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Owner/Drivers (KAMOONY , INC		}
Policy No: (,) Pe	rlod; (Tel:)
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT 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 Authorised 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 ability.
- 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 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

NAME OF THE PARTY	
THE REAL PROPERTY AND ADDRESS OF LABOR.	ACCIDENT STATEMENT
Date Of Report	19/12/2017 15:30
Date Of Accident	18/12/2017 22:00
Exact Location Of Accident	BLK 347A ANG MO KIO AVE 3 (MSCP DECK E LOT 195)
Country/State of Loss	SINGAPORE
And design the last of the second	DETAILS OF OWN VEHICLE
Vehicle Registration Number	EH1998M
Insured/Policyholder	
Name Of Registered Owner	TAN LEONG HOCK SEBASTIAN(CHEN LIANGFU)
NRIC No	S8821862J
Email Address	SBTSEBASTIAN@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-83821998
Alternative Phone No	OTHERS-83821998
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER-1.5 MIVEC GLS 4A/T (A)
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3092991701
Cover Note Number	
Driver	
Name of Driver	TAN LEONG HOCK SEBASTIAN(CHEN LIANGFU)
NRIC No	S8821862J
Date Of Birth	20/06/1988
Occupation	INDOOR
Date Of Driving Pass	13/02/2008
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83821998
Fax Number	
Contact Number	OTHERS-83821998
EMail Address	SBTSEBASTIAN@HOTMAIL.COM

Address

BLK 472 CHOA CHU KANG AVENUE 3

#03-151

Postcode

680472

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Was any body injured in the Accident?

NO NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171219/7011

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

UNKNOWN

Vehicle Make/Model/Colour

DARK BLUE MERCEDES

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 19 DEC 2017

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

SKETCH PLAN MKMOWN CAR WAS PORKNID

	STANCES OF THE ACCIDENT	
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DECLARATION

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

Date & Time: 19 DECI 7.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:





1 of 4 Report No. T/20171219/7011

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2017 12:51		Made:	Vide Report No.:	Station Diary No.	
Informa	nt's Partic	ulars			
	f Informant: ONG HOC	K, SEBASTIAN	Address: APT BLK 472 CHOA CHU SINGAPORE 680472	J KANG AVENUE 3 #03-151	
	/ ID No.: O / S88218	62J	Contact No.: Home/Office:	Mobile: 83821998	
	Nationality: SINGAPORE CITIZEN		Email: SBTSEBASTIAN@HOTMAIL.COM		
Sex: Male	Age: 29	Date of Birth: 20/06/1988	Type of Informant: Driver		
Race: Chinese		*	Language: English	Institution / School Name:	
Occupation: Company director			Driving Licence Information: Class: 2B,3,4,5 Date of Expiry:		

General Infor	mation of the Accider	nt		
Type of Accident:	Non-Injury Drink & Drive	Drink Drive: Yes	Date/Time of Accident: 18/12/2017 22:00	Type of Location: Car Park
Location:				· ·
ANG MO KIO	AVENUE 3			
Multi-Storey (Carpark Deck E. My Ca	r parked at Lot 195.		
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collis Moving Vehic	ion: le Against - Parked Ve	hicle		Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
EH1998M	Car	MITSUBISHI	LANCER 1.5 MIVEC GLS 4A/T			0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
EH1998M	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.	DMPCSN30929917 01	11/02/2017	10/02/2018		





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

2 of 4 Report No. T/20171219/7011

CONTINUATION OF REPORT

Details of Perso	n Involved	To Catholic		100	A	
Any Pedestrian I	nvolved: No					
No. of Pedestrian			Use of Pe	adastria	n Cross	sing: NA
Driver			1030011	edestria	II CIOSS	sing. NA
Name	TAN LEONG HOCK	K, SEBAST	IAN	ID No).	S8821862J
Related Vehicle	EH1998M (Car)			Conta	act No.	83821998
Hospital/Clinic	NIL			Class Drivir Licen Expir	g	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	/	Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o		NIL	

Brief Details.

On the 18th December 2017, I parked my vehicle with the registration plate of EH1998M at the HDB Multi-storey carpark labelled as AMA23 since about 08:30pm.

I was visiting my in-laws residence until 11:30pm same-day, however when I return to my carpark to retrieve my said vehicle, I saw that my car had sustained damage (as per attached photo).

There is no note or any memo left on my car, thus I had retrieved the memory card from my in-car video recorder (as attached) which clearly shown that my car was hit multiple times by the dark blue car (believed to be a Mercedes-Benz as my passenger recalled that the vehicle was parked before myself), the driver then drove off without returning which conclude as a hit-and-run case.

Therefore, I would like to seek the Authority to investigate and retrieved the police camera footage located at the said carpark around 9:30pm to 10:30pm as I hope to identify the dark blue Mercedes-Benz as it is bound to exit from the carpark which the camera is located.

Sincerely hope that the Authority can help retain the footage since yesterday as I hope it is not overwrite.

Greatly appreciated if the Authority can quickly retrieved the evidencing video from the said carpark at the said time and furnish to me with at least the registration plate number of the dark blue Mercedes-Benz for my insurance reporting purpose.

