NATIONAL Assessment Con	tre services	AST - DEST -1				
Date In 05/11/21	Job description		Date & Tune Completed	Dor	ie by	
Ref No NA/CTZ21011290/13	SAS e-filing		1			
Veli No Smic & 3000	E-mail (widow	Shra, NPC 2hrs,				
D.O. x 03/11/21 1030	i-Motor Clai	m Form				
OD (IP) Peporting Only	i-Motor W/O	(Within: OD 2hr	s TP 4hrs)		11 50 1	
OB (17) Reporting Only	i-Photo Uplo	aded				
TP Insurer:	Assessment/Su	rvey Report				
11 mounts	Ass't Report b	Ass't Report by Fax / Hand to Owner/Wksp				
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:)	
TP Particulars: Veh No:	50R80000	INC ()/Non-INC()			
Owner / Driver: (Tel:)		
Policy No: ()	Period ()	Cover Type: ()		
Confirmed by : (Date:	Time:)		
			0%; P: 21-79%. F: 80-	100%]		
Year of Registration: ()	Warranty: YES ()/NO()			
Excess: (\$) Loading: \$	1,000 () / \$2,000	()				
General Remarks:-			Managaran a			
() Walk-In Customer: Customer's in		nfidential & St	rictly NO rafer of repairer			
() Total Loss Case : to e-mail Insu	arer URGENTLY.					
Drive-In ()/ Towed-In (); Invo	ice: YES () / N	(O () ; T	owing Co. ()	
Remarks:- (INC horline: 6788 6616)			Date&Time Completed	Dor	ie by	
Apply for Transport Allowance ()	/ Courtesy Car ()				
2) QC Check / Post Repair Inspection	()					
3) Upload Resurvey Photo [Repair Cost >	\$3000] ()				
Injury :						
5.17		CONTROL AND				
Date/Time Actions	No. 2 East of Bridge					
			9			
	9	Invaice Pro	paration Checklist	Ant (S		
NA>10439	19		paration Checklist	Ant (\$		
	19	1) AR : Acciden 2) DA : Damage	t Reporting (\$30); Assessment (\$100); INC (Ist Bill		
laimant's Particulars :-	19	1) AR : Acciden 2) DA : Damage 3) TF : Towing 4) FT : Follow-T	t Reporting (\$30); Assessment (\$100); INC (\$700); Fee \$700 Survey	1st Bill		
laimant's Particulars :- river/Owner:	19	1) AR : Acciden 2) DA : Damage 3) TF : Towing 1 4) FT : Follow-1 5) FT : Follow-1	t Reporting (\$30); Assessment (\$100); INC (\$200); Fee \$200 Through Survey Through Survey (Resurvey)	1st Bill 580) 40/\$45 \$120 \$30		
laimant's Particulars :- river/Owner: ontact No:	19	1) AR: Acciden 2) DA: Damage 3) TF: Towing 4) FT: Follow-1 5) FT: Follow-1 For claiming (6) TR: Re-inspe	t Reporting (\$30); Assessment (\$100); INC (\$700); INC (\$700); Fee \$700; Through Survey (Resurvey)	1st Bill 880) 40/\$45 \$120 \$30 15) \$75		
laimant's Particulars :- river/Owner: ontact No:	79	1) AR: Acciden 2) DA: Damage 3) TF: Towing 4) FT: Follow-1 5) FT: Follow-1 For claiming (6) TR: Re-inspe	t Reporting (\$30); Assessment (\$100); INC (\$700); INC (\$700); Fee \$700; Through Survey (Resurvey) Through Survey (Resurvey) Through Survey (Wef 10 Jan 20); Through Survey (Wef 10 Jan 20); Through Survey	1st Bill 880) 40/\$45 \$120 \$30 05)		
laimant's Particulars :- river/Owner: ontact No: amaged Portion;	19	1) AR : Acciden 2) DA : Damage 3) TF : Towing I 4) FT : Follow-I 5) FT : Follow-I For claiming a 6) TR : Re-inspe 7) N1 : Idae DA 8) NTUC Addition	t Reporting (\$30); Assessment (\$100); INC (\$20); Fee \$20 Through Survey (Resurvey) Ingainst INC Only (wef 10 Jan 20); Inction # SMRT Survey Onal Services.	1st Bill 880) 40/\$45 \$120 \$30 25) 575 \$160		
laimant's Particulars :- river/Owner: ontact No: amaged Portion:	19	1) AR : Acciden 2) DA : Damage 3) TF : Towing I 4) FT : Follow-I 5) FT : Follow-I For claiming a 6) TR : Re-inspe 7) N1 : Idae DA 8) NTUC Additi OD* *N5: Courtes *N6: Repair C	t Reporting (\$30); Assessment (\$100); INC (\$70); Fee S Through Survey Through Survey (Resurvey) Ingainst INC Only (wef 10 Jan 20); Inction + SMRT Survey Inchination Control Tpt Allowance Co-ordination	1st Bill 880) 40/\$45 \$120 \$30 25) 575 \$160		
Claimant's Particulars :- river/Owner: ontact No: amaged Portion: C. Checked by (Engr-In-Charge):	79	1) AR : Acciden 2) DA : Damage 3) TF : Towing 4) FT : Follow-1 5) FT : Follow-1 For claiming 6) TR : Re-inspe 7) N1 : Idae DA 8) NTUC Additi OD: *N5: Courtes *N6: Repair 0 *N7: Fost Re	t Reporting (\$30); Assessment (\$100); INC (\$700); INC	1st Bill 880) 40/\$45 \$120 \$30 25) 575 \$160		
Claimant's Particulars :- Priver/Owner: Contact No: Camaged Portion: C Checked by (Engr-In-Charge): Cuditors' Comments :-	9	1) AR : Acciden 2) DA : Damage 3) TF : Towing 4) FT : Follow-1 5) FT : Follow-1 For claiming 6 6) TR : Re-inspe 7) N1 : idae DA 8) NTUC Additi OD.* *N5: Courtes *N6: Repair 0 *N7: Post Re *N8: DV / Co	t Reporting (\$30); Assessment (\$100); INC (\$20); Pee S Through Survey Through Survey (Resurvey) Ingainst INC Only (wef 10 Jan 20); Inction + SMRT Survey In the Survey In the Survey onal Services. The Survey In t	1st Bill 1880) 140/\$45 \$120 \$30 155) 575 \$160 \$5 \$10 \$25		

