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Yehno SLD 8292H		Shrs. Alt. Chrs,	i !		
DOA 11 04 2023 17:15	i-Motor Cla	im Form	:		
OD/TP/Reporting Only	i-Motor W/0	O (Within: OD 2hrs	TP 4hrs)		٤
TP Insurer:	Assessment/S	urvey Report	1 "		
	Ass't Report	by Fax / Hand to	Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (			Tol: F	ax:	
TP Particulars: Veh No: G	BM 647	. INC(	)/Non-INC( )		
Owner / Driver: (	18		Tel:	)	
Policy No: ( ) Po	criod: (	)	Cover Type: (	)	
Confirmed by: (		Date:	Tine:	J	
		WO): N: 0-20	%; P: 21-79%. F: \$0-1	CO%]	
	Warranty: YES (	)/NO(	)		
	000 ( )/\$2,000				
General Remarks;	A CONTRACTOR	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	Mary Sandara		
( ) Walk-In Customer's info		nfidential & Stri	ctly NO refer of repairer.	***************************************	
( ) Total Loss Case : to e-mail Insur	er URGENTLY.	•			
Drive-In ( )/ Towed-In ( ); Invoice		10 ( ); To	wing Co. (		)
Comarics - (ING horlines 6788 6616)			Dite&Time Completed	Done	.by
	Courtesy Car (	)			-
) QC Check / Post Repair Inspection	( )				
) Upload Resurvey Photo [Repair Cost > \$3	3000] (	)	:		
Injury:					
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iman('s Particulars		2) DA : Damage A	ssessment (\$100); INC (\$3)		
rer/Owner:		3) TF: Towing Fe		7545 1120	
lact No:		5) FT : Follow-Th	rough Survey (Resurvey)	230	
		6) TR: Re-inspect	ainst ING Only (wel 10 Jan 2005)	\$75	
naged Portion:		7) N1 : Idao DA +	SMRT Survey	160	
Checked by (Engr-In-Charge):		8) NTUC Addition			
		*N5: Courtesy (	Car / Tpt Allowance -ordination	\$10	-
ditors Comments :-		+ N7. Post Page		\$25	T
Ji		TT: (1114) TT	Non INC) against INC	520	
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an arrand six				MEGIE	



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

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

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 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**

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number	***************************************	SLD8292H
vernere registration runiber	****************	SLD8292H

#### 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	(Filone) +03-02828385

### VEHICLE PARTICULARS

Manufacturer

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

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	SLD8292H

### DRIVER

Name of Driver NRIC No	TAN ENG HUN REMY @ MUHAMMAD HILMI TAN SXXXX414D
Date Of Birth Occupation	14/11/1964 Outdoor

Date Of Driving Pass	17/07/1998
Driving experience	24 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83798000
Alt. Phone Number	(1 Holle) 103-83798000
Email Address	
Address	simon@asiacarrental.com.sg APT BLK 35 CHAI CHEE AVENUE
Address complement	# 04-260
Postcode	461035
Is the driver the policyholder?	
If No, Relationship of the Driver with the Insured	No BENTAL LEAGING
Does Driver Own Other Vehicles?	RENTAL LEASING No
Vehicle Registration Number of Other Vehicle Owned by Driver	NO
***************************************	
Insurance Company of Other Vehicle Owned by Driver	<del>-</del>
GENERAL INFORMATION OF THE ACCIDENT	
and the second of the second o	
Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign unhight involved in the	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	2
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance? Translator's name	No
Translator's ID	-
Translator's phone number	l <del>-</del>
Translator's phone number	5
Translator's email Original language used in the statement	•
original language used in the statement	•
PASSENGER 1	
Name	NANOV PENO
Gender	NANCY PENG
	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No No
If yes, against whom?	-
CIDCULATIONS OF LOOP	
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED STATEMENT	
ATTACHMENT(S)	
Are accident photos quallelle formula	
Are accident photos available for attachment?  Was there any video captured by Car Camera?	Yes
Topico by Gai Gailleia!	No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	00.00
Vehicle Manufacturer	GBM64Z
Vehicle Model	
Vehicle Variant	
(47) (31) (32) (32) (32) (32) (32) (32) (32) (32	

Date Of Driving Pass

-
Commercial vehicle
-
-
-
-
_
-

### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SCF95J
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 names	
Name of injured person	TAN ENG HUN REMY @ MUHAMMAD HILMI TAN
Gender	Male
Phone No	(Phone) +65-83798000
Address	APT BLK 35 CHAI CHEE AVENUE
Address Complement	# 04-260
Post Code	461035
Approximate Age Years Old	-
Injuries Sustained	BODY PAIN
Injured person in which vehicle?	SLD8292H
Were seat belts worn?	•
Was this injured conveyed to hospital by ambulance?	No

### **SKETCH PLAN**

### **IMPORTANT NOTICE**

- Please report <u>correctly</u> 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.

- 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.
- 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:

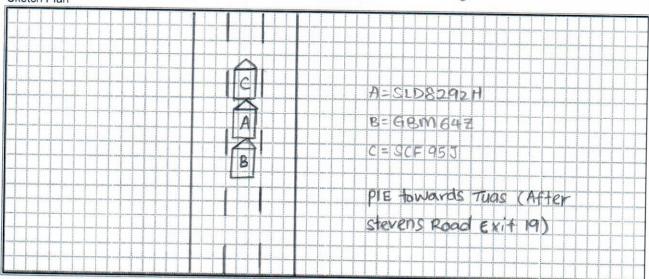
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



escribe Circumstance of the Accident	
	/
B 6	
Refer	- to Attached
eclaration	

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 & Time

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

On 11.04.2023 at about 17:15 hours along PIE towards Tuas (After Stevens Road Exit 19), I was travelling straight on lane 2 at the above mentioned location and when the front vehicle (C) slowed down and stopped, hence I also followed suit.

