| NOTE: TO BE COMPLETED BY SUF | TI | E | ET | T | T | BI | D | F | 3 | Y | 8 | | R | V | E | V | 0 | F | į |
|------------------------------|----|---|----|---|---|----|---|---|---|---|---|--|---|---|---|---|---|---|---|
|------------------------------|----|---|----|---|---|----|---|---|---|---|---|--|---|---|---|---|---|---|---|

| TEAM | |
|------|--|
| | |

AIG THIRD PARTY EXPRESS SETTLEMENT FOR ACCIDENTS ON OR AFTER 1ST JUNE 2008 (PAYMENT BREAKDOWN)

| Vehicle N | 10: SLD 205814 | | | |
|--------------|--|---------------|--|-------------------------|
| Date of A | ccident: 26.1.18 | _ ^ | fodel: | |
| - | HALLMANN COLDINA | Total Control | + | |
| Global Sui | m Settlement : [] Yes | 271 | [] No | |
| Repair Est | imate | : \$ | 6,736.02 | |
| Final Repa | air Cost | : \$ | 3144.57 | |
| Loss of Us | se | : \$ | 150.00 | 3 days at \$ 50 per day |
| Rental (if a | any) | : \$ | _ | days |
| LTA/GLA | Search Fee | : \$ | 2.00 | |
| Others: | | : \$ | 1 | |
| | | : \$ | | |
| Final Settle | ement Sum | : \$ | 3,296.57 | |
| Is Third I | Party Workshop GIA Registered? | 1 | YES NO (K | indly indicate below) |
| A) | For Non GIA Registered Works | | | |
| В) | For GIA Registered Workshop: | | BOLA Applica BOLA Scenario | o No: |
| 9 | BOLA Liability:(%) * Assessed Liability to be filled onl not apply. | y for | Assessed Liabil chain collisions an | |
| Remarks | | | | • |
| | | | | |
| Payment T | nstruction: Payee's Breakdown | | | |
| 0-0 | | | | |
| 1) | Performance Moto | rs | Ltd S 3 | 144.57 |
| 2) | Performance M | ore | ors Ltus - | 1.00 |
| 3) | Chang Thian Sian | | :\$ \ | 50.00 |
| | 3 | | | |
| | | | | |
| Sign | ned by appointed surveyor | - | Deta | _ |
| 1100 | appended ant voyor | | Date | |

Please attach all the supporting documents to the form. (Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)

Performance Motors Limited

A member of the Sime Darby Group Co. Reg. No. 197401559W GST Reg. No M2-0020081-x

303, Alexandra Road Sime Darby Performance Centre Singapore 159941

Tel. 63190100 (Sales & Admin) 63190111 (AfterSales) Fax. 64747770

280, Kampong Arang Road East Coast Centre Singapore 438180

Tel. 63190888 (AfterSales) Fax. 63449773

315, Alexandra Road Sime Darby Business Centre Singapore 159944 Tel 63190528 (AfterSales) 63190533/530 (Motorrad) Pax. 64796601 (AfterSales) 64796624 (Motorrad)



SERVICE TAX INVOICE

1243453 Repair Order No. : B1

Cust. Svc. Advisor: Chua Kee Sin

: 07/02/2018

Page No.

: 1 of 2

Invoice Number: 1937456 / WSB

Invoice Date : 21/02/2018

Payment Terms : 30 Days From Invoice

(V.C)

Invoice By

: Toh Jing Xuan

- CUSTOMER INFORMATION -

Mr Chong Thian Sian 32 Jalan Rajah

#25-03

Date IN

- INVOICE TO -121

AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way

#08-16 Chartis Building

Singapore 079120

Singapore 329141

REGN. NO. SLD2058H CHASSIS NO. 5F00739

REGN. DATE 07/06/2016

MODEL X1 SDRIVE18I MILEAGE 27979

0.00

0.00

1,974.00

NETT ----LABOUR 1 ----850.00 To replace rear bumper and attachments including knock out dented area caused by the accident. 934.00 To respray rear bumper. 150.00 To check electrical wiring systems and lightings at the rear section for proper function. 40.00

INS CLAIMS: ACCIDENT REPAIR, DIRECT SETTLEMENT. DATE OF ACCIDENT: 26.01.2018. 3RD PARTY CAR: SKQ6510K.

