WATTONAL Assessment Centre Se	ervices (wef Jamos)	SU09237E0002	
	b description	, Date & Time Completed!	Done by
	SAS e-filing		
Veh No: SUR SUSL	E-mail (within 8hrs. AIC 2hrs)		
DOA - 11 /N// 2022	-Motor Claim Form		
Op / TP / Reporting Only	-Motor W/O (Within: OD 2)	nrs TP 4hrs)	
The pointing only	-Photo Uploaded	1	
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / H</u> and	to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fa	(:
TP Particulars: Veh No:	INC		
Owner / Driver: (*	Tel:	1
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	79%1
rear of Registration: () Warra	nty: YES ()/NO ()	370]
Excess: (\$) Loading: \$1,000 ()/\$2,000()	,	
General Remarks;		B)23884444454	
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() Total Loss Case : to e-mail Insurer UR	GENTLY.	dictly NO rater of repairer.	
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1) 4		Date&Time Completed	Done by
1) Apply for Transport Allowance ()/ Courte	sy Car ()		
2) QC Check / Post Repair Inspection	()		
3) Upload Resurvey Photo [Repair Cost > \$3000]	(·)		
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Inimant's Particulars :-	00.00.000.0000.0000.0000	eparation Checklist	Ist Bill Ado
	1) AR : Accident 2) DA : Damag		
river/Owner:	3) TF : Towing	Fee \$40/5	45
ontact No:		Through Survey \$12 Through Survey (Resurvey) \$2	30
amaged Portion:	For claiming	against INC Only (wef 10 Jan 2005)	
anaged Fortion:	6) TR : Re-insp 7) N1 : Idae DA	+ SMRT Survey . \$10	
C Charles d by (2)	8) NTUC Addi	ional Services:-	,,,,
C Checked by (Engr-In-Charge):	*N5: Courtes	y Car / Tpt Allowance	
uditors! Comport		Co-ordination 5	10
utlitors Comments := at.]:	*N8: DV / C	pair Inspection 5: offect Excess Coordination	25
•		P (Non INC) against INC 5:	20 .
at. 2/3;	Invaire dated	obile Fee Charged	0
	Invoice dated	Fee Charged	

SN09237E0002 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 14/07/2023 11:48 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (14/07/2023 11:48 (SGT))



SINGAPORE ACCIDENT STATEMENT

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 Actual Driver
 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 Reported by Date of Accident **Exact Location of Accident**

Additional Location Information Country/State of Loss

14/07/2023 11:48 (SGT) **Actual Driver** 16/04/2023 06:57 (SGT) N Coast Ave, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNE8115H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No

Email Address Mobile Phone No Alternative Phone No

Yes ST RENT AND DRIVE PTE. LTD. 2XXXXX374C strentanddrive@gmail.com (Phone) +65-84841149

VEHICLE PARTICULARS

Manufacturer Model

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? Vehicle Category

Transmission CC

Toyota Corolla

Private use

Yes

Commercial vehicle

Auto 1797

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

India International Insurance Pte Ltd D23MFL0002618

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

HAN WAI HENG SXXXX023F 19/12/1969 Outdoor

Date Of Driving Pass 28/12/2017 Driving experience 5 YEARS AND 4 MONTHS Gender Male Mobile Number (Phone) +65-84841149 Alt. Phone Number **Email Address** hanwaiheng1969@gmail.com Address BLK 6 MARSILING DRIVE #07-74 Address complement Postcode 730006 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 Drink driving / Drugs influence Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 1 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? No 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? Police Station Name Woodlands Division Headquarters Police Station Phone No (Phone) +65-18004660000 Police Station Address 1 Woodlands St 12 Singapore 738622 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT L/20230712/7059 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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)

Lunderstand, 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
- (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 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.

