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 23/09/2024 11:08 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 22/09/2024 16:50 (SGT) Exact Location of Accident Singapore Additional Location Information AFTER ADAM PARK, TOWARDS LORNIE ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMR2815D

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner LEE XIANG WEI, ALEX

VEHICLE PARTICULARS

Manufacturer Porsche Model Cayenne Variant Vehicle Category Private car Transmission Auto 2967

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00034822400

DRIVER

Name of Driver LEE XIANG WEI, ALEX NRIC No SXXXX3557 Address 551 ANG MO KIO AVE 10 #23-2222 Address complement

Postcode 560551 Does Driver Own Other Vehicles?

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collision - Head to Rear Weather Conditions Clear OTHER INFORMATION Was any foreign vehicle involved in the accident? No Was anybody injured in the Accident? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMA5290L Vehicle Manufacturer Kia Vehicle Model Carens Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver **RAVINDER SINGH JOGJEE**

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 Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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' law yers/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' 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
- (a) 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.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre

Sketch Plan

Describe Circumstances of the Accident	
was driving along lornie road, just after a where I witnessed the vehicle two cars in the jammed breaking to exit on the left. Its a result the car introvat of me & (IMAS) Wreak too, and so do I my delayed real me withing the rear of his car (IMAS)	adam park.
where I witnessed the vehicle two cars in the	nt of me
jammed breaking to exit on the left.	
As a result, the far introval of me & (JMAS)	190L) Janned
break too, and so do I my delayed rea	iction resulted in
The hitting the rear of his coir (JMAS	290L)
Declaration	
We declare the foregoing particulars are true in every respect.	1
and the agency and the mount of the property	2 Mil
1 23 9	
XI	15/4/5/

