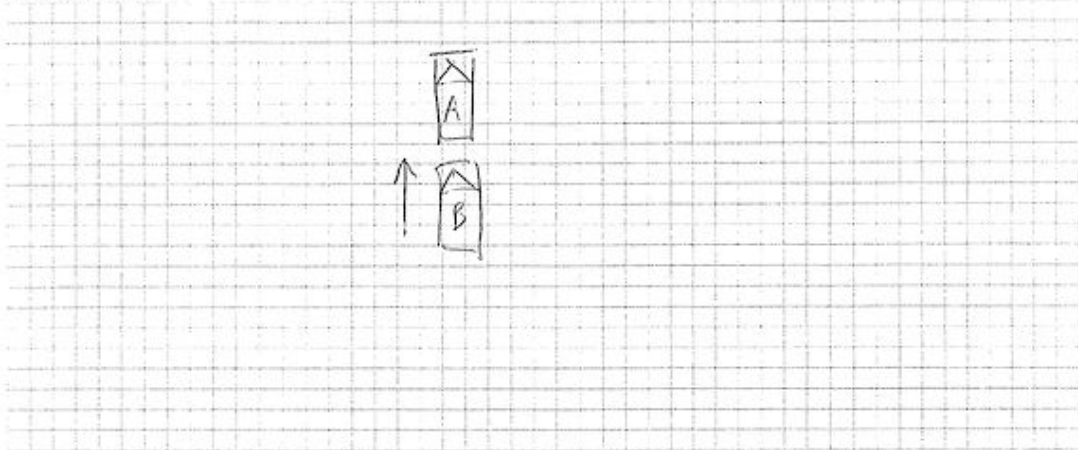
Policyholder's Signature
Date & Time:



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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I stop my lorry give way to main Rd Traffic
suddenly Veh B hit my veh from behind M. Jom

DECLARATION

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

M. Jom
Policyholder's Signature
Date & Time:

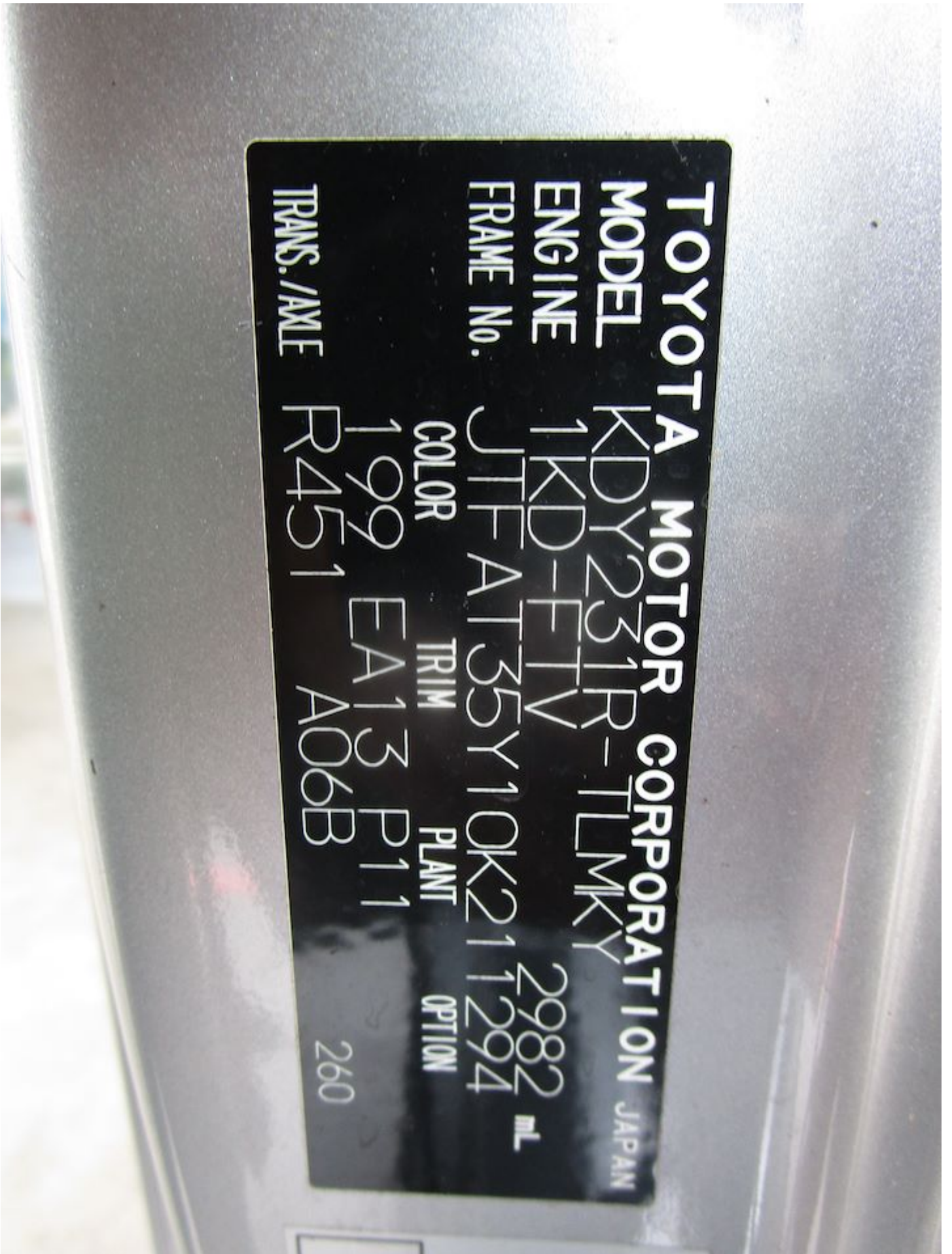


M. Jom
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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





















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 : 5113942309-01-000039 **Cover :** Comprehensive

