SC1R249J0004-01 / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 19/09/2024 16:34 (SGT) SUBMITTED BY: Abd Hakim B Abd Hamid VERSION: 2 (20/09/2024 09:32 (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.

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 First Submission 19/09/2024 16:34 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 18/09/2024 12:20 (SGT) Exact Location of Accident Singapore 10 ADMIRALTY ST NORTHSHORE LINK BUILDING Additional Location Information LOADING/UNLOADING BAY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number **SLB3833R**

Manufacturer

INSURED/POLICYHOLDER

Is company? Nο Name Of Registered Owner **TENG PARTICIA** NRIC No SXXXX399A Email Address PATRICIA_TENG@POLYGUIP.COM.SG Mobile Phone No (Phone) +65-97393383 Alternative Phone No

VEHICLE PARTICULARS

Model	Corolla
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 car
Transmission	Auto
CC	1500
Vehicle Fuel	_
First Regisration Date	_
Chassis no	_
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited Policy Number / Cover Note Number V5014318

Name of Driver NRIC No Date Of Birth Occupation Driving Pass Date Driving License Pass Class Driving License Validity 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	TENG PARTICIA SXXXX399A 31/10/1968 Indoor 08/01/2007 3 Valid 17 YEARS AND 8 MONTHS Female (Phone) +65-97393383 - PATRICIA_TENG@POLYGUIP.COM.SG 92 HILLVIEW AVENUE #01-02 - 669592 Yes - No
Insurance Company of Other Vehicle Owned by Driver	- -
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked 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	
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHMENT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes FILE TOO BIG. VIDEO WITH OWNER

Vehicle Registration Number	YN4186B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyhelder and/or the Actual Driver.
- 3. Information provided must be as highful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy fiability.
- 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 indigenent 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 envelopesimal.
- (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' lawyersdaw 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 have firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

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

CACIO LI JUNEO DE LA CONTRACTOR DE LA CO BINGAPORE 579701

Sketch Plan

1	Add. Part at 10 Admiratty St
74	Jold: Park at 10 Admiralty St #13-44 Northlink Blog
	Lorny with Cartin Boxes
	Lorny with Cartin Boxes Park beeidle my vehicle & Cartin Box Drop Into m
	& Carton box Drop into m
1	Will - (OLB3833R)

I/We deglard the foregoing particulars are true in every respect.

Policyholder's Signature (if driver is not the policyholder):

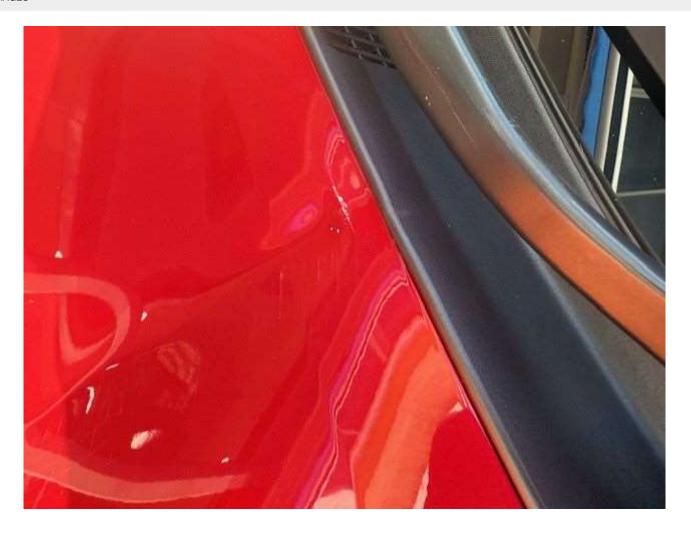
Wilessed by Reporting Centre Personnel (Name as in NRIC/ID card)

