

NATIONAL Assessment Centre Services (Ref: J0011)

SMO922B90001

Date In: 09/11/2022 09:52	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: XBA/C7222011934	E-mail (within 3hrs, A/C 3hrs)		
Veh No: GPK 1209C	I-Motor Claim Form		
D.O.A: 12/04/2021 18:50	I-Motor W/O (Within 30 mins, 30 mins)		
OD (TP / Reporting Only)	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / GW: (Tel:	Fax:
TP Particulars: Veh No: SLS 872	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: () Period: ()	Cover Type: ()	
Confirmed by: (Date:	Time:
Insured/Driver Liability: ()	Warranty: YES () / NO ()	
Year of Registration: ()	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 0016)	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:	

NA2203145	Invoice Preparation Checklist
1) AR: Accident Reporting (\$30)	INC (\$50)
2) DA: Damage Assessment (\$100)	\$10/\$40
3) TP: Towing Fee	\$120
4) FT: Follow-Through Survey	\$30
5) FT: Follow-Through Survey (Resurvey)	\$30
6) TR: Re-inspection	\$70
7) NI: New DA / SMRT Survey	\$140
8) NTUC Additional Services	
9) NI: New DA / SMRT Survey	\$140
10) NI: New DA / SMRT Survey	\$140
11) NI: New DA / SMRT Survey	\$140
12) NI: New DA / SMRT Survey	\$140
13) NI: New DA / SMRT Survey	\$140
14) NI: New DA / SMRT Survey	\$140
15) NI: New DA / SMRT Survey	\$140
16) NI: New DA / SMRT Survey	\$140
17) NI: New DA / SMRT Survey	\$140
18) NI: New DA / SMRT Survey	\$140
19) NI: New DA / SMRT Survey	\$140
20) NI: New DA / SMRT Survey	\$140

Checked by (Engr-In-Charge):	
Comments:	
Signature:	

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 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	09/11/2022 09:52 (SGT)
Reported by	Owner
Date of Accident	12/04/2021 18:50 (SGT)
Exact Location of Accident	Jurong West Ave 1, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK1209C
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	ABS LEASING SERVICES PTE LTD
Company Reg No	2XXXXX528D
Email Address	optiongarage@hotmail.com
Mobile Phone No	(Phone) +65-92966056
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00000622101

DRIVER

Name of Driver	NG JIA HAO
NRIC No	SXXXX553A
Date Of Birth	05/09/1990
Occupation	Outdoor

Date Of Driving Pass	03/11/2010
Driving experience	10 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84688191
Alt. Phone Number	-
Email Address	optiongarage@hotmail.com
Address	BLK 330A ANCHORVALE STREET #09-521
Address complement	-
Postcode	541330
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	No Collision
Weather Conditions	Clear
Road Surface	Dry

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
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

PLEASE REFER TO LETTER ATTACHED

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	SLS81Z
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) -

SKETCH PLAN

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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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

REFER TO CHINA TAIPEI CLAIM OFFICER	
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Describe Circumstance of the Accident

INSTRUCTED BY CHINA TAIPIING CLAIM DEPARTMENT.

TAN KAH LEONG SENIOR EXECUTIVE .

THE HIRER OR DRIVER LEFT AND CANNOT BE
LOCATED .

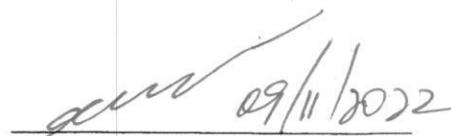
Declaration

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

 09/11/2022
Witnessed by Reporting Centre Personnel

Our Ref : SNM21D202098/GBK1209C/C02

Via Ordinary Mail

Date : 13 Apr 2021

ABS LEASING SERVICES PTE LTD
172 SIN MING DRIVE
SIN MING SEMAC'S DEPOT
SINGAPORE 575720

Dear Policyholder

RE: ACCIDENT INVOLVING OUR VEHICLE NOS. GBK1209C AND SLS81Z ON 12 Apr 2021 ALONG JURONG WEST AVE 1
Policy : DMCVSNW00000622101

We refer to the above-mentioned accident.

Please be informed that you or your driver has not filed an accident report within 24 hours as per the Motor Claims Framework.

We would urge you to comply with the condition to file your accident report with your vehicle to us IMMEDIATELY, through our designated Accident Reporting Centres which are also our authorised workshops, regardless of whether or not it would give rise to a claim. You may log onto our website www.sg.cntaiping.com for location of the respective centres/workshops.

Please take note that your NO CLAIM DISCOUNT will be penalized upon renewal of your policy if you fail to comply with this condition.