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

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre Personnel



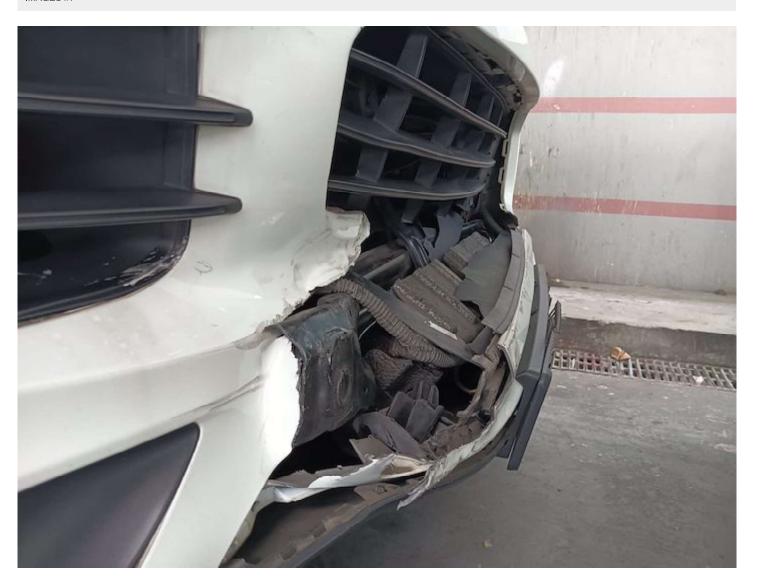












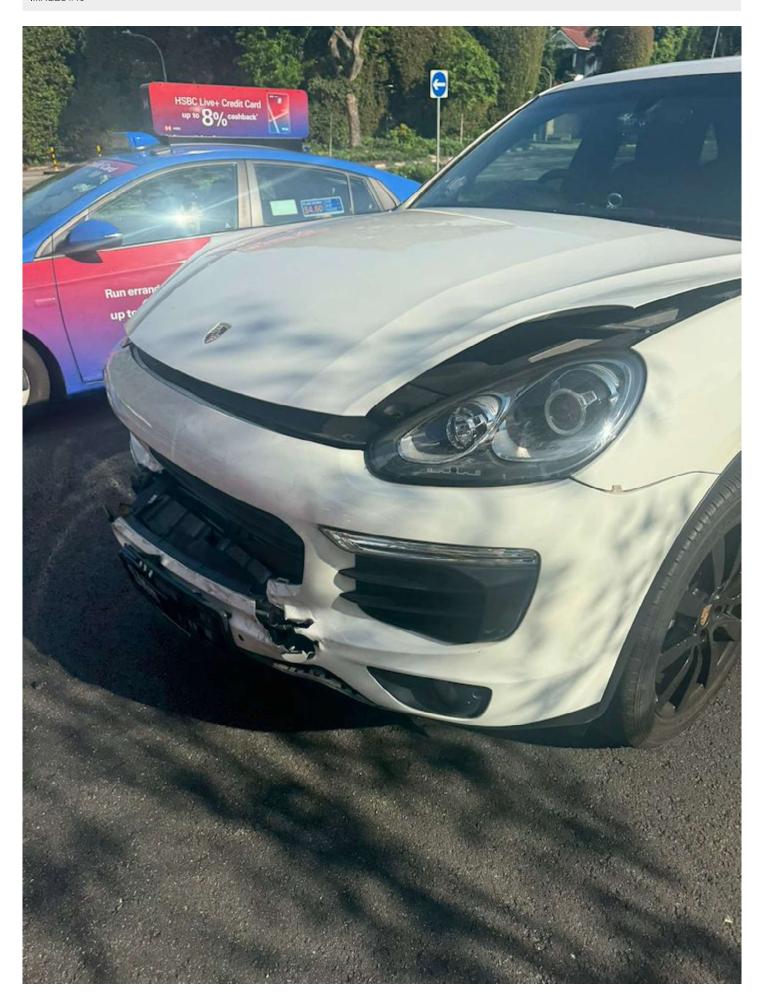


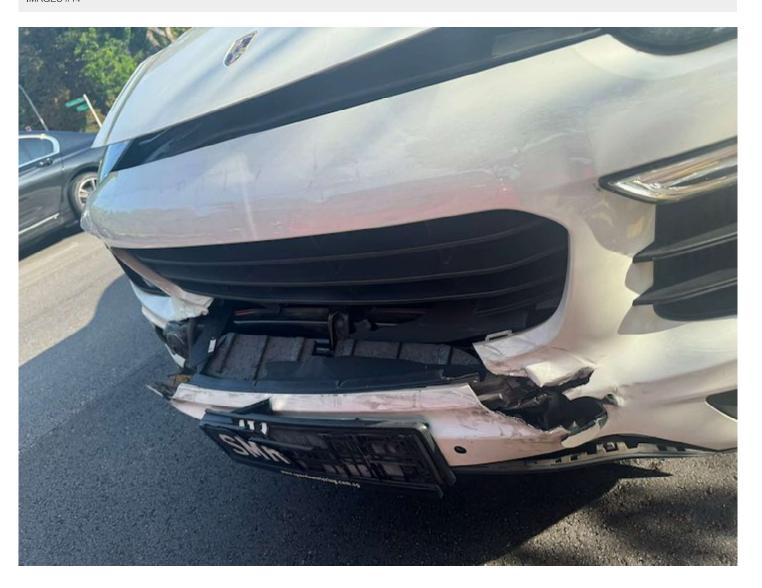




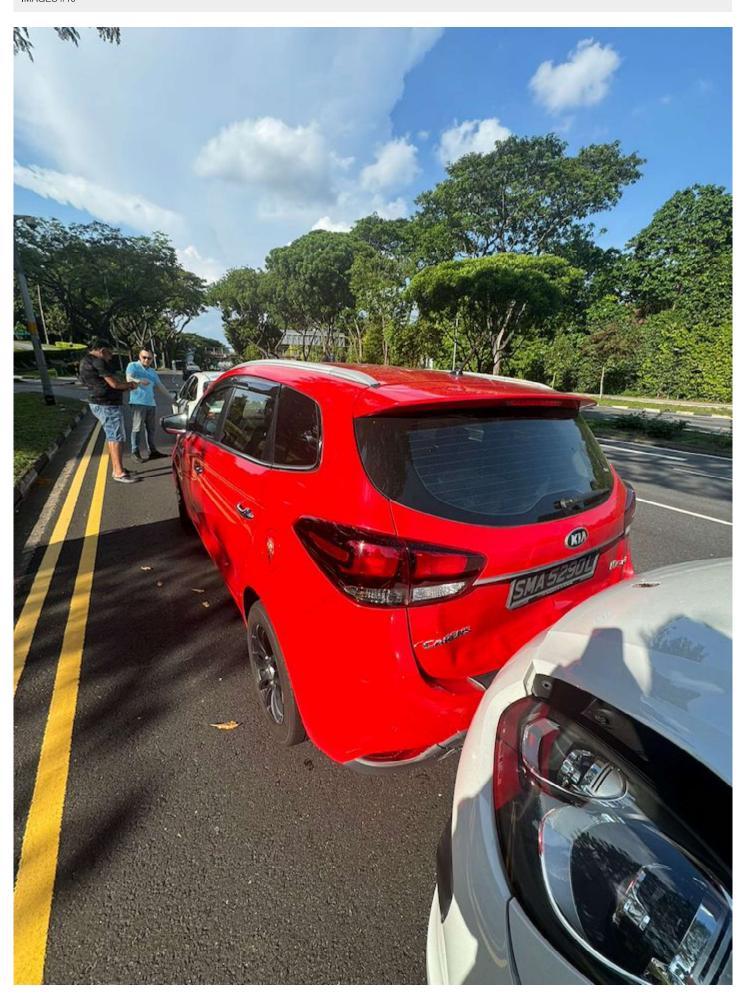


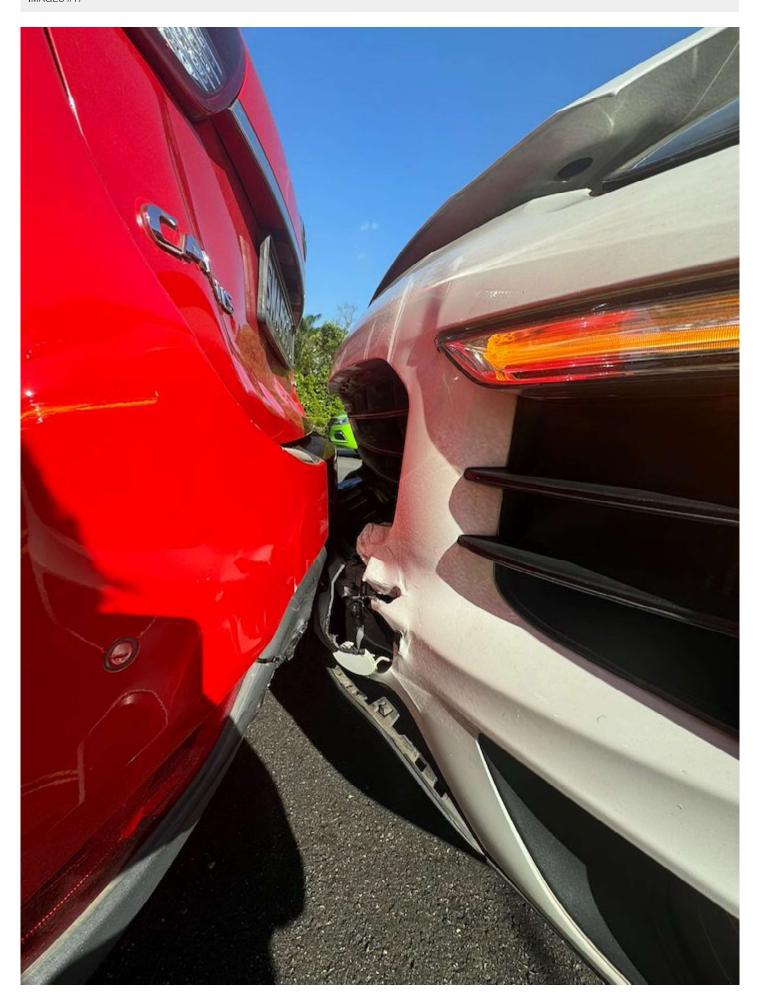


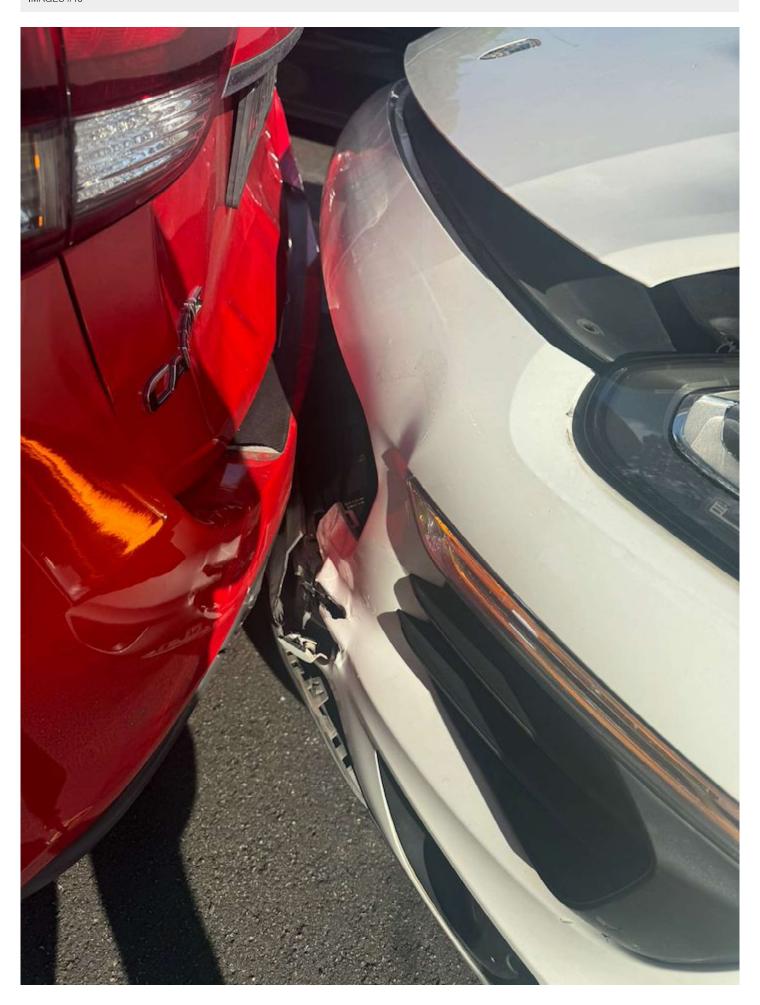


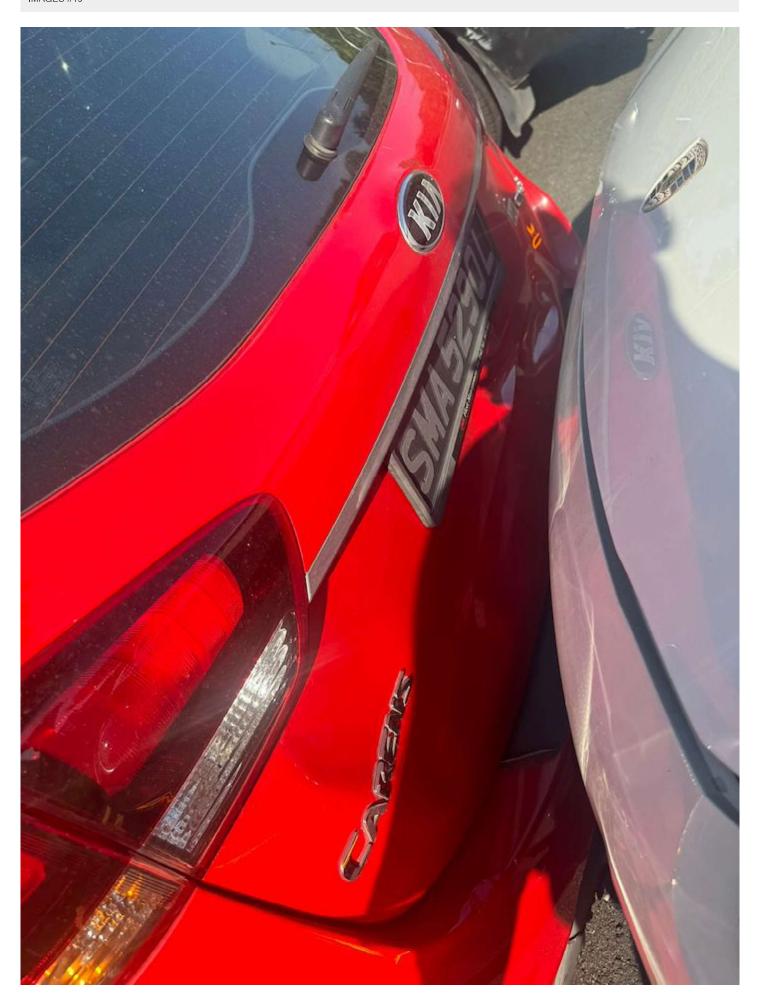


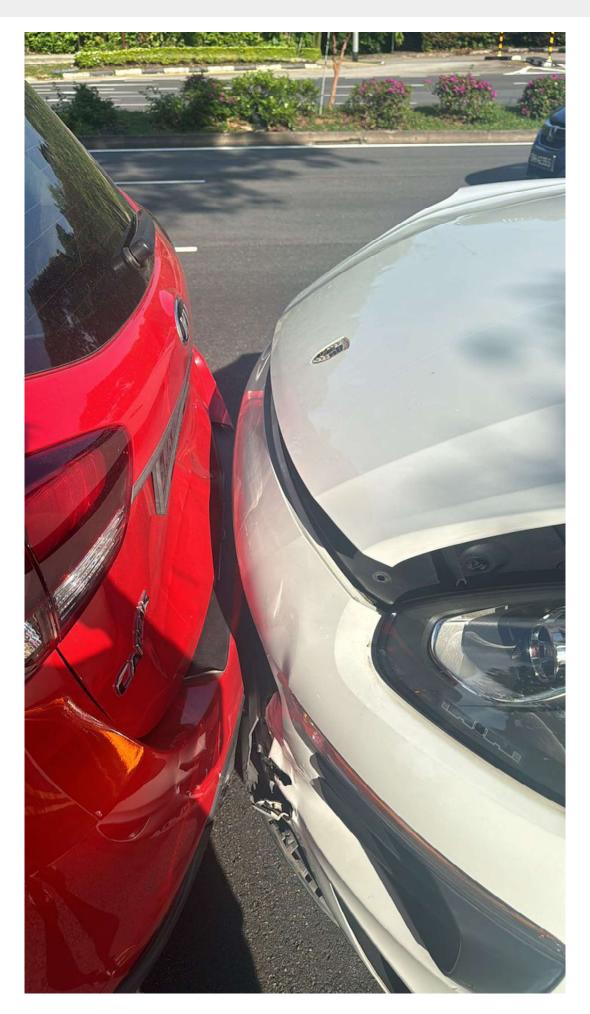














