S000236E0009 / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 14/06/2023 16:34 (SGT) SUBMITTED BY: LEK YEE KHENG VERSION: 1 (14/06/2023 16:34 (SGT))

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.

- 4. The issue and acceptance of this is form by instrained 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 14/06/2023 16:34 (SGT) Reported by **Actual Driver** Date of Accident 10/06/2023 17:25 (SGT) Exact Location of Accident Singapore Additional Location Information 127D KIM TIAN RD, KIM TIAN GREEN Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SNJ5875R

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner RELIABLE.SG PTE LTD Company Reg No 202235784Z Email Address DRIVERELIABLERIDES@GMAIL.COM Mobile Phone No (Phone) +65-81669797 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Freed Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private hire Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D22MFL0009952

DRIVER

Name of Driver **CHIA HWA NANG** NRIC No S0474747Z Date Of Birth 08/09/1949 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	26/05/1980 43 YEARS AND 1 MONTH Male (Phone) +65-85226265 - Franknang@gmail.com BLK 8B UPPER BOON KENG ROAD 09-528 SINGAPORE 382008 No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collided into Motorcyclist Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Police Cantonment Complex 391 New Bridge Road Singapore 088762 No -
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT ATTACHED	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	FBK6264K Motorcycle

Name of Driver NRIC No	TAN KUAN MENG S7105670H
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.
- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as <u>truthful and accurate is 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 addings), which may be sited outside of Singapore, for one or more of the above Purposes

Policyholder's Signature / Date & Time

Sketch Plan

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

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

3.

Ä

BIK 127D

A FBK6264K

Kim Tian Rd

1

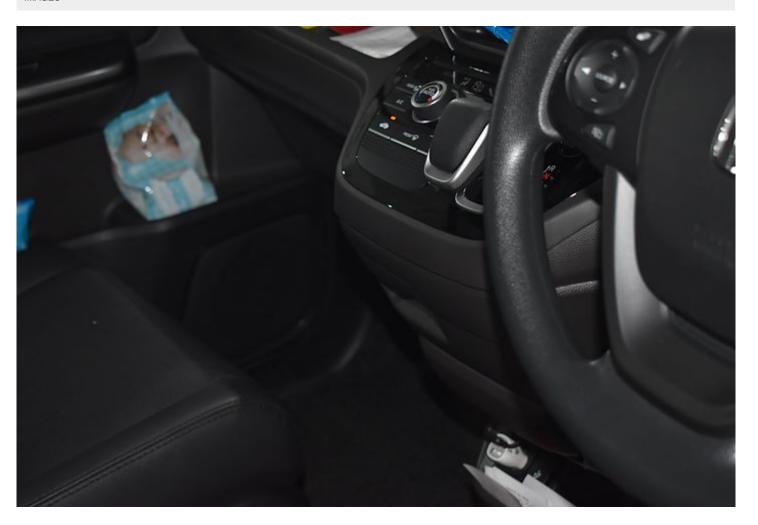
cribe Circums	tance of the Accident			
	Pefer	to	Police Report	_
			'	,
			sin to a Month	
1/2				
			may have 14 days time frame	
mage claim	ı under your own	policy,	please check your policy fo	r more information.

going particulars are true in every respect. I/We declare-th

Policyholder's Signature / Date & Time

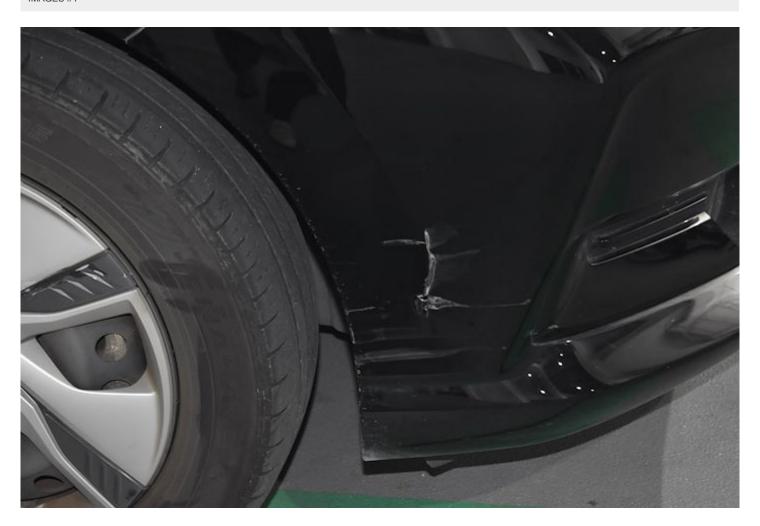
Driver's Signature (if driver is not the policyholder) / Date

