# **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 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 21/02/2022 15:36 (SGT) Date of Accident 19/01/2021 09:00 (SGT) Exact Location of Accident Woodlands Ave 12, Singapore Additional Location Information TOWARDS SLE (BKE) Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number GBK8598H

### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner FLUX MOTOR RENTAL PTE LTD Company Reg No 2XXXXX858C Email Address yongleeong@gmail.com Mobile Phone No (Phone) +65-92297919 Alternative Phone No (Office) +65-62266116

## VEHICLE PARTICULARS

Manufacturer Toyota Model Hiace Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Auto CC 2754

## **INSURANCE COMPANY**

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMCVSNA00087012000 Cover Note Number

# DRIVER

Name of Driver **DEVARAJ SURESH** NRIC No SXXXX346H

Date Of Birth 26/11/1996 Occupation Outdoor Date Of Driving Pass 17/02/2016 Driving experience 4 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-92297919 Alt. Phone Number Email Address yongleeong@gmail.com Address 509 SEMBAWANG ROAD #04-60 Address complement Postcode 757710 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 - Head to Rear 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 PLEASE REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number Vehicle Manufacturer	SKV1133T
	-
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 - No. Of Passenger (Including Driver) -

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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 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.

Policyholder's

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

Witnessed by Reporting Centre SLE (BKE).