AN TANADA SALATANA SA

Policyholder's Signature / Date & Time

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

Water Sed by Reporting Centre

Personnel

Sketch Plan

BARRIER

A) SNE8115H

NORTH COAST AVENUE

	-REFER TO TP/1P/10792/2023 -	
	1/20230712/7059	
		and the second s
ation		1

Policyholder's Signature / Date & Time

Driver's Signature (If driver is hot the policyholder) / Date & Time

Wheessed by Reporting Centre
Personnel



Report No. L/20230712/7059

POLICE REPORT (NPB99)

Police Station Of Origin Woodlands Division HQ 1 Woodlands Street 12 SINGAPORE 738622 Tel No:1800-4660000

Vide Rep	ort No.		Station Diary No.
Address 210 TURF CLUB ROAD #A-27 THE G		GRANDSTAND	
SINGAPO Contact N	ORE 2879 No.		
Home/Off	ice:	Mobile: 64649098	
		ail.com	
Sex Female	Age 52	Date of Birth 08/07/1971	Race Chinese
Language		100.0171071	Оппеве
Location Of Incident 7 NORTH COAST AVENUE 7 NORTH COAST			
	Address 210 TURI SINGAPO Contact N Home/Off Email Add strentand Sex Female Language English Location Off 7 NORTH	210 TURF CLUB R SINGAPORE 2879 Contact No. Home/Office: Email Address strentanddrive@gm Sex Age Female 52 Language English Location Of Incident 7 NORTH COAST A	Address 210 TURF CLUB ROAD #A-27 THE SINGAPORE 287995 Contact No. Home/Office: Mobile: 64649098 Email Address strentanddrive@gmail.com Sex Age Date of Birth Female 52 08/07/1971 Language English Location Of Incident

Brief details.

Dear Sir / Madam

We are a rental company whom had rented the below vehicle to a hirer, Han Wai Heng. He was involved in a drink driving incident on 16 Apr 2023 and was uncontactable since then

We need a police report to be submitted to GIA

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: 12/07/2023 16:08
Officer In-Charge Of Case:	Classification Of Case:





2 of 2

Report No. L/20230712/7059

POLICE REPORT (NPB99)

CONTINUATION OF REPORT

Vehicle No - SNE8115H

Ownership - ST Rent & Drive Pte Ltd (UEN 201615374C)

Details of Hirer :-

Name : Han Wai Heng NRIC : S6992023F

DOB: 19/12/1969

Add: Blk 6 Marsiling Drive #07-74 S(730006)

Mobile: 8484 1149

Thank you

Jasmine Ngai

Signature Of Officer Recording The Report:	Signature Of Informant:	
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.	
Signature Of Interpreter: Not applicable	Date/Time: 12/07/2023 16:08	
Officer In-Charge Of Case:	Classification Of Case:	



Traffic Police 10 Ubi Avenue 3 Singapore 408865 Tel +65 6547 6246 www.police.gov.sg

Our Ref

: TP/IP/10792/2023

Date

: 16/04/2023

NAME: HAN WAI HENG NRIC / FIN: S6998023F

Dear Sir / Madam.

CASE OF DRINK DRIVING ALONG NORTH COAST AVENUE ON 16/04/2023

NOTICE FOR VEHICLE (SNE8115H) COLLECTION

Please collect the above vehicle which is registered under your name at Traffic Police Vehicle Pound located at 517 Airport Road, Singapore 539942 within 30 working days from the date of this notice. The Duty Officer at Traffic Police Vehicle Pound can be contacted at 6280 7841. The collection hours are:

Day of week	Operational hours
Monday	2.00 pm to 4.00 pm
Tuesday to Friday	9.00 am to 12.00pm
. adday to i fludy	2.00 pm to 4.00 pm

- You have to make your own arrangements to remove your vehicle at your own cost. If you are authorising someone else to collect the vehicle on your behalf, please ensure that he / she produces his / her NRIC / Passport for verification. Please fill up the letter of authorization at Annex 'A'.
- Take note that the vehicle must be collected within 30 working days from the date of this notice or storage fee will be levied as follows:

Type of vehicle	Storage fee per day
Motorcycle/Scooter	\$20/-
Motorcar	\$40/-
Others	\$80/-

Traffic Police will proceed to dispose the vehicle if it remains unclaimed <u>after 30 working</u> days from the date of this notice. Should you require further clarification, please contact the undersigned at telephone number 6547 6162 or via email at Yeo_Kia_Huat@spf.gov.sg