SN0921B50004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 05/11/2021 11:56 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (05/11/2021 11:56 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

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

05/11/2021 11:56 (SGT) 03/11/2021 10:30 (SGT) Singapore THOMSON RD TWDS BUKIT TIMAH RD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMK8300U

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Email Address

Mobile Phone No Alternative Phone No

WHEELS EXPRESS RENTAL & LEASING PTE LTD 2XXXXX594C

wheelsexpressrental@gmail.com (Phone) +65-90603343

+65-90603343

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

Honda

Vezel

Private hire

No - Claiming third party

Private hire

Auto

1498

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy Policy Number

Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd.

Comprehensive

DMHCSNA00004832101

DRIVER

Name of Driver

NRIC No

LEE LENG POH SXXXX336E



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? Reasons for not uploading a video of the accident

Was there any audio recorded?

Yes Yes

22/11/1964

38 YEARS AND 2 MONTHS

(Phone) +65-81614671

docsl72@gmail.com BLK 760 PASIR RIS ST 71

Outdoor 06/09/1983

Male

#04-194

510760

Side Swipe

Clear

Dry

No 2

Yes

Yes

1

No

No

No

No

No

No

Hirer

WITH WORKSHOP

No

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

Private car

SDR8000E

QUEK LIT WEE

Accident report SN0921B50004

Page 2 of 17

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

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LEE LENG POH
Gender	Male
Phone No	
Address	1 4 2
Address Complement	300
Post Code	
Approximate Age Years Old	
Injuries Sustained	MONITORING
Injured person in which vehicle?	SMK8300U
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

I hereby authorise SME Motor Pte Ltd to send my accident report to my workshop Twincar Automotive Pte Ltd / N-51 Automotive Pte Ltc

IMPORTANT NOTICE

Signature:

via email / fax.

