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Preferred Wksp / INC Assig	gn Wksp / QW: (Tol:	Fax:		
TP Particulars:	Veh No:	SKN4216P	, INC()/Non-INC ()		
Owner / Driver: (Tel:			=
Policy No: () Pe	riod: ()	Cover Type: ()	
Confirmed by :	(Date:	Time:)	
Insured/Driver Liability		Note-Est. Status (W	CONTRACTOR OF THE PROPERTY OF	0%; P: 21-79%.	F: 80-100%		
Year of Registration: ())/NO()			
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Apply for Transport A QC Check / Post Reparation	llowance ()'/	()		Date&Time Cor	npleted	Done b	ny
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. 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.

Any false reporting may be referred to the Police for investigation.

- 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

ACCIDENT STATEMENT
26/12/2017 13:52
25/12/2017 14:30
KIM KEAT LINK SLIP RD INTO LOR 6 TOA PAYOH
SINGAPORE
DETAILS OF OWN VEHICLE
GBC2023G
GEF ENGINEERING PTE.LTD.
8
ERIC.TAN@GEF-ENGRG.COM,SG
(LOCAL) +65-96462061
OFFICE-96462061
NISSAN
NV200
COMMERCIAL USE
NO
THIRD PARTY
COMMERCIAL VEHICLE
LIBERTY INSURANCE PTE LTD
COMPREHENSIVE
NO
SI17V12037/VCV/R01
TAN NAI HO ERIC
S1150162A
05/01/1957
INDOOR
19/06/1976
41 YEARS AND 6 MONTHS
MALE
(LOCAL) +65-96462061
ERIC.TAN@GEF-ENGRG.COM.SG

BLK 242 BUKIT PANJANG RING ROAD

Address

#04-173

670242 Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

NO Was any body injured in the Accident?

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Passenger 1 : RHONDA BIAN WEE FUN NAME:

NO

2

: FEMALE GENDER:

Details of Police Action

NO Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera?

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SKN4216P Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.
- 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.
- 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.

GEF ENGINEER INVESTE LTD 3015A Ubi Road 1, #07-04, Singapore 408705 Ter. (65) 6846 0907 Fax: (65) 6747 9113

Email: Adminion of Friday, com.sg

Date & Time:

24-12-17

Driver's Signature (If driver is not the policyholder) Date & Time: Agu 26/12/17
Reporting Lentre Personnel's Signature

Name: NRIC/FIN No.: LOR 6 TOA PAYOH

A - GBC 2023G B - SKN4216P KIM KERT LINK

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s repr to the statement.	

DECLARATION

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

GEF ENGINEERING FIE LTD ¥ 3015A Ubi Road 1, #07-04,

Singapore 408705
Tol: (65) 6846 0867 PEAKS (55) 6747 9113
Driver's Signature
Email: aC/Aint/acct-poems agm. 50 (If driver is not the

Driver's Signature

(If driver is not the policyholder)
Date & Time:

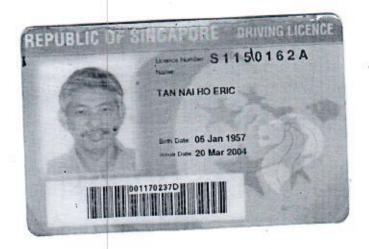
Sym 26/12/17
Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: MY VEH WAS STATIONARY ON THE GIVEWAY LINE OF KIM KEAT LINK SLIP RD INTO LOR 6 TOA PAYOH TO GIVE WAY FOR ONCOMING VEH.SUDDENLY VEH(B)BEARING REG NO SKN4216P CAME FROM BEHIND AND HIT ONTO THE REAR PORTION OF MY VEH.