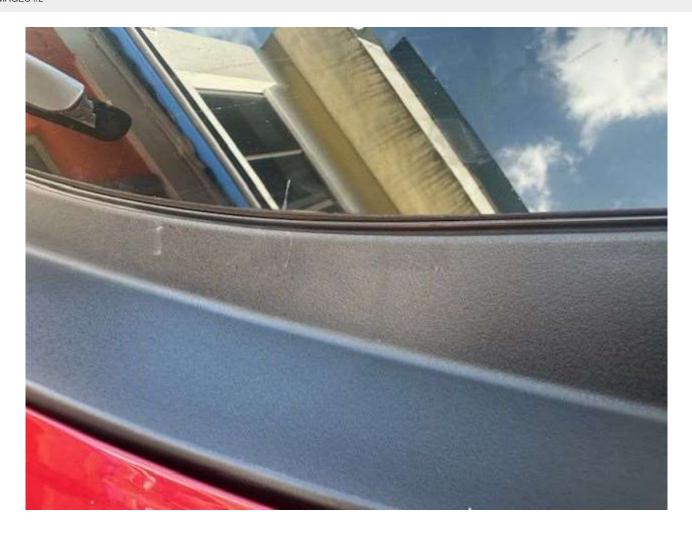
205 BRADDELL ROAD SINGAPORE 578701

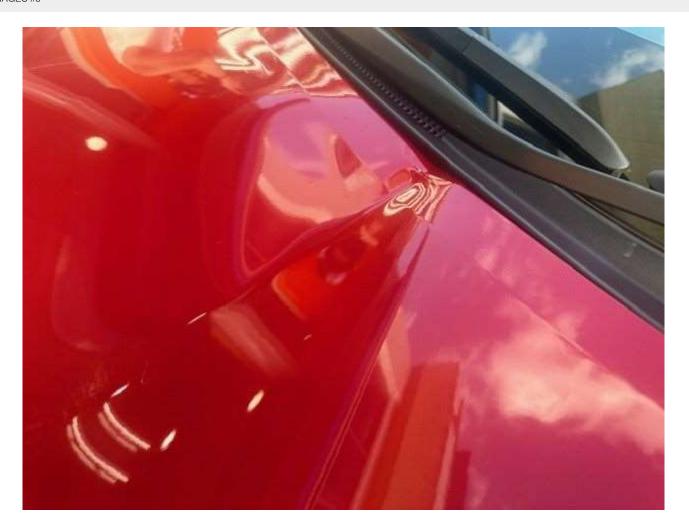
2

yJun2022

Particially 15-41 pm)



