NATIONAL Assessment Centre	e Services [wef 1 st	an' 06]			
Date In: 01 06 2023	Jeb description	Date & Time Complete	:d	Done b	Ž.
Ref No: NA(C1/23005568 d4	SAS e-filing				
Veh No: GBL 4572C	E-mail (within 8hrs, Al	C 2hrs)			
D.O.A: 31/05/2023 22:00	i-Motor Claim For	m			
00 1 = 10	i-Motor W/O (Withi	n: OD 2hrs, TP 4hrs)			
OD / TP / Reporting Only	i-Photo Uploaded				
TD Insurer	Assessment/Survey I	Report			
TP Insurer:	Ass't Report by Fax	/ Hand to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:	.*	
TP Particulars: Veh No: SL	N 1833 R	INC () / Non-INC ()			
Owner / Driver: (Tel:)	
Policy No: () Per	riod: () Cover Type: ()	
Confirmed by : (Dat	te: Time:)	
Insured/Driver Liability: (%) [1	Note-Est. Status (WO):	N: 0-20%; P: 21-79%. F: 8	30-100%]		
Year of Registration: ()	Warranty: YES ()/1	() OV		- 1	
Excess: (\$) Loading: \$1,0	000 () / \$2,000 ()			
General Remarks:-					20
() Walk-In Customer: Customer's info	rmation strictly Confider	itial & Strictly NO refer of repai	rer.		
() Total Loss Case : to e-mail Insure		idal a Cilibriy 110 Island Cilippa			
); Towing Co: (8.8)
Drive-In ()/ Towed-In (); Invoice	E. PES()/ NO(), Towning Co. (
Remarks:- (INC hotline: 6788 6616)		Date&Time Complet	d	Done l	by
		\$200,000 (2000 April 10) (200,000 (200,000 April 10) (40 April 10) (40 April 10) (40 April 10) (40 April 10)			
Apply for Transport Allowance ()/(Courtesy Car ()				
	Courtesy Car ()				
2) QC Check / Post Repair Inspection	()				
2) QC Check / Post Repair Inspection	()				
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3 Injury:	()	-			. ***
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2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions NA2301624 Inimant's Particulars:-	() 3000] () Inv 1) A 2) D	R: Accident Reporting (\$30); A: Damage Assessment (\$100);	NC (\$80) \$40/\$45		
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions NA2301624 Inimant's Particulars:-	() 3000] () Inv 1) A 2) D 3) T 4) F	R: Accident Reporting (\$30); A: Damage Assessment (\$100); F: Towing Fee C: Follow-Through Survey	\$40/\$45 \$120		
2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions Actions Acti	() 3000] () Inv 1) A 2) D 3) T 4) F 5) F	R: Accident Reporting (\$30); A: Damage Assessment (\$100); If: Towing Fee	\$40/\$45 \$120 \$30		
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2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions NA2301624 Claimant's Particulars: Oriver/Owner:	() 3000] () 3000] () 3000] () 4) F 5) F 60 T 7) N	R: Accident Reporting (\$30); A: Damage Assessment (\$100); F: Towing Fee T: Follow-Through Survey T: Follow-Through Survey (Resurvey) or claiming against INC Only (wef 10 Ja	\$40/\$45 \$120 \$30 n 2005)		
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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 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.
- 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 01/06/2023 14:35 (SGT) Reported by Actual Driver Date of Accident 31/05/2023 22:00 (SGT) Exact Location of Accident Singapore Additional Location Information CTE SLIP ROAD TOWARDS BARTLEY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBI 4572C INSURED/POLICYHOLDER

Is company? Name Of Registered Owner SEEKTOP PTE LTD Company Reg No 2XXXXX868E **Email Address** evolution96auto@gmail.com Mobile Phone No (Phone) +65-90966559 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Nissan Model Nv200 Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Auto

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMCVSNA00014362302

1597

DRIVER

CC

Name of Driver HIEW KOK LEONG NRIC No SXXXX464B Date Of Birth 15/07/1991 Occupation Outdoor

Date Of Driving Pass	29/11/2017
Driving experience	5 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92237501
Alt. Phone Number	En
Email Address	evolution96auto@gmail.com
Address	APT BLK 698A HOUGANG STREET 61
Address complement	# 05-308
Postcode	531698
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any faraign vahials involved in the assident?	N.
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident	No
Was anybody injured in the Accident?	2
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	
PLEASE 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	R VEHICLE PROPERTY 1
Vehicle Registration Number	SLN1833R
Vehicle Manufacturer	
Vehicle Model	8
Vehicle Variant	<u> </u>
Vehicle Colour	•
Vehicle Category	Private car
Name of Driver Contact Number	•
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

- 1. 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.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association 5. Any false reporting may be referred to the Police for investigation. 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)

- (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
- (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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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.

