

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 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. 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 | 27/11/2024 13:19 (SGT) |
| Reported by | Actual Driver |
| Date of Accident | 27/11/2024 08:00 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | BATTERY ROAD BEFORE FULLERTON HOTEL ENTRANCE |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------------|----------|
| Vehicle Registration Number | SKZ1476L |
|-----------------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------------|------------------------|
| Is company? | Yes |
| Name Of Registered Owner | LIM CHEE BOON SERVICES |
| Company Reg No | 53330297L |
| Email Address | ANDREW LIM@LIVE.COM.SG |
| Mobile Phone No | (Phone) +65-96327654 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|------------------------|
| Manufacturer | Renault |
| Model | Fluence |
| 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? | Yes |
| Vehicle Category | Private hire |
| Transmission | Auto |
| CC | 1500 |
| Vehicle Fuel | Diesel |
| First Registration Date | 12/01/2016 |
| Chassis no | VF1LZLF0E53997627 |
| Effective Date/Time of Ownership | 12/01/2016 00:00 (SGT) |

INSURANCE COMPANY

| | |
|---|----------------|
| Name of Insurance Company | ECICS Limited |
| Policy Number / Cover Note Number | MPC24B00087601 |

DRIVER

| | |
|--|------------------------------------|
| Name of Driver | LIM CHEE BOON |
| NRIC No | S7322003C |
| Date Of Birth | 21/06/1973 |
| Occupation | Outdoor |
| Driving Pass Date | 12/09/1992 |
| Driving License Pass Class | 3 |
| Driving License Validity | Valid |
| Driving experience | 32 YEARS AND 2 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96327654 |
| Alt. Phone Number | - |
| Email Address | ANDREW LIM@LIVE.COM.SG |
| Address | BLK 165A TECK WHY CRESCENT #11-311 |
| Address complement | - |
| Postcode | 681165 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Employee |
| 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 | Chain Collision |
| Weather Conditions | Clear |
| Road Surface | Wet |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 3 |
| Was anybody injured in the Accident? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| Was any other vehicle or property damaged? | Yes |
| 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? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN 2.

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | Yes |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------------|----------|
| Vehicle Registration Number | SJG1505Z |
| Vehicle Manufacturer | - |

| | |
|---|-----------------------|
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | PIETER LUIT DE RIDDER |
| NRIC No | S2750721B |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | - |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|---|--------------------|
| Vehicle Registration Number | SKQ984R |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | YAP CHEAH JIN RYAN |
| NRIC No | S9622260B |
| 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**

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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 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' 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.

LIM CHEE BOON
SERVICES

LIM CHEE BOON
SERVICES



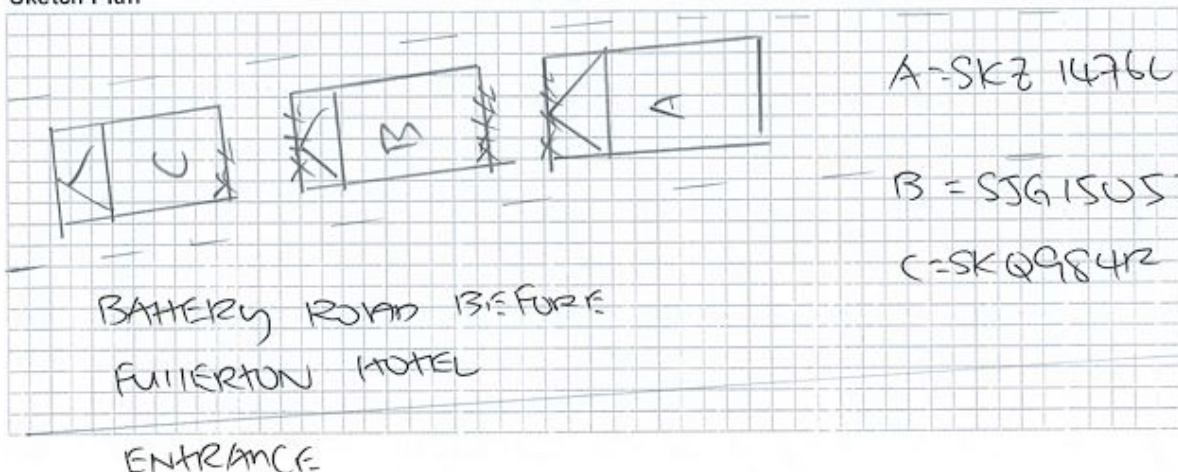
X

Policyholder's Signature / Date & Time

X

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

On THE ABOVE MENTION DATE AND TIME. I WAS
 NEGOTIATING A BEND ALONG BAKERY ROAD BEFORE
 FULLERTON HOTEL ENTRANCE. WHEN I SAW VEHICLE B
 IN FRONT OF ME STOPPED, I TRIED TO BRAKE.
 BUT I COULDN'T BRAKE AND COLLIDED ONTO
 VEHICLE B REAR VEHICLE B PUSH FORWARD TO
 HIT ONTO VEHICLE C IN FRONT OF HIM..
 NO ONE WAS INJURED.

Note: Please note that your insurer may have 14 days Time Frame for you to submit an Own Damage claim under your own comprehensive policy. please check with your policy for more information.

Declaration

We declare the foregoing particulars are true in every respect.