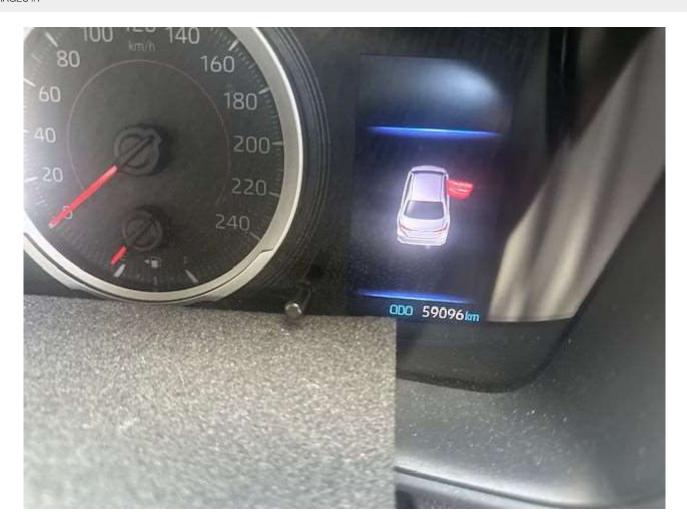




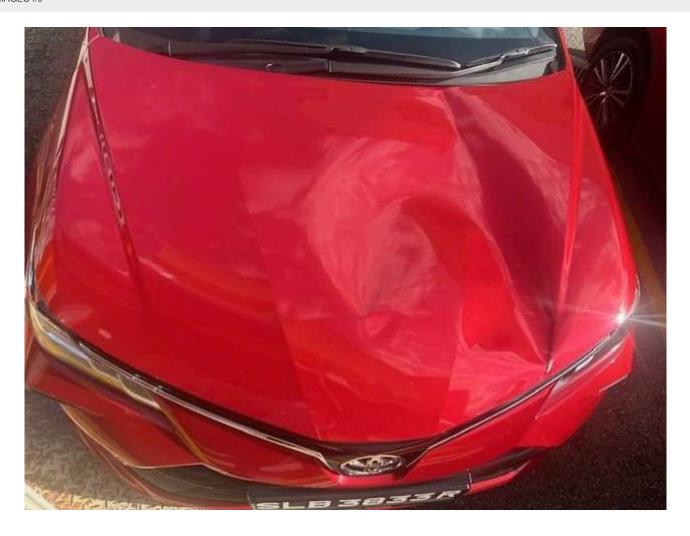




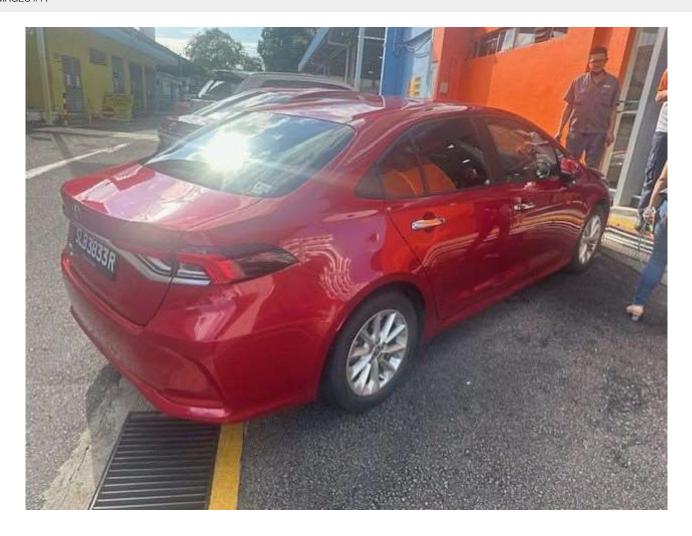








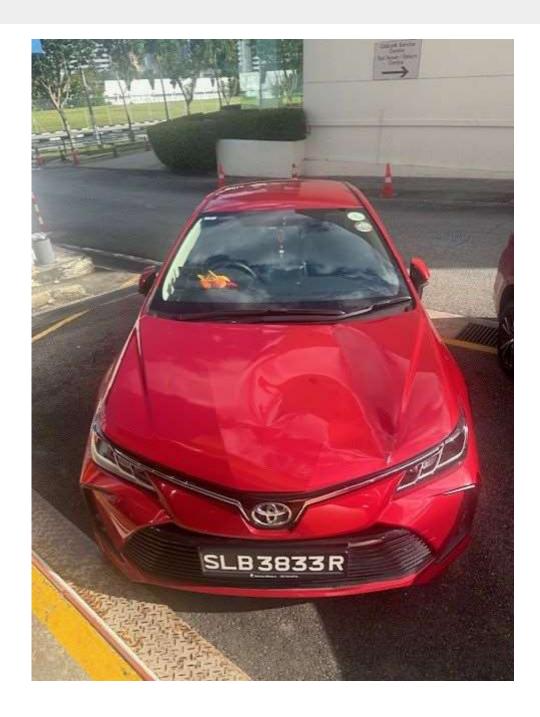


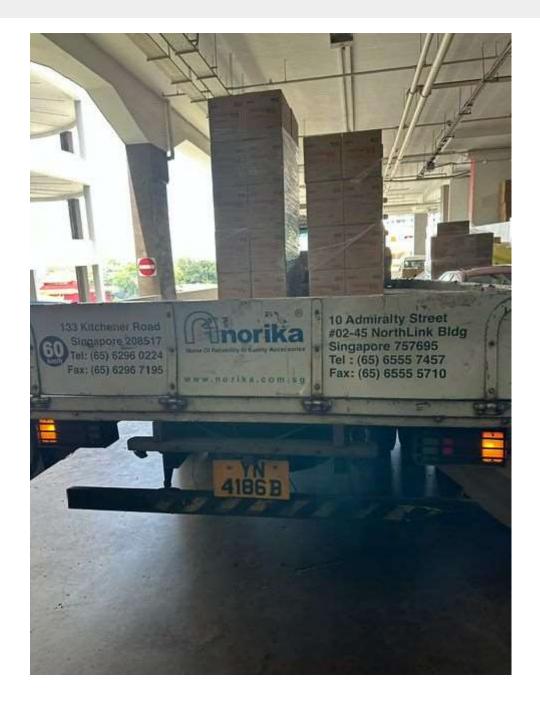








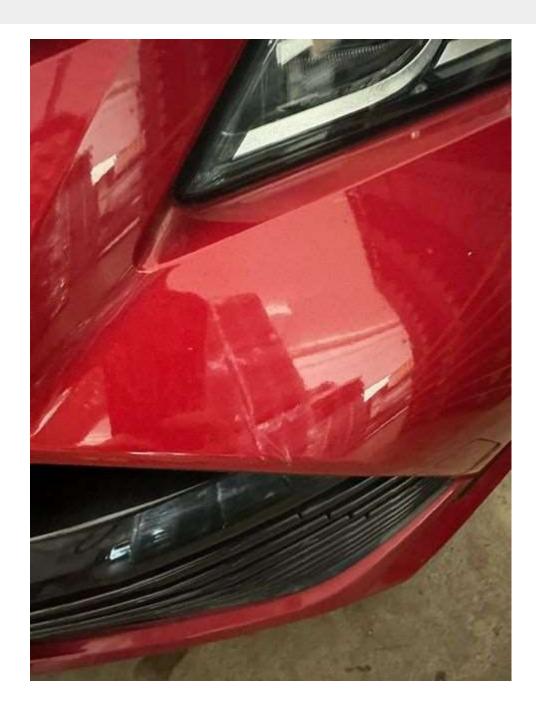


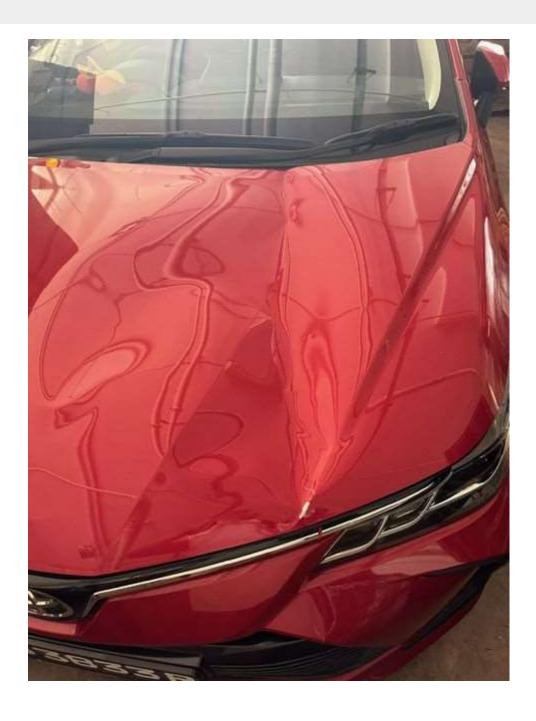


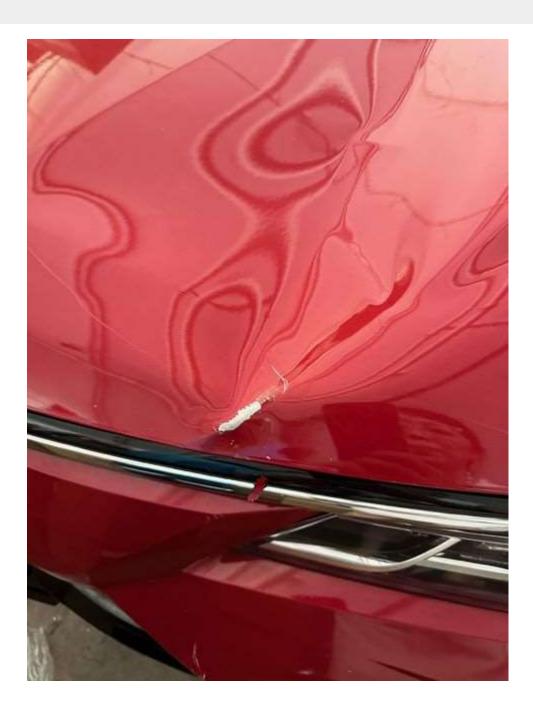






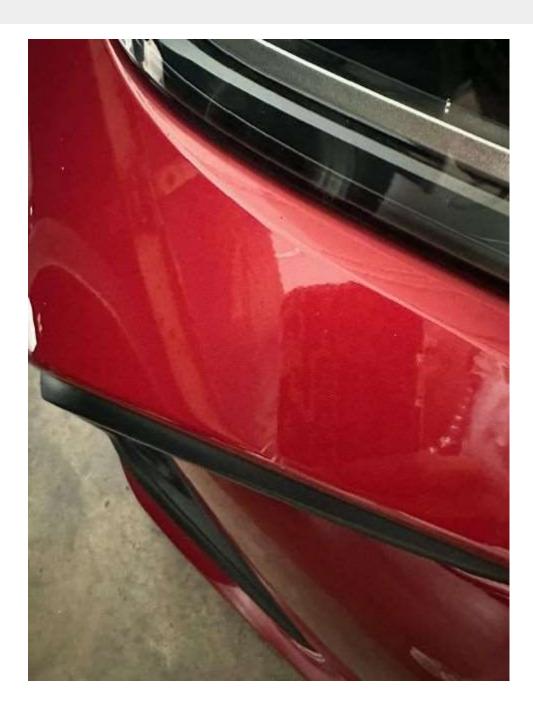


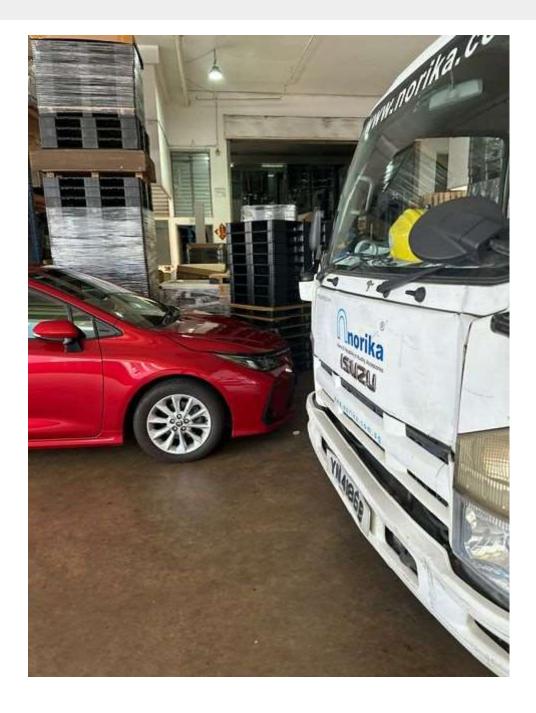














IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with

	whom you submitted the Original Report.
	ADDENDUM
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No: SCIR 249 3 0004 Vehicle Registration No: SUB 3833 R
	Name (as shown in NAIC): Particla: Teny NRIC/FIN/Passport No: 56843399A
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
	Address: 92 Hillinew Ave \$101-02 Singapore (6695-92
	Contact (Tel): Mobile No.: 9739 3383
	Email Address: Der & Cra. teng Quolygnip. com. sg
	Date of Accident: 1899 24 Time of Accident: 12.20pm
	Place of Accident: 10 Admiralty 81 - 403-44 Northwine 8724 575769