YOUR REF NO: NIL.

Sundries.

VEHICLE WAS SURVEYED BY MR TAUFIKH FROM LKK AUTO ON 07.02.2018 AT 3:30PM. AUTHORISED REPAIR BY MS VIC ALPEH FROM LKK AUTO ON 01.02.2018 VIA EMAIL.

PROPOSE LOSS OF USE = \$50x3. THE AMOUNT IS SUBJECTED

TO INSURANCE COMPANY COMFIRMATION.

GIA SEARCH FEE = \$2.00.

0.00

Total Labour 1:

Retail Price NETT Qty --- PARTS 1.35 13.50 10 EXPANDING RIVET 723.45 723.45 1 REAR BUMPER PANEL PRIMED 227.90 227.90 1 REAR BUMPER MIDDLE TRIM PANEL (PDC) 964.85 Total Parts

BMW Dealer

Performance Motors Limited

A member of the Sime Darby Group Co. Reg. No. 197401559W GST Reg. No M2-0020081-X

303, Alexandra Road Sime Darby Performance Centre Singapore 159941

Tel. 63190100 (Sales & Admin) 63190111 (AfterSales) Fax. 64747770

280, Kampong Arang Road East Coast Centre Singapore 438180 Tel 63190888 (AfterSales) Fax. 63449773

315, Alexandra Road Sime Darby Business Centre Singapore 159944 Tel. 63190528 (AfterSales) 63190533/530 (Motorrad) Fax. 64796601 (AfterSales) 64796624 (Motorrad)



SERVICE TAX INVOICE

: 2 of 2 Page No. Repair Order No. : B1 1243453

Invoice Number: 1937456 / WSB

: 07/02/2018 Date IN Invoice Date : 21/02/2018

Payment Terms : 30 Days From Invoice Cust. Svc. Advisor: Chua Kee Sin

: Toh Jing Xuan Invoice By

| Computer generated | invoice | No signature is required. | Amount Payable Include GST : | | S\$ | 3,144.57 |
|--------------------|---------|---------------------------|---------------------------------|-----|-----|----------|
| | | | Invoice Total Amount Include GS | T | S\$ | 3,144.57 |
| | | | GST @ 7% | : | S\$ | 205.72 |
| Lubricant/Misc | \$3 | 40.00 | Invoice Total Amount Exclude GS | T : | S\$ | 2,938.85 |
| Parts Charges | 20 | 964.85 | Less Insurance Excess | | S\$ | 0.00 |
| Labour Charges | 1 | 1,934.00 | Total Labour & Parts Charges | 1 | S\$ | 2,938.85 |



Work was carried out subject to the Company's Terms and Conditions of Service. No complaints will be entertained unless reported within seven (7) days of the date of this invoice. For credit purchases, interest @1% per month will be debited on overdue amounts.



AUTHORISATION TO ACT

(AIG Express Third Party Claim)

| I, Mr Chong Thian Sian (the third party claimant) of 32 Julea Rajuh |
|--|
| # 25-03 s(329141) (address), owner of SLD2058H (vehicle no.) |
| hereby authorize Performance Motors Ltd ("the workshop") to act for me |
| with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle |
| no. SLD2058 H that was damaged pursuant to the accident which occurred on 26. C1.201 |
| (date) along T-Junction of tempinese Ave 4 F (entral 1 (location) involving vehicle no/s |
| StQ 6510 F ("the accident"). |
| |
| I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit |
| and the workshop is further authorized to receive payment further to settlement of my claim with |
| payment cheque/s being made in favour of the workshop. |
| |
| I further acknowledge that any settlement the workshop may reach on my behalf is on a without |
| prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other |
| vehicle/s is concerned. |
| |
| Dated this (day) of (month) 20_18(year) |
| |
| CHUA KEE SIM Performance Motors Limited 303 Alexaridra Road |
| Sime Darby Performance Certre Singapore 159941 |

Signed by "the third party claimant" (with chop if applicable)

Signed by "the workshop"

(with chop)