- 1. Please report correctly 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.
- 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.
- 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' 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.

lym 05/11/21 Witnessed by Reporting Centre Driver's Signature (f driverys not the policyholder) / Date Signature / Date & Time & Time Personnel (THOMSON LANE) Sketch Plan THOMSON Which A ROAD - SMK 8300 U Vehicle B - SDR 8000 F THOMSON ROAD Describe Circumstances of the Accident I was driving shead when the traffic light turn green, while I was on the extreme loft larve along Thomson Road towarding Bukit Timsh Rusel. The society happened at the cross junction of "Thomson Road!
Thomson lane I when I proceedly shead when the traffic light turned given, whereas the vehicle (SDR 8000 &) made a right turn from the opposite direction, turning into Thomson lane. After the secretary we turned into Thomson lone to exchange of particular and took photos of the secretary The whole secident fortage was captured by my in-cor comera. Vehicle A - SMK 83004 Venicle B - SPR 8000 E

Declaration

We declare the foregoing particulars are true in every respect.

Polit A Signature / Date &

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

olyn 05/11/21

Witnessed by Reporting Centre Personnel

Time

VEHICLE NO: SMK 8300 MAKE & MODEL: Honds Vezel

AUTO / MANUAL

*C.C: 15 03/11/2021 DATE OF ACCIDENT 1030 (AM)/ PM TIME OF ACCIDENT Thomson Road Towarding Buty Timah Road LOCATION OF ACCIDENT EXACT PURPOSE USED AT TIME OF ACCIDENT EMPLOYMENT / PRIVATE USE / PRIVATE HIRE Wheels Express Rental & Leasing Per Ltd NAME OF OWNER EMAIL: wheels expression tal agmail com MOBILE: 90603343 Office: 2018 10594C NRIC OD / THIRD PARTY / REPORTING ONLY CLAIM TYPE YES / NO ? FLEET POLICY: China Taiping. INSURANCE CO. Comprehensive / Third Party / Third Party Fire & Theft TYPE OF COVERAGE D MHCSNA 00002832000 POLICY NO. AS ABOVE / IF NO! LEE LENG POH NAME OF DRIVER 51676336E NRIC 22 / 11 / 1964 DATE OF BIRTH YES / NO : ANY PASSENGER NAME OF PASSENGER GENDER OF PASSENGEMALE / FEMALE Outdoor / Indoor OCCUPATION 06/09/1983 DATE OF DRIVING PASS Male / Female GENDER Home: Mobile: 8161464\ Office: CONTACT NO. DOCSL72 @ GMAIL-COM EMAIL: BLK 760 PASIR RIS STREET 71 # 104-194 5(510 760) **ADDRESS** DOES DRIVER OWN OTHER VEHICLES? NO / If yes: Reg No: INSURER: Employee / If No: Rental / Leasing RELATIONSHIP Clear / Raining / Other: WEATHER CONDITION Ory / Wet / Other: ROAD SURFACE Way If yes Who? Monitoring . ANY INJURIES LEE LENG POH 81614671 CONTACT NO. No / If yes : Where? POLICE REPORT NOTICE OF INTENDED PROSECUTION GIVEN? NO/IF YES: WHO? SOR 8000 E Any Passenger: VEHICLE B NO. QUEK LIT WEE NAME CONTACT NO. Any Passenger: VEHICLE C NO. Any Passenger: VEHICLE D NO. Any Passenger: VEHICLE E NO. Any Passenger: VEHICLE F NO. ANY WITNESS WITNESS CONTACT NO. YES NO WAS THERE ANY VIDEO CAPTURE? YES / NO WAS THERE ANY AUDIO RECORDED? YES / NO SCENE ACCIDENT PHOTOS TAKEN? **WORKSHOP: USI AUTOMOTIVE PTIE LTD Have you been approach by unknown person soliciting (s) / NO. YES / NO offering accident claims assistance?



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD.

Motor Hire Car

MZ406L/B

R SN

CERTIFICATE OF INSURANCE

AN0721A

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 (Motorysia)

Cov. Type:C

CERTIFICATE No.