ACCIDENT STATEMENT

	120	D INTO LOR 6 TOA	
1	DETAILS OF VEHICLE	# 20 E	
	a) VEHICLE NUMBER: GBC 30336		
	b)INSURANCE COMPANY: 4/BER74		
- 20	CIPOLICY NUMBER: 5016110312/VCI	V/RO	
	d)POLICY TYPE: COMPREHENSIVEY THIRD PAI	RTY / THIRD PARTY FIRE &THEFT)	
	e)MAKE & MODEL: NISSAN NV 200		531
	f)TYPE:(SALOON / COUPE / MPV VANY LORR		
	g) VEHICLE CATEGORY: (PRIVATE /COMMERC		
	h)PURPOSE OF USING AT ACCIDENT TIME:		
	i) ARE YOU CLAIMING UNDER YOUR OWN INSU		
	IF NO, PLEASE STATE (THIRD PARTY CLAIM) RI		
		EFORTING ONLT	9
2.	ANAME: GER ENGINEERING PIE	67A	
		CONTACT: 96463061	
	c)ADDRESS:		
	* COUTINE TO A LIE DRIVER AND DOUGH		(4)
. 1	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HO	DLDER	
No of passenger Including driver)	DRIVER	C10.00000004-000001000124	
Indudina disport	a) NAME: TAN MAI HO ERIC	(MALE / FEMALE)	
()	b)NRIC/FIN/PASSPORT: S11501624	CONTACT: 96463061	
(_)	c)ADDRESS:		20
	Consideration of the Constitution of the Const		
18	*d) DATE OF BIRTH: (05/ 01/ 1937) (DD/	MM/YYYY)	
	e)OCCUPATION (INDOOR) OUTDOOR)		6
	f) YEARS OF DRIVING EXPRERIENCE:	- 3	
4.	WAS DRIVER AN EMPLOYEE OF THE INSURI	HE IN THE STATE OF	10.5
696.75	IF NO, RELATIONSHIP OF THE DRIVER WITH		
5.	a) WEATHER CONDITION: (CLEAR) RAINING /		
5.			
	a) WEATHER CONDITION: (CLEAR) RAINING /		\$11
6.	d) WEATHER CONDITION: (CLEAR) RAINING / C b) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES (NO))		#1 50
6.	a) WEATHER CONDITION: (CLEAR) RAINING / (b) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES (NO)) a) REPORTED TO POLICE (YES (NO))	OTHERS	\$1 \$1
6. 7.	a) WEATHER CONDITION: (CLEAR) RAINING / Cb) ROAD SURFACE: (DRY) WET / OTHERS WAS ANYBODY INJURED (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION:	OTHERS	
6. 7.	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRY WET / OTHERS WAS ANYBODY INJURED (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE	OTHERS	#1 #1
6. 7. 8. of passenger	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) a) REPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN 42/6 P	OTHERS	\$1 \$1
6. 7. 8. of passenger adulating driver)	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) a) REPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN 42/6 P b) DRIVER'S NAME: YE WETWEY		\$1 \$1
6. 7. 8. of passenger aduding driver)	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SEN 42/6 P b) DRIVER'S NAME: YE WETWE! C) NRIC/FIN/PASSPORT: G1066589U	OTHERS	
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6. 7. 8. of passenger aduding driver)	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN 42/6 P b) DRIVER'S NAME: YE WETWE! c) NRIC/FIN/PASSPORT: G1066589U THIRD PARTY VEHICLE d) VEHICLE NUMBER:		#11 #21
6. 7. 8. cof passenger aduding driver) () 9. 10 of passenger	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) a) REPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN 42/6 P b) DRIVER'S NAME: YE WEIWE! c) NRIC/FIN/PASSPORT: G1066589U THIRD PARTY VEHICLE d) VEHICLE NUMBER:	MODEL: 97509415 CONTACT: MODEL:	\$1) 51
6. 7. 8. c of passenger aduding driver) () 9.	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) a) REPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN 42/6 P b) DRIVER'S NAME: YE WEIWE! c) NRIC/FIN/PASSPORT: G1066589U THIRD PARTY VEHICLE d) VEHICLE NUMBER:		201 201 202
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6. 7. 8. cof passenger aduding driver) () 9. 10 of passenger	a) WEATHER CONDITION: CLEAR RAINING / Cb) ROAD SURFACE: DRYY WET / OTHERS WAS ANYBODY INJURED (YES NO) a) REPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: THIRD PARTY VEHICLE a) VEHICLE NUMBER: SKN42/6P b) DRIVER'S NAME: YE WETWE! c) NRIC/FIN/PASSPORT: G1066589U THIRD PARTY VEHICLE d) VEHICLE NUMBER: e) DRIVER'S NAME: f) NRIC/FIN/PASSPORT:	MODEL: 97509415 CONTACT: MODEL: CONTACT:	
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Liberty Insurance Pte Ltd

Registration no.199002791D 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Fax: (65) 6225 6890 Website: http://www.libertyinsurance.com.sg

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)

Certificate No	SI17V12037 /VCV /R01	
Form	MZ300A	
Date of Issue:	25-Jul-2017	
1.Index Mark and Registration No. of Vehicle:	GBC2023G	
2.Chassis number of Vehicle:	VSKYBAM20U0024870	
3.Name of Policyholder	GEF ENGINEERING PTE, LTD.	
4.Effective date of Commencement of Insurance	18-AUG-2017 00:00	
for the purposes of the Act:		
5.Date of Expiry of Insurance:	17-AUG-2018 23:59	
6.Persons or Classes of Persons		
entitled to drive*:		

Any person who is driving on the Policyholder's order or with their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7.Limitations as to use":

A) Use in connection with the Policyholder's business.

- B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- C) Use for social, domestic and pleasure purposes.

8. The Policy does not cover:

A) Use for hire or reward or for racing, pace-making, reliability trials or speed-testing.

B) Use whilst drawing a trailer except the towing or any one disabled mechanically propelled vehicle.

*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).

For and on behalf of LIBERTY INSURANCE PTE LTD

Approved Insurers

Authorised Signature

For Information only:

COVERAGE:

Comprehensive, Unlimited Windscreen

SUM INSURED (S\$):

MARKET VALUE AT THE TIME OF LOSS Section I \$600.00, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers \$3,000.00, Windscreen Excess \$100.00

EXCESS (SS): FINANCE COMPANY:

HONG LEONG FINANCE LTD

PRODUCER NAME:

IPP FINANCIAL ADVISERS PTE LTD