中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

CERTIFICATE OF INSURANCE Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1965 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks), Rules, 1959 (Malaysia) MX1F N

Cov. Type:C

CERTIFICATE No.

DMPCSNW00034822400

Engine No.: 34436

Cha. No.:WP1ZZZ92ZGKA46136

Index Mark and Registration Number of Vehicle

SMR2815D

2. Name of Policy Holder

LEE XIANG WEI, ALEX

Named Drivers Ex Sect. I

\$\$2,500.00

Effective date of the Commencement of 26/03/2024 Insurance for the purposes of the Regulations. (17:53:31) Ordinance or Enactment

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 Ex Sect. 1 - Age >= 26

\$\$3,000.00 \$\$500.00

4. Date of Expiry of Insurance

25/03/2025

* Age as at date of accident EX ON WINDSCREEN .

Persons or Classes of Persons entitled to drive*

(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his permission.

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 or 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 social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft)

Catalogs Visional and State of the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: MAYBANK SINGAPORE LIMITED

*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 provisions of the Motor Vehicles (Thin Road Transport Act, 1987 (Malaysia).

Q6389 6111

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Issued By: HUANG GUOQING TERRY Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 📦 3 Anson Road #16-00 Springleaf Tower Singapore 079909

6222 1033

www.sg.cntaiping.com