DMHCSNA00004832101

Engine No.: L1585564703 Cha. No. RU11314691

t. Index Mark and Registration

SMK8300U

Number of Vehicle

AUTOSAFE

2 Name of Policy Holder

WHEELS EXPRESS RENTAL & LEASING PTE. LTD.

Effective date of the Commencement of insurance for the purposes of the Regulations, Octinanos or Enactment

22/05/2021 (00:00:00)

Excess Sect 1. Excess Sect. II 5\$2,000.00 5\$2,000.00

4. Date of Expry of Insurance

21/05/2022

EX ON WINDSCREEN . 5\$100.00

5 Persons or Classes of Persons 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 disquisitled by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Use for the carriage of passengers or goods in connection with the Policyholder's business.
 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 (Malaysia), 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 (SINGAPORE) PTE. LTD.

Issued By: Chus Sunt Lay Sally **Authorised Officer**

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) ★ 3 Anson Road #16-00 Springleaf Tower Singapore 079909

@63896111

6222 1033

www.sg.cntaiping.com



Wheels Express Rental & Leasing Pte Ltd 16 120181 6594

ROC: 201810594C

61 Ubi Ave 2, Automobile Megamart, #05-04 Singapore 408898

CHEW 9060 3343 / MARK 9832 5030 / TEO 9107 6963

VEHICLE RENTAL & LEASING AGREEMENT

Hirer's Name: LEE LENG POH DOC.	5172@ Gma:1. com
NRIC No: 1676336 / E License Pass Date: 06-9-1983	Hirer's Contact No: 8/6/467/ Next of Kin Name & Contact No (In Case of Emergency):
Address: BLK 760 PASIR RIS ST 71 #04	-194 (Singapore \$10760)
Occupation / Office Address Full time Driver	(Singapore)
Vehicle Reg No: Smk &3004	Make & Model: URZEL 1-5
Start Date: 14- 7-200	End Date: 3 month
Handover Time:	Handover Time:
Rental Per Day/Week/Month: Weekly - \$350	Depositi Deposit 4500 transfer over
Add Driver:	NRICNO: for vech SLG 7392T
License Pass Date:	Contact No:
Address:	(Singapore)
Remarks: Start wednesday Tomorow payment - \$350 - \$95 11-7-2010	
T. T. C. S. B. N. C. C. S.	- 第7類7名79- 10 - 記25- 12 ⁻¹ 1- 8

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.

In the event where debts collector is involved, hirer shall bear all cost for debts collector commission and admin charges.

Hirer Bank Account Details:

1st Party Excess: \$3000

3rd Party Excess: \$3000

CDW: Y / N (additional \$3.21/day)

CDW if yes, excess @ \$1,500

Signature of Authorized Person

LOCAL TOW SERIVCE (24HRS) : 91828211 MALAYSIA TOW SERVICE (24HRS) : YONG - 016-704 7552 / 012-220 8076 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 (S408715)

I, (Name) LEE LENG 704 (NRIC) 1676336/E

hereby is aware and acknowledge of the insurance excess

Local Usage

\$2,00

1200

Insurance Excess: Own Damage \$2,500, Third Party \$2,500.

In a

All accident has to inform The Person-In-Charge and file a record with the insurance company within 24 hrs.

In the event of Own Damage the Lessee shall bear all repair cost and rental fee for the period of repair and there will not be any replacement car provided.

Malaysia Usage

The Lessor has no objections to the Vehicle being driven in to Malaysia by the Lessee and the Lessee hereby irrevocable undertake and agree that:-

The Lessee shall indemnify the Lessor against all loss or damage and be responsible for all consequential cost or loss suffered by the Lessor should the Vehicle be impounded by the Malaysia Authorities and/or a summons be issued against the Vehicle;

The Lessee has been advised not to leave the Vehicle (in the event of a breakdown/accident) unattended not permit any unauthorized towing of the Vehicle. The Lessee shall endeavor to contact the Lessor in Singapore.

-Aft

SENTAL d COSENGO POR

Person-In-Charge