Please contact our claims department at 63896116 should you require our assistance or clarification.

Regards

(This is a computer generated letter and no signature is required)

cc : AN0597A SG MOTOR TRADER PTE LTD

VISION LAW LLC

Advocates & Solicitors - Notary Public - Commissioner for Oaths
Agents for Trade Marks
(Incorporated with limited liability)

Unique Entity Number: 200721148H

Address: 133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

TEL : (65) 65342011 (Hunting)
FAX : (65) 65356802 (General) ✓
: (65) 65355905 (Litigation)
E-mail : yvonne@visionlawllc.com
Conveyancing & Family Law Practices
TEL : (65) 63580703
FAX : (65) 63580448 (Conveyancing)

ERIC NG CHING BOON
WONG KENG LEONG RAYNEE
AUDREY WONG SU HSIEN
PAUL YAP TAI SAN
ANJALI SIO MUNANDY
AND JIM MEYDONG
RAYENDRA KRISHNASAMY
CHEONG YUNHUI, CLARISSE
CYNTHIA LEE PEI YIN

WHEN REPLYING PLEASE QUOTE OUR REFERENCE

Our Ref : DA1-yw-lms-H3-115369-21

27 April, 2021

ABS LEASING SERVICES PTE LTD
15 Yishun Industrial Street 1
#01-02 Win 5
Singapore 768031

BY POST ONLY

IMMEDIATE
ATTENTION

Dear Sirs,

CLAIMANT: VALERIE KANG ZI WEI
ACCIDENT INVOLVING SLS 81 Z & GBK 1209 C ON 12-APR-2021 ALONG JURONG WEST AVENUE
1 AT ABOUT 1850 HOURS

We act for Valerie Kang Zi Wei, the owner of motor vehicle no. SLS 81 Z.

Our investigation reveals that you were the owners of motor vehicle GBK 1209 C at the time of the accident. Kindly confirm.

Please let us have the following particulars:-

- the name, address and NRIC No. of the driver;
- whether the said motor vehicle was at the time of the accident covered by a policy of insurance, if so, the particulars thereof;
- whether the driver was at the time of the accident driving as your servant or agent; and
- whether the driver was an authorised driver and covered by the policy of insurance.

Please take notice that there is a presumption in law that the said driver was driving as your servant or agent and if we do not hear from you within seven (7) days from the date hereof, we shall commence action against you as a Defendant.

If the information requested above are not provided within 14 days, any amendments are to be made thereafter to the Writ of Summons and / or any Pleadings, you will be responsible for the costs and disbursements incurred.

We would advise that upon receipt of this letter, you report the above accident to your insurers immediately together with your Certificate of Insurance to enable them to assist you.

If you fail to do so, your said insurers may exercise their right not to cover you against our clients' claim. In such event, our clients will have to look towards you for their claim and if you are found liable, you will have to pay our clients' damages out of your own pocket.

Yours faithfully

DIANE ANG

cc: SLS 81 Z - By fax: 6457 8287 only

CONFIDENTIALITY

THE INFORMATION CONTAINED IN THESE DOCUMENTS MAY BE PRIVILEGED AND CONFIDENTIAL AND IS INTENDED FOR THE EXCLUSIVE USE OF THE ADDRESSEE DESIGNATED ABOVE. If you are not the addressee, any disclosure, reproduction, distribution or other dissemination or use of this communication is strictly prohibited. If you have received this transmission in error please contact us immediately by telephone so that we can arrange for its return.



ABS LEASING SERVICES PTE LTD

WIN 5, 15 Yishun Industrial Street 1 #01-02, Singapore 768091

TEL : 6259 6590 FAX : 6933 9399 Email: enquiry@absleasing.com.sg

UEN No. 201819528D

RENTAL AGREEMENT

No. A20110006

Date: 01 Nov 2020

VEHICLE DESCRIPTION

Vehicle No. : GBK1209C
Make : NISSAN
Model : NV200 1.5L MT ABS
AIRBAG 2WD 6DR
Fuel type : Diesel

HIRER PARTICULARS

Name : THREEMAN LOGISTICS PTE LTD
Co Reg No./ NRIC : 202028753N
Address : 71 WOODLANDS
INDUSTRIAL PARK E9 08-
08 WAVE 9 Singapore
757048
Fax :
Contact Person : NG JIA HAO
NRIC : S9032553A
Tel : 84688191
Email :

MAIN DRIVER PARTICULARS

Name : NG JIA HAO
NRIC/FIN/Passport No : S9032553A

This Agreement constitutes the entire agreement between the Parties with respect to the subject matter hereof, and may be amended only by the written agreement of the Parties.

