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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.

- 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

of the management of the strike per the	ACCIDENT STATEMENT
Date Of Report	22/01/2018 12:33
Date Of Accident	21/01/2018 14:00
exact Location Of Accident	PIE TOWARDS CHANGI AIRPORT NEAR EXIT 11 PAYA LEBAR
Country/State of Loss	SINGAPORE
White I which the control of the property of the control of the co	ETAILS OF OWN VEHICLE
/ehicle Registration Number	FBM5706Y
Insured/Policyholder	
Name Of Registered Owner	ZHANG JUNWEI
NRIC No	G6685214N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81111217
Alternative Phone No	OTHERS-81111217
Vehicle Particulars	
Manufacturer	HONDA
Model	CBX400X-399CC
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMMPHQ17-000944
Cover Note Number	
Driver	
Name of Driver	ZHANG JUNWEI
NRIC No	G6685214N
Date Of Birth	28/02/1987
Occupation	INDOOR
Date Of Driving Pass	29/08/2017
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81111217
Fax Number	
Contact Number	OTHERS-81111217
EMail Address	NOEMAIL

Address

BLK 672A KLANG LANE

#19-109

Postcode

211672

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

YES

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

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

NO

Number of Passengers (Including Driver)

4

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

QUEENSTOWN N.P.C

Police Station Address

ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4719999 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLK9787D

Vehicle Make/Model/Colour

TOYOTA COROLLA AXIO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SIVAPATHAM SUNDRALINGAM

NRIC/Passport Number

S1222605E

Contact Number

98323259

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 29

DETAILS OF INJURED PERSON 1

Name

ZHANG JUNWEI

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBM5706Y

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address Postcode

Page 3 of 29

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.
- Any false reporting may be referred to the Police for investigation.
- 6. 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)

Lunderstand, 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)
 - (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.
- (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:
 - (i) 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:

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





Police Station Of Origin: Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

1 of 4

Report No. T/20180122/2044

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 22/01/2018 11:36		Vide Report No.:	Station Diary No.: 39	
Informa	nt's Partic	ulars			
	f Informant: JUNWEI		Address: APT BLK 672A KLANG LANE	#19-109 SINGAPORE 211672	
	/ ID No.: / G6685214	4N	Contact No.: Home/Office:	Mobile: 81111217	
National CHINES	35 - 400		Email:		
Sex: Male	Age: 30	Date of Birth: 28/02/1987	n: Type of Informant: Rider		
Race: Chinese		W	Language: English	Institution / School Name:	
Occupation: SALES DIRECTOR		li .	Driving Licence Information: Class: 2B,2A	Date of Expiry:	

	Injune	ont Drink	Date/Time of	Type of Legation	
Type of Accident:	Others	- NO CONTRACTOR - NO CONTRACTO		Type of Location Straight Road	
Along PIE tov	EXPRESSWAY vards Changi Airport I	near to exit 11 Paya Le			
		Road Surface: Dry	F	Road Speed Limit:	
		Traffic Control:	205	Traffic Volume: Heavy	
Traffic Flow: One Way	19	Not Controlled		leavy	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBM5706Y	Motorcycle	HONDA	CB400X	Silver	Slightly Damaged	0
SLK9787D	Car	ТОУОТА	COROLLA AXIO HYBRID 1.5G CVT	White	Slightly Damaged	1.

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	





Police Station Of Origin: Queenstown N.P.C 3 Queensway #01-03 SINGAPORE 149073 Tel No: 1800-4719999

2 of 4 Report No. T/20180122/2044

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
FBM5706Y	EQ INSURANCE COMPANY LTD.	DMMPHQ17- 000944	16/12/2017	15/12/2018	

Details of Perso	on Involved	Television of	STER STER	NES ALL		
Any Pedestrian I	nvolved: No					
No. of Pedestrian			Use of Pe	edestria	n Cross	sing: NA
Rider						all grant and a second
Name	ZHANG JUNWEI			ID No).	G6685214N
Related Vehicle	FBM5706Y (Motorcycle)			Conta	act No.	81111217
Hospital/Clinic	CHANGI GENERAL HOSPITAL			Class of Driving Licence & Expiry Date		Class: 2B,2A Date of Expiry: NIL
Date Treatment	21/01/2018		Date Disc		NIL	
No. of Days gran	ted Medical Leave	03		Degree of Injury Slight		
Driver	The sales of				- Ongil	A CONTRACTOR OF THE PARTY OF TH
Name	Sivapatham Sundra	lingam	#2	ID No	4	S1222605E
Related Vehicle	SLK9787D (Car)			Conta	ict No.	98323259
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days grant	ted Medical Leave	NIL	Degree o		NIL	

Brief Details.

On 21/01/2018 at about 1400 hrs, I was riding my motorcycle FBM5706Y along PIE towards Changi Airport near to exit 11 Paya Lebar. I was travelling straight in the middle of lane 1 and 2 of 4 lanes from the right. As I was approaching vehicle SLK 9787D who was travelling on the most right lane, suddenly, the said vehicle filtered left. I noticed that the said vehicle did not signal prior to filtering left. The said vehicle left side mirror collided onto the right side of my motorcycle. Subsequently, I fell onto the ground. I tried to avoid collision however was unable to.

