SK0N246L000G / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 21/06/2024 17:56 (SGT) SUBMITTED BY: LIM TS'UNG MARC VERSION: 1 (21/06/2024 17:56 (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

Reported by

Actual Driver

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

21/06/2024 17:56 (SGT)

Actual Driver

21/06/2024 00:50 (SGT)

Singapore

Junction of Tampines Avenue 9 and 10 towards Bedok

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNM2128T

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CARHUB LEASING PTE. LTD.
Company Reg No 201842930G
Email Address autohub325@gmail.com
Mobile Phone No (Phone) +65-92729299
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mazda

Model MAZDA3 4DR 1.5 AT M-HYBRID CLASSIC I2

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 - Claiming third party

Vehicle Category Private hire

Transmission Auto

CC 1496

INSURANCE COMPANY

Name of Insurance CompanyIncome Insurance LimitedPolicy Number / Cover Note Number5108657811-05-000059

DRIVER

Name of DriverAbdullah Bin Hassan BaghribNRIC NoS8935136GDate Of Birth13/10/1989

Driving Pass Date Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	14/12/2019 4 YEARS AND 6 MONTHS Male (Phone) +65-88940434 - autohub325@gmail.com 872B Tampines Street 86 #03-69 S522872 - No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Wet
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 attached	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SMZ435M - -

Contact Number

Vehicle Variant Vehicle Colour

Vehicle Category Name of Driver

Private car

Address		 	 	
Address complement		 	 	
Postcode		 	 	<u>-</u>
Insurance Company Name		 	 	
Nature Of Damage				
Details of property damaged in	n accident	 	 	
No. Of Passenger (Including D	river)	 	 	

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.
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- 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.
- 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 pennitted 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 (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 Augustian (s) 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;

201842930G

- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me,
- (iv) administering my claims (including the making 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").

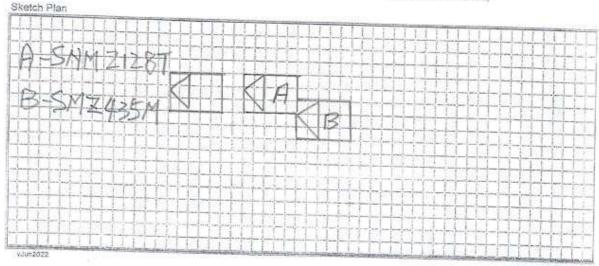
21/6/2024 1700lus.

- (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 and on the standard 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)



Describe Circumstance of the Accident At the junction of Trapper Avenue 9 & 10
I was assisting my relative to jump start his volvete
5526343R. We were stopped in the 2nd line of
a 4 lane carriagemay with hazard lights on
when . SMZ435M collided into the near of my
rehich.
Declaration

I/We declare the foregoint STNG are true in every respect.

21/6/2024 Policyholder's Signature 7 Date & Time

Actual Driver's Signature (if graver is not the policyholder)

