

NATIONAL Assessment Centre Services

Date In: 29/08/22	Job description	Date & Time Completed	Done by
Ref No: NM/A1622008383/r3	SAS e-filing		
Veh No: 5LD8363L	E-mail (within 2hrs, AP: 2hrs)		
DOA: 28/08/22 2330	i-Motor Claim Form		
OD: (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: 5JT6628A	INC () / Non-INC ()
Owner / Driver: (Tel:)
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:	Time:
Insured/Driver Liability: (% [Note-Est. Status (WO): N: 0-20%, P: 21-79%, F: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time	Actions
	MOBILE REPORTING (ADRIAN)
	JL PERFECT AUTOWORK PTE LTD
	8 KAKI BUKIT AVE 4
	#08-09 PREMIER @ KAKI BUKIT
	415875

NA2202346	NA2202347	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars:-	mobile reporting	1) AR: Accident Reporting (\$30);		
Driver/Owner:		2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:		3) TF: Towing Fee \$40/\$45		
Damaged Portion:		4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):		5) RT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-		For claiming against INC Only (wef 10 Jan 2005)		
		6) TR: Re-inspection \$75		
		7) N1: Idac DA + SMRT Survey \$160		
		8) NTUC Additional Services:-		
		OD*		
		*N5: Courtesy Car / Tpt Allowance \$5		
		*N6: Repair Co-ordination \$10		
		*N7: Post Repair Inspection \$25		
		*N8: DV / Collect Excess Coordination \$5		
		TP (N11): TP (Non INC) against INC \$20		
		9) N12: Idac Mobile 30		
		Invoice dated	Fee Charged	
		Invoice dated	Fee Charged	



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 Actual Driver
3. Information provided must be as truthful and accurate as possible. Any willful 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	29/08/2022 19:28 (SGT)
Reported by	Driver
Date of Accident	28/08/2022 23:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OPEN CARPARK OF PENANG LANE(BESIDE RED CROSS HOUE CARPARK LOT NO 8
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD8363L
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ASIA CAR LEASING PTE LTD
Company Reg No	2XXXXX397C
Email Address	simon@asiacarrental.com.sg
Mobile Phone No	(Phone) +65-62828585
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vellfire
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	2494

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	SLD8363L

DRIVER

Name of Driver	LOH KWONG HENG(LUO GUANGQING)
NRIC No	SXXXX491Z
Date Of Birth	28/10/1975



Occupation	Outdoor
Date Of Driving Pass	14/02/2003
Driving experience	19 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84981315
Alt. Phone Number	-
Email Address	simon@asiacarrental.com.sg
Address	BLK 438C BUKIT BATOK WEST AVE 8
Address complement	#11-1067
Postcode	653438
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	Side Swipe
Weather Conditions	AFT RAIN
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

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

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJT6628B
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	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LOH KWONG HENG(LUO GUANGQING)
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY PAIN
Injured person in which vehicle?	SLD8363L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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)**

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.

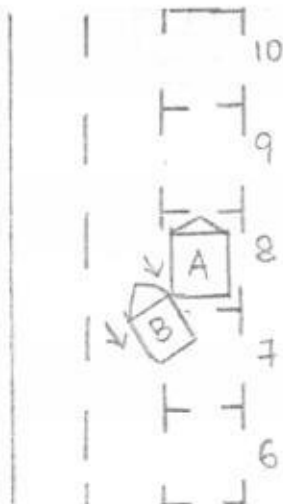


Wyn 29/08/22
Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date &
Time

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

Sketch Plan



Vehicle (A) : SLD 8363L
Vehicle (B) : SJT 6628B
Open Carpark of Penang
Lane (Beside Red Cross
House Carpark Lot No. 8)

Describe Circumstances of the Accident

Refer to Attached

Declaration

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



Policyholder's Signature / Date & Time

[Handwritten Signature]

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

[Handwritten Signature] 29/08/22

Witnessed by Reporting Centre Personnel

On 28.08.2022 at about 23:30 hours at Open Carpark of Penang Lane (Beside Red Cross House Carpark Lot No. 8), I was parked stationary at the above mentioned carpark lot and suddenly, I heard a loud bang and felt an impact from behind.

When I alighted from my vehicle (A), I realised it was vehicle (B) that collided onto the rear left portion of my vehicle (A) while making the reverse parking behind the carpark lot No.7.

Vehicle (A): SLD 8363L

Vehicle (B): SJT 6628B



A handwritten signature in cursive script.