Sketch Plan

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

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

Witnessed by Reporting Centre Personnel









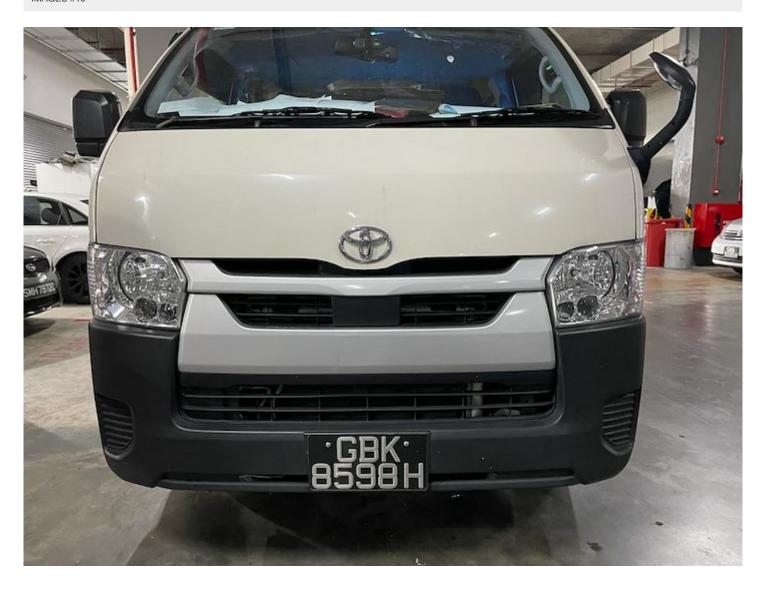


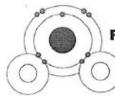












	0	70)	Business Reg No : 201925858C						
			th Ave 4 #02-11 S(555859) Tel: 6226 6116 Fax: 6226 6118						
	Worksho	p: 55 Serangoon North	1 Ave 4 #02-10 S(555859)						
	Lease Ag	reement Contract No:	20202812001						
	Date: 28	/12/2020							
	This Ren	tal Agreement made be as "the Company", ide	etween us, FLUX MOTOR RENTAL PTE LTD (UEN: 201925858C) (herei entified as the Leaser AND YOU, the person(s) identified as the Hirer b	nafter to be selow :					
	NAME O	F HIRER(S) (IN FULL)	: KVS LOGISTICS						
	IRIC/PA	SSPORT/RC/RB NO.	: 53420505D						
	ADDRES	s	: 509 SEMBAWANG ROAD #04-60 SELETARIS SINGAPORE 757710						
	CONTAC	T NUMBER	: 92297919 : DEVARAJ SURESH						
	PERSON	IN CHARGE							
	NAME C	F DRIVER(S) (IN FULL)	: DEVARAJ SURESH						
		ASSPORT NO.	: S9643346H						
	DATE O	F BIRTH	: 26/11/1996						
	DRIVING LICENSE NO. LICENSE ISSUE DATE		: S9643346H						
			ī						
	ADDRES	ss	: 509 SEMBAWANG ROAD #04-60 SELETARIS SINGAPORE 757710						
•	1.	DESCRIPTION OF VEHI	ICLE						
		REGISTRATION NO.	: GBK 8598 H						
		MAKE/MODEL	: TOYOTA HIACE AUTO 5DR						
		COLOUR	: WHITE						
		ENGINE NO.	: 1GD8624619						
		CHASSIS NO.	: GDH2012014934						
	2.	PERIOD OF LEASE							
		Monthly Basis	27/42/2022 ("End Date")						
		From28/12/2020	("Commencement Date") to27/12/2022("End Date")						
		Upon the expiry of the	expiry of the Lease Period, unless this Agreement has already been terminated or the Hirer has						
		served the required n	notice of termination pursuant to the terms herein, the lease of the vo	distaly after the					
		agreement shall be re	enewed automatically on a monthly basis commencing the day imme	diately after the					
		End date on the same	e terms and conditions herein.						
			140 (0000						
		Return Date:27	11 V						
	Page	1	Hirer Signature :						

Page | 1

3. LEASE CHARGES

each month ("Payment Date").

				Timely payment is to be expected.							
4.	DEPOSIT										
	Amount: SGD\$800										
5.	INSURANCE, ROAD TAX AND MAINTENANCE  The Company will be responsible for the road tax, maintenance, insurance, and servicing of the Vehicle.  The insurance coverage for the Vehicle will be as follows. The Hirer is to strictly comply with the terms and conditions of the insurance policy.										
		Excess Amount :			ns and Conditions annex						
	Insurance Coverage :		Third Party Insurance Others								
6.	PURPOSE OF USE										
	Domestic / Commercial ,	/ Oth	ners*	_							
7.	EARLY TERMINATION OF AGREEMENT The Hirer shall be liable to the Company for early termination as stated under the Terms and Conditions in										
	The Hirer shall be liable the annex.	to th	ie Company for early ter	mination as stated under the remisers designed							
8.	MODE OF PAYMENT										
	Cash payments are to be made over the counter at the Company's Main Office registered address as stated										
	above. Bank transfer account number: UOB Current Account 344-313-7244										
	Company Paynow account number: 201925858C										
	Cheque can be made payable to: FLUX MOTOR RENTAL PTE LTD										
			ompany by post will be a								
Mary at	bu confirme that he h	ac re	ead understood, and ag	on above and the Terms and Conditions in the annex. The reed to the Agreement Contract and Terms and							
c 41	tions I the Hirer and/or o	drive	r(s) understand the Agre	eement Contract and Terms and Conditions, which were							
	- Ita wales the Company	Ject	taff Should there be any	breach of the terms of the Agreement Contract Herein,							
all cos	ts and expenses (includin	g leg	gal costs on an indemnit	y basis) will be borne by the Hirer and Guarantor. Once							
		en si	igned, all Lease Charges	and Deposits are not refundable in accordance with the							
	herein.	s he	reto have agreed on the	day and year above written.							
				ned for and on behalf of FILUX MOTOR RENTAL PTE LTD							
Signe	d by the Hirer		316								
	a1			alles							
0	<u> </u>										
Name	: DEVARAT SURESH			Name: XAVIOR CHEN							
Desig	nation: DIRECTOR			Designation: Sales							
Com	pany Stamp:			Company Stamp:							
Page	1 2			Hirer Signature :							

Amount of SGD\$\_\_\_1400\_\_\_ per month (collectively, "Lease Charges") payable in advance on \_\_28\_\_ of