Yours faithfully,

YEÖ KIA HUAT SENIOR INVESTIGATION OFFICER TRAFFIC POLICE



SINGAPORE POLICE FORCE ACKNOWLEDGEMENT SLIP

Her: Report No:	
1, SSIJF YEO	KIA HUAT
(Recipient's Name, Co	ntact No. / NRIC or Passport No. / Rank and No.)
of	71
(Address /	Police Station / NPC / NPP)
hereby acknowledge receipt of the below mention	
1 (Singapore Oriving Lience below	ying to Han Wa: Heny
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(Signature) S(9980237	Signature
	(Name Control No (NEW ST
(Name, NRIC or Passport No. / Rank and No.)	(Name, Contact No. / NRIC or Passport No. / Rank and No.)
Other Remarks: Immediate superior	of driving licence valer \$ See 470
+ the Roed Trathic Act 1961 a	of 16/04/2012
	(56998023
	56918

*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.
Date of Accident: 16 / 04 /2022 (dd/mm/yy) Time of Accident: 06 : 57 (24-HR-FORMAT)
Vehicle No.: SNE8115H Vehicle Make & Model / Engine (cc): To YOTH COROLLA SPORTS Private Hire: (Y/N
Exact location of Accident: NORTH COAST AVENUE
Policyholder's Name / IC No.: ST RENT AND DRIVE PTE LTD ROC/UEN (Company) 201615374C
Driver's Name / IC No.: HAN WAI HENG 66998023F 19/17/1969 28/17/2017 (As Above)
Driver's Contact No.: 84841149 Company Contact No / Owner Contact No:
Driver's Address: BLK 6 MARSIUNG DRIVE #07-74 SINGAPORE 730006
Owner Email address: STRENTANDDRIVE EGNAIL.COM Insurance Company: INDIA INTERNATIONAL
Driver Email address: HANNAIHENGI969 CAMAIL. COM
Relationship between Owner & Driver: (Please CIRCLE one only) Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:
What do you wish to claim? (Please TICK one only)
Own Insurance / Other Vehicle (The one you want to claim against) / F Reporting (For Record Purpose)
Exact purpose for which the vehicle Was being used at time of accident? Occupation (nature of job) Indoor/ Outdoor
Private use / Work purpose *No. of Passengers (Including Driver):
Passenger Name: Gender: Male / Female x()
Passenger Name:
Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x()
Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident)
Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks:
Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others:
Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks: Any Injuries: Yes / No (If YES) Injured Person' Name:
FPassenger Name: FPassenger Name: Gender: Male / Female x() Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks: Any Injuries: Yes / No (If YES) Injured Person' Name: Injured Person in Which Vehicle:
Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks: Any Injuries: Yes / No (If YES) Injured Person' Name: Injuries Sustain: Injured Person in Which Vehicle: Colice Report filed: Yes / No (If YES) Which Police Station: The Other Party(s) Details: Driver's Name / IC No: Vehicle No:
Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks: Any Injuries: Yes / No (If YES) Injured Person' Name: Injuries Sustain: Injured Person in Which Vehicle: Colice Report filed: Yes / No (If YES) Which Police Station: The Other Party(s) Details: Driver's Name / IC No: Vehicle No:
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Passenger Name: Passenger Name: Gender: Male / Female x() Gender: Male / Female x() Gender: Male / Female x() Weather condition & Road conditions? (On the day of accident) Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet / Others: Vas there any video captured by your Car Camera? Yes / No Remarks: Injured Person in Which Vehicle: Injured Person in Which Vehicle: The Other Party(s) Details: Driver's Name / IC No: Driver's Contact No: Insurance Company: Vehicle No:



INDIA INTERNATIONAL INSURANCE PTE LTD

Co Reg No 198703792k | GST Reg No M2 0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

Fax (65) 62244174

Office (65) 63476100 Email insure@in.com.sg Website www.ii.com se

COVER: Comprehensive

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)

ST Rent And Drive Ptc. Ltd.

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D23MFL0002618

1. Index Mark and Registration Number of Vehicle

SNE8115H

Chassis No

ZWE2111017075

2. Name of Policyholder

Effective date of Insurance

01 Apr 2023

4. Expiry date of Insurance

31 Mar 2024

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with his/their permission. The Hirer.