IN WITNESS WHEREOF, the parties hereby enter into this Agreement as of the date first above written

2nd Driver : Mohammed Norisiman Bin Ismail

NRIC : S8211918C

Tel : 88076851

RENTAL DETAIL

Rental Start Date & Time : 01 Nov 2020 | 1105
Rental End Date & Time : 30 Jun 2021 | 1105
Rental Period : 8 months
Rental Per Month (excl. GST) : S\$ 950.00
Rental Per Month (incl. GST) : S\$ 1,016.50
Payment on :
Insurance Premium : CHINA TAIPING
(for ABSL arranged Insurance)

PAYMENT

Deposit : S\$ 500.00
Upfront Rental : S\$ 1,016.50
Total Rental Fee (to be paid on signing of Agreement) : S\$ 1,516.50

IMPORTANT NOTE

Rental Fee is to be fully paid within 3 days from the date of our invoice
Hirer to ensure pumping correct FUEL TYPE listed above.
Hirer to conduct proper checks on the vehicle while using such as sufficient engine oil and coolant water etc.
Any unusual discovery of warning lights in the vehicle, Hirer are to consult ABSL for further assistance.



Signed by and on behalf of
ABS Leasing Services Pte Ltd
Position : Salesman
Name : Chan
Date : 1/11/2020

Handwritten signature



Signed by and on behalf of
Position : DIRECTOR
Name : NG JIA HAO
NRIC : S9032553A
Date : 1/11/2020



M

VEHICLE NO: GBK 1209C

MAKE & MODEL: NISSAN NV200

AUTO//MANUAL

DATE OF ACCIDENT	12 / 04 / 2021	C.C. 1.6
TIME OF ACCIDENT	1850HRS	AM-/PM—
LOCATION OF ACCIDENT	JURONG WEST AVE 1	
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT/ PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	ABS LEASING SERVICES PTE LTD.	
EMAIL	OPTIONS GARAGE @HOTMAIL.COM	OFFICE: MOBILE: 92066050
NRIC	201819528D	
CLAIM TYPE	OD / THIRTY PARTY / <u>REPORTING ONLY</u>	
FLEET POLICY	YES <u>NO</u>	
INCURANCE CO.	CHINA TAPING	
TYPE OF COVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft	
POLICY NO.	DMCVSNW 08070622191	
NAME OF DRIVER	AS ABOVE / IF NO: NG JIA HAO	
NRIC	99032553A	
DATE OF BIRTH	05 / 09 / 1990	
ANY PASSENGER	YES/NO:	
NAME OF PASSENGER	—	
GENDER OF PASSENGER	MALE/FEMALE	
OCCUPATION	Outdoor/Indoor	
DATE OF DRIVING PASS	03 / 11 / 2010	
GENDER	<u>MALE</u> / FEMALE	
CONTACT NO.	Mobile: 8468 8141 / Office:	Home:
EMAIL	—	
ADDRESS	330A ANCHORVALE STREET.	
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes, Reg No:	INSURE:
RELATIONSHIP	Employee / If No: <u>HIRE</u>	
WEATHER CONDITION	<u>Clear</u> / Raining / Other:	
ROAD SURFACE	<u>Dry</u> / Wet / Other:	
ANY INJURIES	<u>No</u> / If yes, Who?	
CONTACT NO.	—	
ROLICE REPORT	<u>No</u> / If yes, Where?	
NOTICE OF INTENDED PROSECUTION?	<u>No</u> / If yes, Who?	
VEHICLE B NO.	SLS 812	Any Passenger:
NAME		
CONTACT NO.		
VEHICLE C NO.		Any Passenger:
VEHICLE D NO.		Any Passenger:
VEHICLE E NO.		Any Passenger:
VEHICLE F NO.		Any Passenger:
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <u>NO</u>	
WHO IS REPORTING	DRIVER/ <u>OWNER</u> / BOTH	
Original Language Used	<u>English</u> / Mandarin / Others:	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <u>NO</u>	



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ407/C

R SN

AN0597A

Cov. Type:C

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) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00000622101

Engine No.: K9KF276D126566

Cha. No.: VSKYBAM20U0031409

1. Index Mark and Registration
Number of Vehicle

GBK1209C

AUTOSAFE
=====

2. Name of Policy Holder

ABS LEASING SERVICES PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

20/01/2021
(00:00:00)

Excess Sect. I . S\$1,500.00

Excess Sect. II S\$1,500.00

EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

19/01/2022

5. 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 the Motor Vehicle. 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.

6. Limitations as to use:*

- (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.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO. : ABS FINANCIAL 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: ABS INSURANCE AGENCY PTE LTD
Authorised Officer


Authorised Signatory