Suddenly, I heard a loud bang from behind and the great impact forced my vehicle (A) to propel forward and hit onto the front vehicle (C). When I alighted, I then realised it was vehicle (B) that collided onto the rear portion of my vehicle (A), hence causing damages on the front and rear portion of my vehicle (A).

I wish to state that it was a chain collision of total of 3 vehicles involved.

I have 1 passenger in my vehicle (A).

Vehicle (A): SLD 8292H

Vehicle (B): GBM 64Z

Vehicle (C): SCF 95J

Mhr





		CAR RENTAL AGREEMEN	T
This Agreement, hereinafter known as "the Agreement", is made on the 12 day of Dec 2022.  Between ASIA CAR LEASING PTE LTD  having its registered office at:  167 Upper Paya Lebar Road Singapore 534859			
	hereinafter known as "th	ne Owner" of the one part	
And hereinafter know hereby agree that hereinafter appea	Hirer name: NRIC number: Contact number: Hirer address: n as "the Hirer" of the oth	Mr. Tan Eng Hun Remy @ Muhd H: \$1651414D 8379 8000 Blk 35 Chai Chee Avenue #04 260 8	Singapore 461035
	A CONTRACTOR OF THE CONTRACTOR	SLD 8292 H Toyota Vellfire 2.5 (A) Black	
Petrol Level In:	30 December 2022 Time Out	1/2 F	7
1. Unli 2. Serv 3. Roa 4. Mot 5. 24 H b. Rental fe c. Without payment becoming lodge a p incidenta All payments due may from time to	the includes the following: mited Mileage; rice and maintenance; d Tax and Radio License or Insurance Coverage (Elour breakdown and emer e is and is payable in adv prejudice to the Owner's of S\$30 per day for each g due. In the event that the olice report as a loss of v. l costs of S\$200.00 for th hereunder shall be made time communicate to the ush, Telegraphic Transfer  : Asia Car Leas : United Overse : 310-304-701-1	regency service (in Singapore only); and ance before the commencement of the rights, the Hirer will be liable to an adm day after the due date if the rental fee of e rental fee remains unpaid for more that ehicle and activate the vehicle repossesse repossession process will be charged to the Owner at its address stated herein Hirer. Any payment sent by post shall be to the following bank account:  ing Pte. Ltd. as Bank Limited	ninistrative fee of \$\$50.00 plus late interestor other payment remain unpaid after an three calendar days, the Owner may sion team to repossess the vehicle. The to the Hirer.  In or at such other address as the Owner one so sent at the risk of the Hirer. Payment
	*Yo make pays *Whatsapp pa	ment before 12pm every Saturday of yment proof to 94559450*	
		A. A.	SING
		Hirer's Signature	Ottner's Signature
			DIOL #

### SINGAPORE ACCIDENT STATEMENT

Accident Date: 11/04/2023 Time: 17:15 (hh:mm) 24 hr format				
Location PIE towards Tuas (After Stevens Road Exit 19)				
TOTAL TALLS (THICK STEVENS ROCK (XII (4))				
Vehicle Number SLD8292H				
Insured Name Asia Car Leasing Pte Ltd				
Make Toyota Model Velifire 2-5				
Are you claiming under your own insurance policy for repair to your vehicle?				
( ) Yes If No,Pls select: ( / ) Third Party ( ) Reporting				
Insurance Company AIG				
Town of Della (				
Policy Number SLD8292H ) Third Party Fire & Theft (/) TP Only				
Name of Driver Ton Foo Hun D				
Muhammad Hilmi Tan				
NRIC / FIN S1651414D Contact Number 8379 8000				
Date of Birth 14/11/1964				
Driving Pass Date 17/07/1998				
Occupation ( ) Indoor ( / ) Outdoor				
Gender (/) Male ( ) Female				
Email Address simon@asiacarrental.com.sq ()NO EMAIL				
Address of Driver BLK 35 Chai Chee Avenue #04-260 s (461035)				
Was driver an employee of the Insured's Company? ( ) Yes ( ) No				
If No, Relationship of the Driver with the Insured (V) Leasing				
( ) 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				
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 Driver - 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 3 <sup>rd</sup> party Name / Nric Contact				
Veh B G8M 64Z  Name / Nric Contact				
Veh C SCF 95J				
Veh D				
Veh E				
Veh F				

Passenger: 1) Nancy Peng (Female)



### 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) AND ROAD TRANSPORT (AMENDMENT) ACT 2019 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

(The below excess is subject to GST)

M.Z.400

Third Party Commercial Motor

CERTIFICATE NO.

SLD8292H

POLICY EXCESS

S\$2.500.00 (!!)

WINDSCREEN EXCESS NA

SUM INSURED

INSURING WITH COE/PARE NO

1) VEHICLE REGISTRATION NO.

SLD8292H

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 2022

4) DATE OF EXPIRY OF INSURANCE

17 October 2023

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.

1/ 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 14 Oct 2022

0502806-000 Liew Ooi Lin May 78 Shenton Way #01-K1 SINGAPORE 079120

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPAHN

**ORIGINAL**