haven't
collected
money

SINGAPORE ACCIDENT STATEMENT

Accident Date: 28/08/2022	Time: 23:30	(hh:mm) 24 hr format
Location Open Carpark of Penang Lane (Beside Red Cross House Carpark Lot No. 8)		
Vehicle Number SLD8363L		
Insured Name Asia Car Leasing Pte Ltd		
NRIC / FIN 201437397C	Contact Number 6282 8585	
Make Toyota	Model Vellfire	
Are you claiming under your own insurance policy for repair to your vehicle?		
() Yes If No, Pls select: (/) Third Party () Reporting		
Insurance Company AIG		
Type of Policy () Comprehensive () Third Party Fire & Theft (/) TP Only		
Policy Number SLD8363L		
Name of Driver Loh Kwong Heng (Luo GuangQing) () Same as Insured		
NRIC / FIN S7532491Z	Contact Number 8498 1315	
Date of Birth 28/10/1975		
Driving Pass Date 14/02/2003		
Occupation () Indoor (/) Outdoor		
Gender (/) Male () Female		
Email Address simon@asiacarrental.com.sg () NO EMAIL		
Address of Driver BLK 438C Bukit Batok West Avenue		
8 # 11-1067 Singapore 653438		
Was driver an employee of the Insured's Company? () Yes (/) No		
If No, Relationship of the Driver with the Insured (/) Hirer		
() Owner () Spouse () Friend () Relative () Children () Sibling		
Does the Driver Own Any Other Vehicle? () Yes (/) No		
If Yes, Vehicle Registration Number of Driver's Own Vehicle		
Insurance Company of Driver's Own Vehicle		
Weather Conditions () Clear () Raining () Others (/) After Rain		
Road Surface () Dry (/) Wet () Others		
Was any foreign vehicle involved in this accident? () Yes (/) No		
Was anybody injured in the accident? (/) Yes () No		
If yes, injured detail Loh Kwong Heng (Luo GuangQing) - Body Pain		
Was there any video captured by Car Camera? () Yes (/) No		
Was the Accident reported to the Police? () Yes (/) No If yes attach police report		
DETAILS OF 2 nd party Name Nick Contact		
Veh B SJT6628B		
Veh C		
Veh D		
Veh E		
Veh F		

Driver Only



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1990
ROAD TRANSPORT ACT, 1987 (MALAYSIA) AND ROAD TRANSPORT (AMENDMENT) ACT 2019
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

16 L 406

(The below excess is subject to GST*)

Third Party Commercial Motor
CERTIFICATE NO. SLD8363L

POLICY EXCESS
WINDSCREEN EXCESS NA

SUM INSURED NA
INSURING WITH COE/PARF NO
SLD8363L

1) VEHICLE REGISTRATION NO.

2) NAME OF POLICYHOLDER

Asia Car Leasing Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE
FOR THE PURPOSES OF THE ACT

18 October 2021

4) DATE OF EXPIRY OF INSURANCE

17 October 2022

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

Any person who is driving on the insured's order or with their permission
Driver must be between 23 to 65 years old with at least 2 years driving experience

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) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and business purposes of insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired

The Policy does not cover: 1) Use for tuition, driving test, 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. 3) Use for any purpose in connection with the Motor Trade.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY UNITED OVERSEAS BANK LTD

*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) and Road Transport (Amendment) Act 2019, 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) and Road Transport (Amendment) Act 2019.

Issued in Singapore 15 Oct 2021

AIG Asia Pacific Insurance Pte Ltd

0502806-060

Liew Kok Lin May
7B Shenlin Way #07-16
SINGAPORE 079120

AL THOMPSON THE SECRETARY

ORIGINAL

SSPAMH



CAR RENTAL

CAR RENTAL AGREEMENT

This Agreement, hereinafter known as "the Agreement", is made on the 17 day of Aug 2022.

Between **ASIA CAR LEASING PTE LTD**
having its registered office at:
167 Upper Paya Lebar Road Singapore 534859
hereinafter known as "the Owner" of the one part

And **Hirer name:** Mr. Loh Kwong Heng
NRIC number: S7532491Z
Contact number: 8330 8660
Hirer address: Blk 483C Bukit Batok West Avenue B #11-1067 S653438

hereinafter known as "the Hirer" of the other part
hereby agree that the Owner will let to the Hirer the vehicle known as "the Vehicle" upon the terms and conditions hereinafter appearing.

1. VEHICLE DESCRIPTION

- a. Vehicle Registration No. SLD 8363 L
- b. Make & Model Toyota Vellfire 2.5 (A)
- c. Colour / Mileage Black

2. RENTAL PERIOD

From : 22/08/2022 To: 21/08/2023
Date Out: _____ Time Out: _____ Km Out: _____
Petrol Level Out: E 1/4 1/2 F
Date In : _____ Time In : _____ Km In : _____
Petrol Level In: E 1/4 1/2 F

3. RENTAL FEE : S\$ 608/- per week

- a. Rental fee includes the following:
 - 1. Unlimited Mileage;
 - 2. Service and maintenance;
 - 3. Road Tax and Radio License
 - 4. Motor Insurance Coverage (Excess applicable)
 - 5. 24 Hour breakdown and emergency service (in Singapore only); and
- b. Rental fee is and is payable in advance before the commencement of the rental period.
- c. Without prejudice to the Owner's rights, the Hirer will be liable to an administrative fee of S\$50.00 plus late interest payment of S\$30 per day for each day after the due date if the rental fee or other payment remain unpaid after becoming due. In the event that the rental fee remains unpaid for more than three calendar days, the Owner may lodge a police report as a loss of vehicle and activate the vehicle repossession team to repossess the vehicle. The incidental costs of S\$200.00 for the repossession process will be charged to the Hirer.

All payments due hereunder shall be made to the Owner at its address stated herein or at such other address as the Owner may from time to time communicate to the Hirer. Any payment sent by post shall be so sent at the risk of the Hirer. Payment mode can be in Cash, Telegraphic Transfer to the following bank account:

Payee Name : Asia Car Leasing Pte. Ltd.
Name of Bank : United Overseas Bank Limited
Bank Account No. : 310-304-701-1

To make payment before 12pm every Saturday of the week
Whatsapp payment proof to 97559450

Hirer's Signature



Asia Car Leasing Pte Ltd

167 Upper Paya Lebar Road Singapore 534859 Tel: 6285 5766 / 6282 8585 Fax: 6281 0028 / 6285 7798
Company Registration No: 201437397C