VEHICLE NO: SML 130R	MAKE & MODEL: Honda Shuttle AUTO/MANUAL
DATE OF ACCIDENT	11 / 10 / 2024 C.C.1-5
TIME OF ACCIDENT	08.10 AM / PO
LOCATION OF ACCIDENT	Eungs Ave 5
EXACT PURPOSE USED AT TIME OF ACCIDENT	EMPLOYMENT / PRIVATE USE / PRIVATE HIRE
	Wu Yiliang, Ogniel
NAME OF OWNER	OFFICE: MOBILE: 9756 6795
EMAIL NATUKAANKA OLVOTWAII. COM	
NRC	OD / THIR PARTY / REPORTING ONLY
CLAIM TYPE	YES / NO?
FLEET POLICY	
INCURENCE CO.	Ching Taiping
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Thefi
POLICY NO.	PHHCSNH00004572400
NAME OF DRIVER	AS ADOVE / IF NO:
NRIC	
DATE OF BIRTH	23 / 02 /1988
ANY PASSENGER	Y/3/NO: 2
NAME OF PASSENGER	IM IF
GENDER OF PASSENGER	MALE / FEMALE
	Out Goor / Indoor
OCCUPATION PAGE 14 SC	04 / 08 / 2016
DATE OF DRIVING PASS	MOE / FEWALE
GENDER	Mobile: Office: - Home;
CONTACT NO.	narukdanka O hotmail. com
EMAIL	BIK478c YiShun Street 44 #13-175 1(763478)
ADDRESS	NO / If yes, Reg No: INSURE:
DOES DRIVER OWN OTHER VEHICLES?	Employee / If No: OWNLY
RELATIONSHIP	Clar / Raining / Other:
WEATHER CONDITION ROAD SURFACE	DO / Wet / Other:
ANY INJURIES	No / Il yes, Tylio? Nu Yiliang, Daniel
CONTACT NO.	97566795
	No / If xos, Where? Online
ROLICE REPORT MOTICE OF INTENDED PROSECUTION?	No / If yes, Who?
	SHF49J Any Passenger:
VEHICLE B NO. NAME	JAPTYJ
CONTACT NO.	
VEHICLE CNO.	Any Passenger:
VEHICLE D'NO.	Any Passenger:
	Any Passenger:
VEHICLE ENO.	Any Passenger:
VEHICLE PNO.	Will Leasenger.
ANY WITNESS	
WITNESS CONTACT NO.	YH / NO
WAS THERE ANY VIDEO CAPTURE?	YES / ID
WAS THERE ANY AUDIO RECORDED?	NA VAO
SCENE ACCIDENT PHOTOS TAKEN?	A second
WHO IS REPORTING	DRIVER/OWNER/BOTH
Original Language Used	English/Mararin/Others:
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / 10

SKETCH PLAN

PORTANT NOTICE

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 writful 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 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.

Consent under the Personal Data Protection Act (PDPA)

understand, acknowledge, agree and consent that:

i) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are parmitted to collect, use, disclose notici process my personal data/personal information set out in this (form) and any other personal information provided by me or obsessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal information to all insurer(s) the have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be obligately referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant overment agency/authority (such as the police), for the purpose(s) of:

processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to eclaims:

-) investigating the accident and/or my claims;
- carrying out and/or dealing with my instructions or responding to any enquiries by me;
- r) administering my claims (including the mailing of correspondence, statements, invoices, raports or notices to me, which could involve schours of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail
-) complying with applicable law in administering, processing, handling and/or dealing with my claims
- policitively the 'Purposes")
-) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lavvyers/law firms, may/are permitted to collect, se, disclose and/or process my Personal Information for one or more of the above Purposes; and
-) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents reluding their lawyers/law ritins), which may be sited outside of Singapore, for one or more of the above Purposes.

cylipidar's Signature / Date & Time

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

Visitessed by Reporting Centre Personnel (Name as in INRICAD card)

Etch Plan

A. SHL-130R

B. SHL-49J

A. SHL-49J

A. SHL-49J

A. SHL-49J

A. SHL-49J

3
cribe Circumstance of the Accident
nagori
0 /10 /
Refer to Police Report
0 0 × 0 × 0 × 0 × 0 × 0 × 0 × 0 × 0 × 0
No.