/ Date & Time

/ Date & Time

/ Date & Time



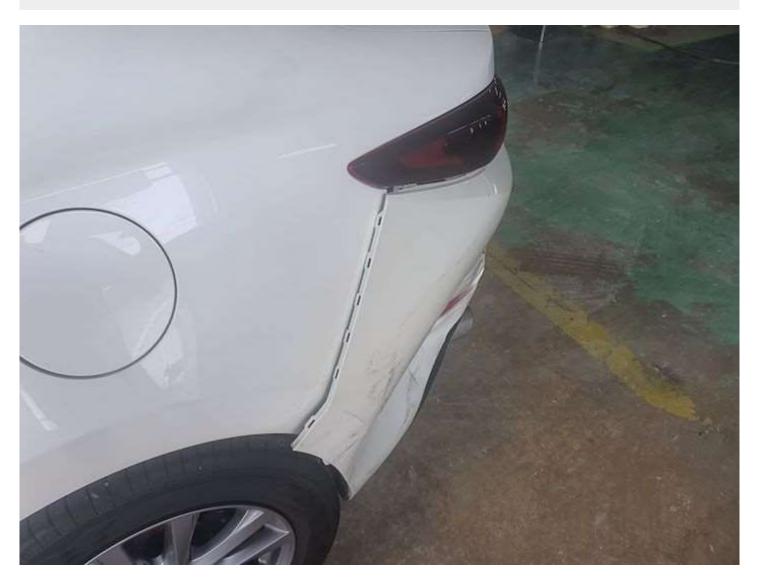








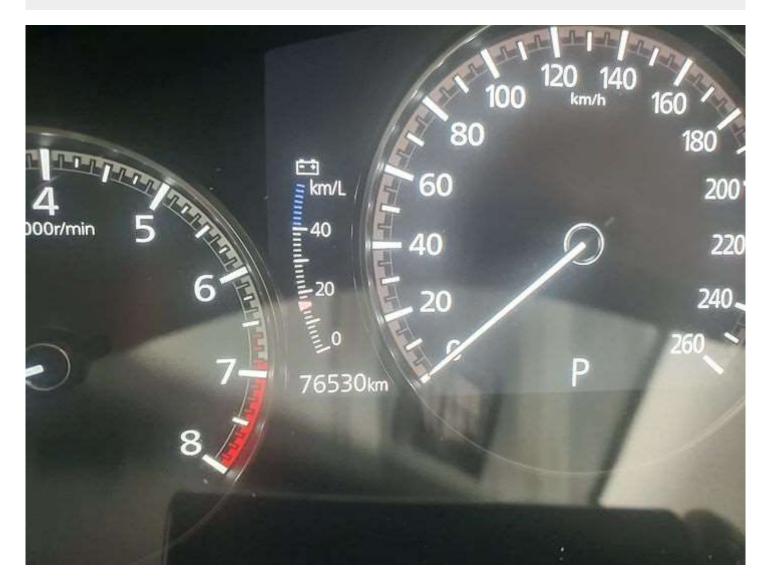


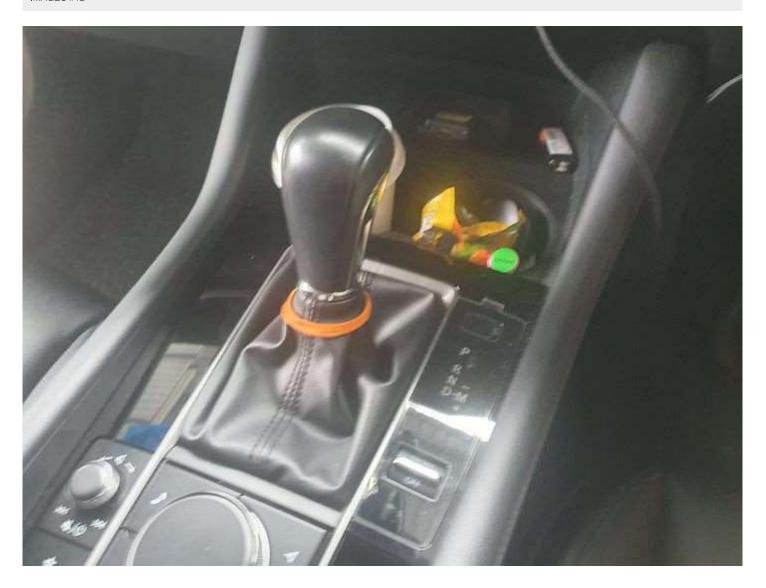
















Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5108657811-05-000059

: SNM2128T

1. Index mark and Registration Number of Vehicle

Chassis Number

: JM68P2SAAP1153540 : CARHUB LEASING PTE LTD

Cover : drivo CLASSIC

2. Name of Policyholder 3. Effective Date of Insurance

: 03 Apr 2024

4. Expiry Date of Insurance

: 02 Apr 2025

5. 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/her 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 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: \$\$2,000
17 4 T T T T T T T T T T T T T T T T T T	
EXCESS (SECTION 2)	: \$\$1,500
WINDSCREEN EXCESS	: \$\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: THINK ONE C

THINK ONE CREDIT PTE LTD

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

Agency

: TONG HIN INSURANCE AGENCY PTE. LTD. (00000614661)

Date of Issue : 28 Mar 2024 09:16 hrs

For INCOME INSURANCE LIMITED

Chief Executive