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

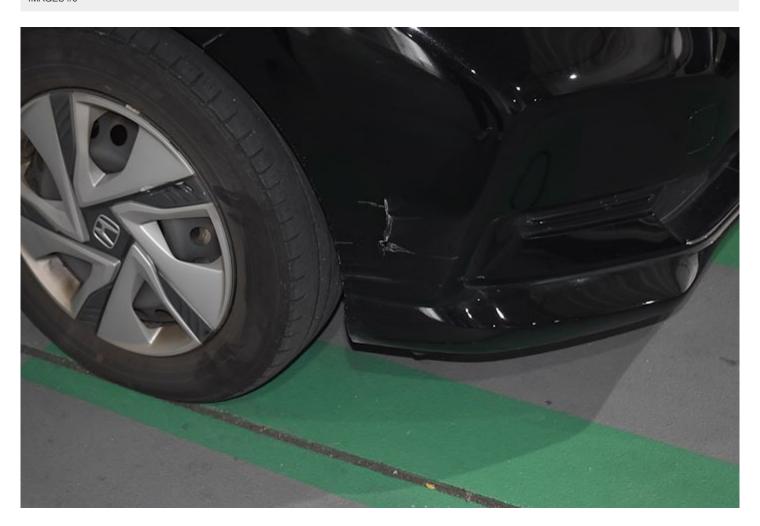


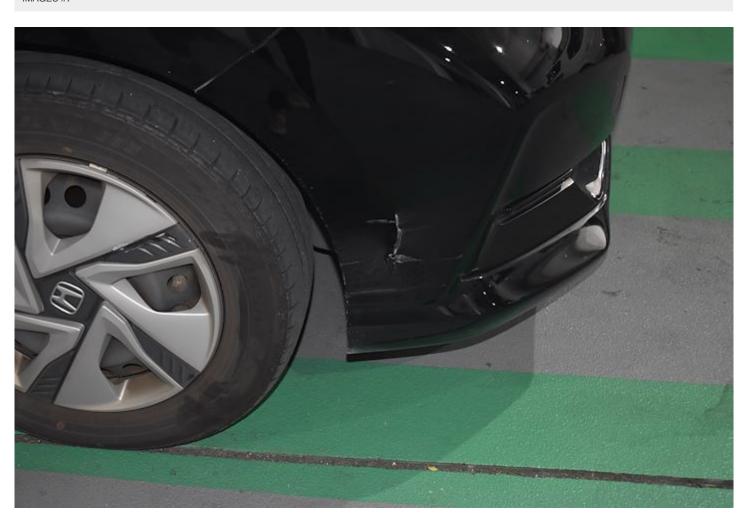




















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Report No. A/20230614/7037

POLICE REPORT (NP299)

Police Station Of Origin Central Division HQ 391 New Bridge Road #03-112 Police Cantonment Complex SINGAPORE 088762 Tel No:1800-2240000

Date/Time Report Made 14/06/2023 14:51	Vide Report No.			Station Diary No.	
Name Of Informant CHIA HWA NANG	Address 8B UPPER BOON KENG ROAD #09-528 SINGAPOR 382008				
ID Type / ID No. NRIC NO / S0474747Z	Contact No. Home/Office: Mobile: 85226265				
Nationality SINGAPORE CITIZEN	Email Address franknang@gmail.com				(
Occupation	Sex	Age	Date of Birth	Race	
Private-hire car driver	Male	73	08/09/1949	Chinese	
Institution/School Name	Language English				
Date/Time Of Incident 10/06/2023 17:25 - 10/06/2023 18:00	Location Of Incident 127D KIM TIAN ROAD KIM TIAN GREEN SINGAPORE 164127				

Brief details.

i were coming out from blk 127d going out to the main road. Suddenly the motorcycle came out from the car park FBK6264K and hit my front bumper on the driver side. This incident happened on 10/06/2023, 0528pm, Saturday. No one injury in this accident.