RELEASE VOUCHER (AIG Express Third Party Claim)

| "We/I, | Performance N | 10tors Liu | ("the workshop") hereby confirm that we/I |
|--------------|--------------------------------|--------------------------|--|
| | | | of AIG Asia Pacific Insurance Pte Ltd LKK |
| AUTO CO | ONSULTANTS PTE LT | D (name of surveyo | r) with respect to the amount claimed for |
| | | |), S\$ 2-00 (Disbursement), for vehicle no. |
| | | | which occurred on July (date) along |
| | | | involving vehicle no/s SKG 6510K. This is |
| pursuant to | the inspection conducted o | n 7.2.18 (date) | at "the workshop". |
| | | | |
| | | | |
| We/I confi | rm that we/I are/am author | orized by the owner _ | Chong Thian Sian |
| ("the third | party claimant") of vehicle | no. <u>SLD2058H</u> ma | ake the claim as set out in the above paragraph |
| and we/I h | ave full authority to settle | the matter on his/her | behalf in a manner that we/I deem fit. We/I |
| | | | |
| enclose ner | ein the letter of authority gi | iven by the third party | Cidillati . |
| We/I furthe | er confirm that we/I will in | demnify AIG Asia Pa | ncific Insurance Pte Ltd for all damages, loss |
| and/or expe | ense that they will or have | already incurred in the | event that "the third party claimant" after the |
| above said | agreement lodges a furt | her claim against the | former for any loss and expenses suffered |
| pertaining | to costs of repairs and/or | rental and/or loss of | use pursuant to the damage to SLD 2058 |
| (vehicle no | .) as a result of the accident | L | |
| Woll confi | that the care amount was | shad shows is in full s | and final settlement of any claim of "the third |
| | | | |
| party claim | ant" pursuant to the accide | ent and that further thi | s settlement is reached on a without prejudice |
| and withou | t admission of liability basi | S. | |
| | | | |
| This agrees | ment is subject to the app | lication of Singapore | law and the Singapore Courts have exclusive |
| jurisdiction | over any dispute arising or | ut of the same. | |
| | | | |
| Dated this | (day) of | (month) 20 | _ (year) |
| | | | CHUA KEE SIN |
| | | | Performance Motors Limited 303 Alexandra Road |
| | | | Sime Darby Performance Centrel Singapore 159941 |
| | | | |

Signed by appointed surveyor

Signed by "the workshop" (with chop)



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

Third Party Insurer Enquiry

Our Ref No:

GR-18-014507

Date of Request:

26/01/2018

Your Ref No:

Online Purchase

Performance Motors Limited 303 Alexandra Road Sime Darby Performance Centre Singapore 159941

Dear Sir/Madam,

Enquiry Date

26/01/2018

Enquiry By

Vivi

TP Vehicle No.

SKQ6510K

Accident Date

26/01/2018

Enquiry Result

| TP Vehicle No. | Insurer | Period of Insurance | Insurer Tel. No. |
|----------------|--------------------------------------|-----------------------|------------------|
| SKQ6510K | AIG Asia Pacific Insurance Pte. Ltd. | 18/12/2017-17/12/2018 | 65-6419-3000 |

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-014507

Date of Request:

26/01/2018

Your Ref No:

Online Purchase

Performance Motors Limited 303 Alexandra Road Sime Darby Performance Centre Singapore 159941

Dear Sir/Madam,

Enquiry Date

26/01/2018

Enquiry By

Vivi

TP Vehicle No.

SKQ6510K

Accident Date

26/01/2018

| DESCRIPTION | AMOUNT (S\$) |
|----------------------------------|--------------|
| TP Insurer Enquiry | 1.87 |
| GST Amount | 0.13 |
| Total Amount Due (GST Inclusive) | 2.00 |

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque

AXA INSURANCE PTE LTD

8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Service Centre #B1-01
Tel:(65)63387288 Fax:(65)63382522
Website:www.axa.com.sg
GST Registration Number: 199903512M
customer.service@axa.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.

: VPA/P1785415

Account No. : 11615

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: CHONG THIAN SIAN

Vehicle Registration No. : SLD2058H

Period of Insurance

: From 07/06/2017 To 06/06/2018 (Both Dates Inclusive)

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE*

(a) The Policyholder
 The Policyholder may also drive a Motor Car not belonging to or not hired (under a hire purchase agreement or otherwise) to him or his employer or his partner
 (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.

LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Policyholder's business The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

(01

Basic Own Damage Excess

: SGD 700.00

An Additional Excess is applicable as follows: \$\$500.00 for Unnamed Authorized Driver &/or Declared Young & Inexperienced Driver. \$\$5,000.00 for Undeclared Young and Inexperienced Driver. (Please refer to your policy on the terms & conditions)

* 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).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOSAMY

on 25/08/2017

Policyholders are warned that on the sale of a motor vehicle they must surrender 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 the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, covernote and

endorsement etc.

IDENTITY CARD NO. \$8426935B

CHONG THIAN SIAN

钟 天 祥 CHINESE

24-09-1984 M

584269358

SINGAPORE





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

PASS DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive 15 Jul 2008 of the driver; and other motor vehicles =< 2500kg

Licence No: S8426935B

NP 428A

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number Fax Number Contact Number

EMail Address

- 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</u> 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 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.

| aforesaid. | |
|---|--|
| THE REPORT OF THE PROPERTY OF THE PARTY. | ACCIDENT STATEMENT |
| Date Of Report | 26/01/2018 17:20 |
| Date Of Accident | 26/01/2018 09:00 |
| Exact Location Of Accident | T-JUNCTION OF TAMPINES AVE 4 & CENTRAL 1 |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SLD2058H |
| Insured/Policyholder | |
| Name Of Registered Owner | CHONG THIAN SIAN |
| NRIC No | S8426935B |
| Email Address | SKYLINE1984@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-90019803 |
| Alternative Phone No | OFFICE-90019803 |
| Vehicle Particulars | |
| Manufacturer | BMW |
| Model | X1 |
| Exact Purpose for which vehicle was being used at time of accident | NORMAL USAGE |
| 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 | PRIVATE CAR |
| Insurance Company | |
| Name of Insurance Company | AXA INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | VPA/P1785415 |
| Cover Note Number | |
| Driver | |
| Name of Driver | CHONG THIAN SIAN |
| NRIC No | S8426935B |
| Date Of Birth | 24/09/1984 |
| Occupation | INDOOR |
| Date Of Driving Pass | 15/07/2008 |
| Driving Experience | 9 YEARS AND 6 MONTHS |
| A CONTRACT OF THE PROPERTY OF | |

MALE

(LOCAL) +65-90019803

SKYLINE1984@GMAIL.COM

OFFICE-90019803

Address

32 JALAN RAJAH #25-03

Postcode

329141

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

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

NO

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

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)

2

Passenger 1

NAME:

: CHONG WEN PING

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACH.

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

SKQ6510K

Vehicle Make/Model/Colour

SUBARU

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

TAN POH WEE

NRIC/Passport Number

S7521559B

Contact Number

98266901

Address

Postcode

Insurance Company Name

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Nature Of Damage

FRONT RIGHT

No. Of Passenger (Including Driver)

Page 2 of 17

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 <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: 26 Jan | Driver's Signature

(If driver is not the policyholder)

Date & Time: 2 6 Jan / 18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

| SKETCH PLA | Traffic Light on Amber turning Red | |
|----------------------|-------------------------------------|--|
| SKETCH PLA | a number turning Red | |
| 12 + 31 | | |
| Tampings | Tampines Central 1 | |
| 0 | | |
| (myself) SLD2058H | americana. | |
| N | | |
| a.6510k | | |
| @6510K | Century Square Shopping Mall | |
| + 81 | Shopping 1141) | |
| | | |

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

| I was travelling along Tampines Avenue 4, I wanted to turn right |
|--|
| and therefore I stationary my vehicle. Immediately, the near car |
| (SKQ6510K) hit on to the rear of my car. The third Party driver |
| mentioned that he tricd to avoid by swering to the left but his |
| car still hit on to the Left rear side of my car. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

DECLARATION

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

Policyholder's Signature Date & Time: 26 | Jan | 18

Driver's Signature

(If driver is not the policyholder)
Date & Time: 26 | Jan | 18

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