(including their law yers/law Tims),		J.		Date Witne	essed by Reporting	1 1/6 2023
Policyholder's Signature / Date & Time Sketch Plan	Driver's Signatur & Time CTE Slip	e (If driver is not the	e policyholder)	Pers	onnel	
Veh A GB	L 4572C- LN 1833R		1			And the second s
			BA			
			1			

escrib	e Circumstances of the Accident	
V.		
		\exists
_	On the stated date and time. I, Vehicle A	
	(GBL4572C) was travelling straight on the stated	
	venue. Suddenly the front Vehicle B (SLN1833R)	
	jammed brake, I couldn't stop in time and collided	
	onto Vehicle B (SLN1833R) rear portion.	
	Vehicle A : GBL4572C	
	Vehicle B: SLN1833R	
-		
		-

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 & Time

SMMILL 116/2023

Witnessed by Reporting Centre Personnel

SEEKTOP PTE LTD

VEHICLE LEASING AGREEMENT

BETWEEN

SEEKTOP PTE LTD (ROC NO: 201937868E)

of known Address: NO: 60 JALAN LAM HUAT #03-57 CARROS CENTRE S737869

Tel: 86856789 (Hereinafter referred to as "the Lessor")

AND

HELMI SARIM S8330845A HP:91872817 HIEW KOK LEONG S9172464B HP:92237501 2 FLORA DRIVE #07-09 S507025

VEHICLE

Make & Model NISSAN NV200	Color BLACK
ORD Date 29 JUL 2021	PlateNo: GBL4572C
Chassis : VM20169186	Vocational:

Terms and conditions:

1. Scope of Agreement

This Vehicle Leasing Agreement ("Agreement") shall be binding upon the lessees wholly and/or all of the Lessees' agents, drivers, employees, representatives etc. even if replacement vehicle is taken by the Lessee. The Lessee shall be responsible for any replacement vehicle taken by any authorized person.

All driver are to have a minimum 2 year driving experience. Upon acceptance and execution of this Agreement, the Lessee shall guarantee that their designated driver has a valid driving license (of the appropriate Class depending on the Leased Vehicle).

2.Leasing Period

The Lessor agrees to lease the vehicle to the Lessee for the following period. MONTHLY (Daily / weekly / Monthly)

Start Date: ____17 APR 2023

End Date: 16 JUL 2023

Returning Date: ___

But Return on _____

The Security Deposit payable by the Lessees to the Lessors upon the execution of this Agreement is S\$500 .

The MONTHLY (weekly / Monthly) leasing fees payable is \$1200 ("Leasing Fees") to be made payable in Advance transfer to (OCBC CURRENT: 601472673001 / PAYNOW UEN 201937868EOCB) ON every 17th OF every month, and late payment charge will be \$20 per day.



j.	: 31 5 2023 Accident Time: 22 00 (24-HR-Format)				
Date of Accident					
Accident Place	:CTE Stip Felt + Wals Bertley :GBL 4571C Make/Model: Nissan NV200				
Vehicle. No. (Car Plate No.)	:GBL 4571C Make/Model: 1713200000000000000000000000000000000000				
Insurace Company	(21027868F)				
Owner or Company Name /IC No.	: Seek top He Utd (20145 18602) Company Tol				
Owner or Company Contact No.	901665501 Owner's rip				
DRIVER'S Name / IC No.					
DRIVER'S Date Of Birth	15 7 MM DRIVER'S License Pass Date 29 NOV 2017				
Relationship of Owner & Driver	: Spouse Parents Children Sibling Employee Others: Hive				
DRIVER'S Address	: BIK 698A Hougary St 61 \$05-308 (2) 531698				
DRIVER'S Contact No./ Alt No.	:1) 9223 750 2) =				
DRIVER'S Occupation	: INDOOR (OUTDOOR (c.g. working inside or outside office) evo jution 9 6 auto @ gmail. (OM)				
Email Address	EVO JUNION 9 6 acrio C DIMITI O WET				
Weather & Road Surface	: CLEAR & DRY RAINING & WET AFTER RAIN & WET				
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance				
Was the accident reported to the police? YESOND Was there any video Captured by car carners YES \ NO Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Any Injury (IT YES, FIs state):					
Othe	r Party Driver's Particular (if any)				
Vehicle. No: SLN 1833	R B Vehicle. No:				
Vehicle Make\Model:	Vehicle Make Model:				
Name Driver:	Name Driver:				
IC No. Driver/Contact:	IC No. Driver/Contact:				
IC No. Dirver/Contact.					

* NEW - Passenger's name & gender:



Motor Commercial

MZ407/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 (Mal

BR0085A

Cov. Type:C

CERTIFICATE No.

DMCVSNA00014362302

Engine No.: HR16191000D

Cha. No.: VM20169186

Index Mark and Registration

Number of Vehicle

GBL4572C

AUTOSAFE

2. Name of Policy Holder

SEEKTOP PTE. LTD.

Effective date of the Commencement of Insurance for the purposes of the Regulations, (00:00:00)

12/02/2023

Excess Sect I.

\$\$2,000.00

Ordinance or Enactment

Excess Sect II

\$\$1,500,00

4. Date of Expiry of Insurance

11/02/2024

EX ON WINDSCREEN . S\$100.00

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 in connection with the Policyholder's business and Hirer's Business.
 (2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business and Hirer's Business.
 - (3) Use for social, domestic or pleasure purpose.

- (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.: LAKE VIEW CREDIT PTE 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), 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: Tan Jia Hwei **Authorised Officer**

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

★3 Anson Road #16-00 Springleaf Tower Singapore 079909

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www.sg.cntaiping.com