Subjects Involved Victim	
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/06/2023 14:51
Officer In-Charge Of Case:	Classification Of Case:





2 of 2

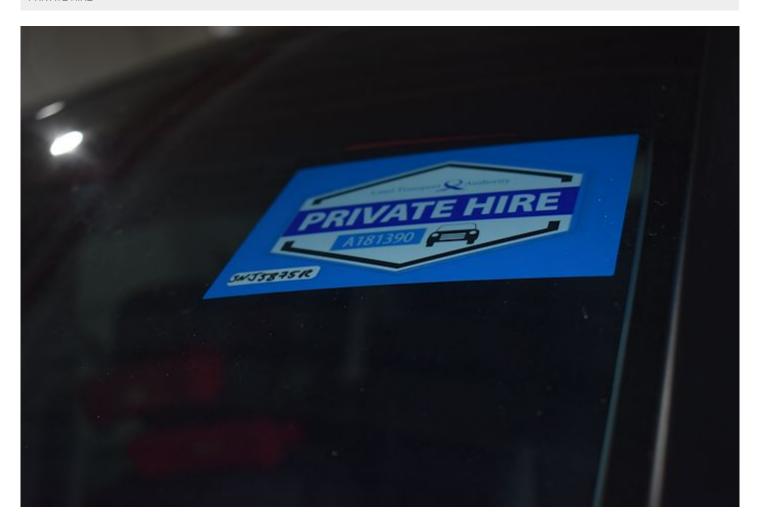
POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20230614/7037

Person Name	CHIA HWA NANG		
ID Type	NRIC NO	ID No	S0474747Z
Gender	Male	Age	73
Race	Chinese	Language	English
Occupation	Private-hire car driver	Address	8B UPPER BOON KENG ROAD #09-528 SINGAPORE 382008
Mobile No	85226265	Is Informant A Victim?	Yes

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/06/2023 14:51
Officer In-Charge Of Case:	Classification Of Case:



RELIABLE.SG PTE LTD

CO REG: 202235784Z
Premicr @ Kaki Bukit, 8 Kaki Bukit Ave 4
+05-50 SINGAPORE 415875
CONTACT: 6591 9999 Fax: 6385 1751 FINANCE: 9373 7667

CONTRACT FOR SERVICE

This contract for service i	s made and effective Date:
BETWEEN:	RELIABLE.SG PTE LTD, CO REG: 202235784Z (the "Company"), with its office located at: 8 Kaki Bukit Ave 4 #05-50 SINGAPORE 415875.
AND:	Name: CHIA HWA NANG NRIC: SOH747471Z (the "Sub-Contractor") with address located at:
	8B, #09-528 UPPER BOONKENG. 382008 Contact No. HP: 85226265 Home: 65249591 Email: franknang@gmail.com
ADDITIONAL DRIVER:	Name:
	PLEASE SIGN HERE Sub-Contractor Signature

Contract for Service

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RELIABLE.SG PTE

CO REG: 202235784Z Premier @ Kaki Bukit, 8 Kaki Bukit Ave 4 #05-50 SINGAPORE 415875 CONTACT: 6591 9999 Fax: 6385 1751 FINANCE: 9373 7667

NOW. THEREFORE, in consideration of the mutual covenants and promises hereinafter set forth, the parties hereto

agree as follows:	, in consideration of the	masaar coremanio and pro-	moss neromotion sectioning the parties in	01000
1. VEHICLE				
	eby handover to the Sub-C ribed Motorcar (the "Vehi		ntractor hereby takes over from The Com	pany,
VEHICLE NO -	SNI 5875 R	MAYE & MODEL	HONDA EREED HYRRID 1 SG ALITO	

2.	TERM					*18 N	ONTHS CON	TRACT	
The	term of this	Contract	shall commence on Date:		09/02/2023		with minimum	rental	period till
	08/08/202	4	and thereafter, to give	7_	_ days notice by	either p	arty for termina	ation.	

In event of any uncompleted contract, the Sub-contractor shall be liable for a penalty of \$10000 due for the remaining unfulfilled contractual term and notice period. However, the company reserves the right to replace the vehicle with an equivalent category or repossess the vehicle with immediate effect due to operational/technical issues e.g. car conditions, de-registration, etc.

JOB FULFILMENT

The Sub-Contractor shall pay an agreed rental fee listed below to The Company.

Rental Fee	SGD \$ 99 per calendar day/ week/ month/ year
Additional Malaysia Coverage	SGD \$ - per calendar day/ week/ month/ year
Additional Charges (Collison Damage Waiver)	SGD \$ 5 per calendar day/week/month/year
Total Amount	SGD \$ 104

3. USE

The Sub-contractor is responsible for the usage of the car and ONLY the authorized Sub-Contractor can use the vehicle and shall use the Vehicle in a careful and proper manner and shall comply with to all national, state, municipal, police and other laws, ordinances and regulations in any regulations in any way relating to the possession, use or maintenance of the Vehicle.

 PAYMENT TERM 	S (Please tick	the following option)
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- Upfront of __ week/month/year rental
- O To be deducted from Grab or any Platforms Payout Weekly
- Weekly payment via bank transfer

VSub-Contractor Signature

Contract for Service

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