Declaration

IMVs deciare the (cregoing particulars are true in every respect

Percyhulders Signature / Date & Time

120 m

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

Wilnessed by Reporting Centre Personnal





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20241012/7027

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/10/2024 12:25			Vide Report No.;	Station Diary No.:		
Informant's F	Particulars					
Name of Informant: WU YILIANG, DANIEL			Address:			
ID Type / ID No.: NRIC NO / 3290J			Contact No.: Home/Office: Mobile:			
Nationality: SINGAPORI	E CITIZEN		Email: NARUKDANKA@HOTMAIL.COM	1		
Sex: Male	Age:	Date of Birth:	Type of Informant: Driver			
Race: Chinese		-10	Language: English			
Occupation: Private Hire Driver			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:		

Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident 11/10/2024 20:10	t: Type of Location: X-Junction	
Location:						
EUNOS AVENUE	5					
Weather:			Surface:			
Clear		Dry				
Traffic Flow:		Traffic Control: Traffic Light - Working			Traffic Volume: Light	
			_			

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHF49J	Motor car				Slightly Damaged	0
SML130R	Motor car	HONDA	SHUTTLE 1.5G CVT	White	Seriously Damaged	2

Details of Veh	nicle Insurance		THE THE STATE OF	
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SML130R	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW00004572 400	30/04/2024	30/04/2025





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20241012/7027

CONTINUATION OF REPORT

Details of Person	Involved	da video.				
Any Pedestrian In	volved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver		The second				
Name	WU YILIANG, DANIEL		ID No.			
Related Vehicle	SML130R (Motor car)			Contac	ct No.	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Disch	harge NIL			
No. of Days grante	ed Medical Leave (MC)	Degree of Injury Sligh		Slight		

Brief Details.

On the stated date and time, i was driving my vehicle (SML130R) along Eunos Avenue 5. I was stationary while waiting for the traffic light to turn green. Suddenly, i felt an huge impact from my rear portion of my vehicle. Vehicle B (SHF49J) couldn't stop in time and collided onto my vehicle.

I sustained injuries from the above mentioned accident and was given 3 day of MC.



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

NP168



3 of 3

Report No. T/20241012/7027

CONTINUATION OF REPORT

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: 12/10/2024 12:25
Officer In Charge Of Case: TP / AEIT / CHUA SOON KEONG Contact No.: 65476030	Classification Of Case:



Motor Hire Car

MZ406L/B

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)

AN0420A

Cov. Type:C

SN

CERTIFICATE No.

DMHCSNW00004572400

Engine No.: L15B6002174 Cha. No.:GK82001829

Index Mark and Registration Number of Vehicle

SML130R

AUTOSAFE

2. Name of Policy Holder

WU YILIANG DANIEL

Excess Sect I.

\$\$1,250.00

3... Effective date of the Commencement of

Insurance for the purposes of the Regulations, (00:00:00)

Excess Sect. I (Outside Singapore)

S\$2,500.00 5\$1,250.00

Ordinance or Enactment Date of Expiry of Insurance

29/04/2025

Excess Sect. II Excess Sect.II (Outside Singapore). S\$2,500.00

EX ON WINDSCREEN .

S\$100,00

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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

WU YILIANG DANIEL

- 6. Limitations as to use:*

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

(1) Use for racing, pace-making, reliability trial or speed-testing.
(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: GB HELIOS PTE. LTD.

*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 Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

Issued By: INXPRESS INSURANCE AGENCY PTE LTD

Authorised Officer

6222 1033

www.sg.cntaiping.com

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

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