LIM CHEE BOON SERVICES

LIM CHEE BOON SERVICES

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

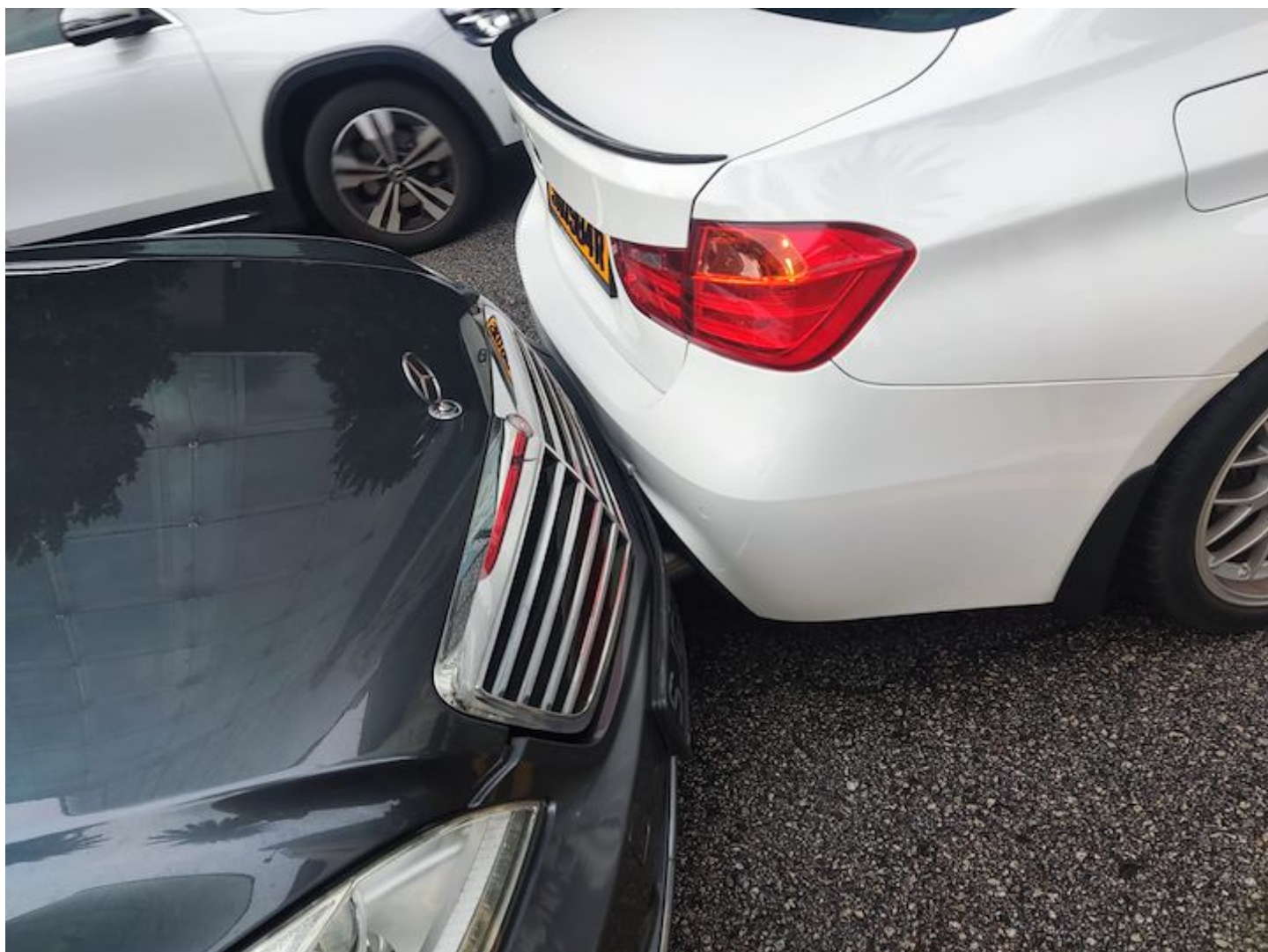




























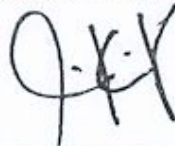


CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks 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)

**AUTHORISED
WORKSHOPS**

MZ300J
COMPREHENSIVE
ORIGINAL

| | |
|---|--|
| CERTIFICATE NO: MPC24B00087601 Agency Name: ASSURE (SINGAPORE) PTE. LTD. Agency Code: B0000888 | Chassis No: VF1LZLF0E53997627 Engine No: K9KN837D213891 |
| 1. Index Mark and Registration Number of Vehicle: SKZ1476L | |
| 2. Name of Policyholder: LIM CHEE BOON SERVICES | |
| 3. Period of Insurance (both dates inclusive): 12 July 2024 to 11 July 2025 | |
| 4. Persons or Classes of Persons entitled to drive a) The Policyholder and all Named Drivers declared under the Policy. 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. | |
| 5. Limitations as to use (a) Use for carriage of passengers or goods in connection with the Policyholder's business. (b) Use for social, domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for tuition, driving test, race, 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. | |
| 6. Hire Purchase Company: GOLDBELL FINANCIAL SERVICES PTE LTD | |
| Signed for and on behalf of ECICS Limited  <hr style="width: 200px; margin-left: auto;"/> AUTHORISED SIGNATORY | |

Important Notice:

- i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.
- ii) On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.