- | | |
|---|---------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBH7510H |
| Chassis Number | : JTFAT35Y10K211294 |
| 2. Name of Policyholder | : WELLCOME MOTOR AGENCIES |
| 3. Effective Date of Insurance | : 01 Jan 2021 |
| 4. Expiry Date of Insurance | : 31 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 or Hirer's business. |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's or Hirer's business. |

This Policy does not cover

- | |
|--|
| (a) Use for racing, pace-making, reliability trial or speed-testing. |
| (b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle. |

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)	: S\$2,000
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: UNITED OVERSEAS BANK LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : NEWSTATE STENHOUSE (S) PTE LTD (00000690452)
 Date of Issue : 04 Dec 2020 15:17 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

1m. 06. 30 897



wellcome motor agencies
 68 Kaki Bukit Avenue 6 #02-02 ARK @ KB Singapore 417896
 Tel: (65) 6344-4012 Fax: (65) 6345-3140
 Email: admin@wellcome.com.sg Website: www.wellcome.com.sg

RA No: 32008
 CO. REG. NO: 39853800W
 GST REG. NO: M9-0001228-R
 DATE: 02/06/21

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS			VEHICLE'S PARTICULARS														
Name: <u>Megacool Singapore Pte.</u>			VEHICLE NO: <u>GBH7510H</u>														
Address:			REPL. VEH. NO:														
Name & Address of Employer:			MAKE/MODEL: <u>Dyna M100</u>														
IC/PP No:			MILEAGE OUT														
DL No:			MILEAGE OUT														
Date of Birth:			DATE OUT: <u>02/06/21</u>														
Date of Issue/Expiry:			TIME OUT: <u>1105 hrs</u>														
Nationality:			HIRE/PERIOD EXPIRY														
PL of Issue:																	
Occupation:																	
Driving Exp:																	
Tel No: (O) (R) (HP)																	
DRIVER'S PARTICULARS			Rental Charges														
Name: <u>MADHAVAN SURESH KUMAR</u>			Daily @ \$ per day														
Address:			Weekly @ \$ per week														
IC/PP No:			Monthly @ \$ per month														
DL No: <u>63847197A</u>			Hours @ \$ per hour														
Date of Birth: <u>04/06/1994</u>			Others @ \$														
Date of Issue/Expiry: <u>10/12/2019</u>			CDW @ \$ per day/week/month														
Nationality:			PAI @ \$ per day/week/month														
PL of Issue:			DELIVERY SERVICE														
Occupation:			SUB-TOTAL \$														
Driving Exp:			PETROL/DIESEL LEVEL														
Tel No: (O) (R) (HP) <u>91627950</u>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>OUT</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> <tr> <td>IN</td> <td>E</td> <td>1/4</td> <td>1/2</td> <td>3/4</td> <td>F</td> </tr> </table>			OUT	E	1/4	1/2	3/4	F	IN	E	1/4	1/2	3/4	F
OUT	E	1/4	1/2	3/4	F												
IN	E	1/4	1/2	3/4	F												
 <p style="text-align: center;">A-ACCIDENTS C-CRACKED D-DENTS S-SCRATCHES</p>			Extension of Rental														
			Repairs/Damages														
			Collection Service														
			MISC														
			GST @ 7%														
			TOTAL CHARGES \$														
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><u>M. Suresh Kumar</u></p> <p>HIRER'S SIGNATURE & STAMP</p> </div> <div style="width: 45%;"> <p>DRIVER'S SIGNATURE</p> </div> </div>			SECURITY DEPOSIT														
			ADVANCE RENTAL PAID														
			BY: CASH NETS CHEQUE BILL CARD														
			CHEQUE/CARD NO:														
			EXPIRY DATE														
			AMOUNT DUE REFUND														
			REFUND RECEIVED \$														
			BY RECEIVER														

I/We have read and agree to the terms and conditions on both sides of this agreement. If I/We have presented a cheque/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/our signature above will be considered to have been made on the cheque/credit card voucher. All information I/We have given WELLCOME MOTOR AGENCIES in connection with this agreement are true and accurate.

IMPORTANT

- Only persons above 23 and below 70 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company WELLCOME MOTOR AGENCIES.
- Use of the vehicle for illegal purpose (for instance: In connection with theft, drug peddling or trafficking, smuggling is strictly prohibited).
- Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- The hirer shall be liable for excess charges for any late return of the rate shown per hour or per day, inclusive of CDW and/or PAI where applicable.
- In case of accident, the hirer shall report to owner immediately, if there is bodily injuries a police report must be made within 24 hours.
- No refund will be given for early return of vehicle.
- The hirer is responsible for the first \$ 2000/- excess to the THIRD PARTY DAMAGE OR INJURY claims and/or also the first \$ 2000/- excess to the FIRST PARTY DAMAGE (I.E) WELLCOME MOTOR AGENCIES, upon payment of CDW for each and every accident/damage.

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 be deemed to be the day and time the vehicle is returned to WELLCOME MOTOR AGENCIES and the same shall be accepted as conclusive evidence of the same and shall not be challenged or questioned on any account whatsoever.

Date In	Time In	Mileage In	Checked By	Remarks

Signature of HIRER / DRIVER