	Insurance Company:
(8)	ADDITIONAL INFORMATION /AMENDMENTS:
	I have made a report on the above-mentioned accident and would like to include additional information or
	make the following amendments:
	Amendments: Add in 3rd party Car Number
	∧
	(Jr

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.: Date:



CERTIFICATE OF INSURANCE

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:

Motor Volticles (Third-Party Flisks and Compensation) Act (Chapter 189). Motor Vehicles (Third-Party Flisks and Compensation) Rules, 1960.

Road Transport Act, 1987 (of Malaysia)

The Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaya)

Road Transport (Amendment) Act 2019 (of Malaysia)

Policy Number

V5014318

Policyholder

TENG PARTICIA

Period of Insurance

18/05/2024 (0000HRS) to 17/05/2025

Product Name

Drive And Save Plus

Type of Cover

Comprehensive Any Workshop

Vehicle Registration Number

SLB3833FI

Vehicle Make & Model

TOYOTA - COROLLA ALTIS

Chassis Number

MR2BE3BE600014766

Hire Purchase

Not Applicable

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *

- (a) The Policyholder only.
- (b) Any other person who is driving on the Policyholder's order or with his/her permission.
- (c) in the event of the death of the Policyholder;
 - Any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive had not been withdrawn prior to the death of the Policyholder.
 - ii. Any other person who has been given permission to drive the vehicle prior to the death & such permission had not been withdrawn by the Policyholder.
- Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle of 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.

LIMITATIONS AS TO USE

Use for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any other trade or business or 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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Kitar Hock Seng Group CEO

Great Ecoborn General insurance 1 mates 3A wholly-invited subschary of Great Eastern Happings (Lentindy) 1 Michening Street, 901-01 Circum Eastern Centro, Englisher GridGSV) Common Registers from 1020.00000W [T. +65-62-8

330 LKN

Page 1 of 3