The damages to my bike are scratches and dents on the handle bar, body and box. The mirror of my motorcycle was also broken. I am not sure of the damage to the other vehicle. Subsequently, we exchanged particulars and left. I then went to Changi General Hospital for medical attention. I was given 3 days of MC from 21/01/2018 to 23/01/2018.

No government property damaged. Traffic Police and Ambulance were not at scene. I am lodging this report for claiming of insurance purposes.





3 of 4

Report No. T/20180122/2044

Police Station Of Origin: Queenstown N.P.C 3 Queensway #01-03 SINGAPORE 149073 Tel No: 1800-4719999

CONTINUATION OF REPORT





Police Station Of Origin: Queenstown N.P.C 3 Queensway #01-03 SINGAPORE 149073 Tel No: 1800-4719999

4 of 4 Report No. T/20180122/2044

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: D / Sgt 2 HIDAYAT BIN SELAMAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/01/2018 11:36
Officer In Charge Of Case: TP / AEIT / SSI GOH GEOK LYE Contact No.: 65476148	Classification Of Case:
Authentication Stamp	

EMPLOYMENT PASS

Employment of Foreign Manpower Act (Chapter 91A) Republic of Bingapore

U MEDIA ASIA PRIVATE LIMITED



ZHANG JUNWEI EXECUTIVE DIRECTOR

GBBBBBBANN

02-12-2016

13-02-2017

17-02-2019

L7629720

G6685214N ZHANG JUNWEI Beth Date 28 Feb 1987 tour time 09 Oct 2014 Valid Till 08 Oct 2019

VISIT PASS Immigration Regulations

ZHANG JUNWEI

Date of Birth | Sec.

Nationality

28-02-1987 M Date of Teauw CHINESE Date of Expery

G6685214N 13-02-2017 17-02-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED OR WHEN A NEW CARD IS ISSUED TO YOU.



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS-EAT

EFFECTIVE DATE

Class 2A

Matureyeles set 200 CC Metorcycles between 200 CC and 400 CC

19 Oct 2014 29 Aug 2017

S / No 9000272998

G8485214N

Lipence No; G6665214N

NP 428A

EQ Insurance Company Limited

OF BUILDING TAXABLE

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 969119. tel:66 6223 8493 | fax:85 6234 3903 | www.eqinsurance.com.eg. reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

MOTORCYCLE Third Party Fire & Theft

Gertificate No.; DMMPHQ17-000944

Form: MY1 Excess: \$\$500.00

- Index Mark and Registration Number of Vehicles FBM5706Y
- Name of Policyholder ZHANG JUNWEI
- Effective Date of the Commencement of Insurance for the purpose of the Act 16/12/2017
- Date of Expiry of Insurance 15/12/2018
- 5. Person or Classes of persons entitled to drive*

Restricted to Named Drivers Only

- 1) The Policyholder / Insured
- 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 regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been caricelled at the time of accident loss or damage.
- 6. Limitation as to use*

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and in connection with the Policyholder's business or profession

THE POLICY DOES NOT COVER:

- (1) Use for hire or reward
- (2) Use for racing pace-making reliability trial or speed-testing
- (3) Use for the carriage of goods (other than samples) in connection with any trade or business
- (4) Use for any purpose in connection with the Motor Trade

*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.

NWE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Venicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: SOUTHERN WIND MOTOR CREDIT & TRADING PTE LTD

A000338/Ban Hock Hin Co. Pte Ltd Date of Issue: 16/12/2017 13:37

Authorised Signatory EQ Insurance Company Limited

Enquire Transfer Fee

Vehicle Details

Vehicle No.

FBM5706Y

Vehicle Type

P00 - Passenger Motorcycle/Autocycle/Moped

Vehicle Attachment 1

No Attachment

Vehicle Scheme

Normal

venicle achemic

200000000

Vehicle Make Vehicle Model HONDA CB400X

Chassis No.

JH2NC4793HK200046

Propellant

SPANEL WAS BUILDING IN TO

Petrol

Engine No.

NC47E5200047

Engine Capacity

399 cc

Maximum Power

Output

Maximum Laden

377 kg

Weight.

Unladen Weight

192 kg

Year Of Manufacture

2017

Original Registration

14 Dec 2017

Date

Lifespan Expiry Date

COE Category

D - Motorcycle

Quota Premium

\$6,552,00

COE Expiry Date

13 Dec 2027

Road Tax Expiry Date

13 Jun 2018

Inspection Due Date

13 Dec 2020

Intended Transfer

16 Dec 2017

Date

CO2 Emission

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee (s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(S\$)	(S\$)
Transfer Fee	11.00	W-9	11.00
Total Amount Payable			11.00

You may print this page for reference.