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. Limitations as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired

The Policy does not cover

- (1) Use for hire or reward (other than when the vehicle is hired for the carriage of passengers under Z10/Z11 for hire and reward).
- (2) Use for racing, pace-making, reliability trial, or speed-testing.
- (3) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (4) Use for any purpose in connection with the Motor Trade

*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.

Excess Section I WITHIN SINGAPORE		SGD	1,500.00
Excess Section I OUTSIDE SINGAPORE	1	SGD	3,000.00
Excess Section II WITHIN SINGAPORE	4	SGD	1,500.00
Excess Section II OUTSIDE SINGAPORE	1	SGD	3,000.00
Windscreen Excess		SGD	100.00
Hire Purchase Company		DBS Bank Lto	l

SUNROOF EXCESS: \$200.00

FOR DRIVERS BELOW 22 YEARS OLD OR ABOVE 75 YEARS OLD &/OR WITH LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$1,500.00 ON SECTION I & II (SEPARATELY) WILL BE APPLICABLE.

ACCIDENT REPORTING CENTRE: JP KNIGHTS PTE LTD 33 UBI AVE 3 #05-46/47 VERTEX TOWER A SINGAPORE 408868 Tel: 6345 0068 [Fax: 6344 5328 FLASH Accident Reporting Hotline: 6100 1620 / 6360 1038

AUTHORISED WORKSHOP: ACCIDENT REPAIRS MUST BE DONE AT DING AUTO PTE LTD. THE COMPANY WILL NOT PROVIDE INDEMNITY UNDER SECTION I OF THE POLICY IF THE MOTOR VEHICLE IS REPAIRED ELSEWHERE.

PRIVATE HIRE SERVICE (USE FOR HIRE & REWARD) - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE ONLY.

FOR SOCIAL, DOMESTIC & LEISURE PURPOSES ONLY - GEOGRAPHICAL AREA: WITHIN THE REPUBLIC OF SINGAPORE AND WEST MALAYSIA

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).



ST RENT & DRIVE PTE LTD

Reg No. 201615374C

(billing address) 210 Turf Club Road. The Grandstand Car Mall. Lot A12/A27. Singapore 287 995 (showroom) 210 Turf Club Road. The Grandstand Car Mall. Lot B66. Singapore 287 995

Contract No.:

NAME: HAN WAI HENG

NRIC No.: S6992023F

Address: APT BLK MARSILING DRIVE #07-74

SINGAPORE 730006

DOB: 19/12/1969 52 Age:

Driving Experience: 30 Years Gujek

Contact No.: +65 84841149 (87886769) Keeng Next-of-kin Contact No.: 8 2>>4814 (Browner)

Email: hanbouherg laky Egmail egh

**Remark : Hirer agreed to allow this rental company to keep a photocopy of his NRIC and driving License

Vehicle Details

Make & Model: TOYOTA COROLLA SPORTS	Vehicle Reg No.: SNE8115H
Commencing Start Date/Time: 13 APR 2022	Commencing End Date/Time: 13 APR 2023
Rental Price: \$69 day	Collision Damage Waiver: \$5 Deposit: \$500 /

CONTRACT DURATION: 1 YEAR CONTRACT

*** Things to take note

*It is the customer's responsibility to inspect the vehicle upon collection. He/she should take photographs of any existing scratches and dents and WhatsApp them within 30 minutes after the collection of the vehicle. Repair charges will be imposed if the customer fail to do so when the vehicle is being returned.

*Insurance Excess amount must be paid in full before the customer is able to do an accident report.

1st Party Excess: \$500	3rd Party Excess: \$500	Collision with Foreign Vehicles
		Excess \$5000

- *No additional charge for usage in Malaysia (towing is not covered in Malaysia).
- *Deposit will be forfeited if the hirer decided to Early Termination of the contract.
- *Cost of \$100 will be charged if the PH Decal is being defaced or damaged.

*Smoking is prohibited in the vehicle. Cost of \$300 will be charged if the car is returned with cigarette smoke smell and ashes.

Name/Signature of Customer

Name/Signature of Authorized Person