On the side note, I had left a note on the door knot of vehicle SJE3146Z whom also had a video recorder that is actively recording that was parked opposite me earlier than 08:30pm, my note indicated that I would need his or her help to see whether any evidence was recorded in his or her recorder.

Thank you.

*My video that evidenced that my car was hit multiple times by the dark blue car was 36MB. Kindly provide an email address or branch to visit. As I hope this is resolved as soon as possible.



3 of 4

Report No. T/20171219/7011

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

CONTINUATION OF REPORT





4 of 4

Report No. T/20171219/7011

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

CONTINUATION OF REPORT

SL	ot	nh	D	lan	

NP168

Informant is not able to provide sketch plan

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: 19/12/2017 12:51
Officer In Charge Of Case:	Classification Of Case:
uthentication Stamp	

ACCIO	PENT DATE: 18/	2,2017/10	D/MM/YYYY),	TIME: (10 .	00+1(H	(MM:H
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	alvehicle NUMBE	R: EH	1998 M		1 1	
	b)INSURANCE CO	UPANY UN	in lathing			
	CIPOLICY NUMBER	DMP	CON 309	299 1701		
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	GIVEHICLE CATEG	ORY: IPRIVATE /	COMMERCIA	L/MOJORC	YCLE)	
	h PURPOSE OF USI	NG AT ACCIDE	YT TIME: PA	arking		
	I) ARE YOU CLAIMIT	NG UNDER YOU	r own insur	RANCE (YES/1	10)	
*	IF NO, PLEASE STA		Y CLAIM / REI	PORTING ON	LY	*
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79	HINRIC /FIN/PASSP	ORT: 588	218623.			11998
	CLADDRESS: 43	2 CHOA	CHU. KA	FRIGONTACE	2	
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(Including driver)	b) NRIC/FIN/PASSP	ORT!		CONTACT		
(0)	c) ADDRESS:					
· ·		0506	088 112211	11100000		
	*d)DATE OF BIRTH:	NDOOS VOUT	DOOR)	MM/1111)		9
	THE POST OF THE PRIVATE	- 600			1285 montos - sansanan	
4.	WAS DOTHER AN	EMPLOYEE OF	THE INSURE	ED'S COMPA	NY? (YES	(NO)
120	IF NO, RELATION	SHIP OF THE	DRIVER WITH	THERS (LEAR	
5.	a) WEATHER COND	MON; (CLEAR	THERS	DRY		
6.	WAS ANYBODY IN	JURED (YES / W	9)			¥.
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	IF YES, PLEASE ST	ATE WHICH PO	LICE STATION	Online		
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4 lan of harsender	b) DRIVER'S NAM	AE:				
(Inducting driver)	c) MRIC/FIN/PAS	SPORT:		CONTAC	T:	
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					51	
		36	8 9 9	1 laction	mil com	

email = slotsebastian @ hotmail.com

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8821862J



TAN LEONG HOCK, SEBASTIAN (CHEN LIANGFU)

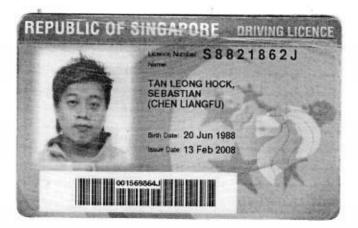
陈 良福

CHINESE Date of Birth

20-06-1988

SINGAPORE







18-06-2003

APT BLK 472 CHOA CHU KANG AVENUE 3 #03-151 SINGAPORE 680472 NRIC No: \$8821862.I Date: 31/03/2008

No: 5974732

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles =< 200 CC
Class 3 Motor cars =< 2000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/rehicles =< 2500 kg
Class 4 Heavy motor cars and motor tractors > 2500 kg
Motor vehicles > 7250 kg not constructed to carry any load

S8821862J

S/No. 9000110126

NP 428A

Licence No: S8/21862.J



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MX1F R: SN AN0420A Cov. Type: C

MOTOR PRIVATE CAR

CERTIFICATE OF INSURANCE

otor Vehicles (Thad-Party Risks and Compensation) / Motor Vehicles (Thad-Party Risks and Compensation Road Transport Act, 1997 (Malayzia) ishhon) Act (Chapter 18 persultion) Russa, 1960 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No.

DMPCSN3092991701

Engine No :4A910120597 Chano: JMYSRCYZA9U003600

Index Mark and Registration

Number of Vehicle

EH1998M

AUTOSAFE

2. Name of Policy Holder

TAN LEONG HOCK

Effective date of the Consistencement of insurance for the purposes of the Regulations. Ordinance of Enactment

11 February 2017 Named Drivers Ex Sect. I S\$500.00

Date of Expiry of Insurance

Additional Ex Other than Named Drivers: Ex Sect, I - Age <= 25...... S\$3,000.00

10 February 2018 Ex Sect. I - Age >= 26..... \$\$500.00 " Age as at date of accident

EX ON WINDSCREEN \$\$100.00

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 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:

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)

One time Waiver of Excess for the first S\$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. : SWEE SENG CREDIT PTE LTD AS HP OWNER * Limitations rendered inoperative by Section 8 of the Molor 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 (Alaysia)

Please see reversed

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:INXPRESS INSURANCE AGENCY PTE LTD Authorised Officer

Authorised Signatory