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 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 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 Report	21/09/2017 10:19
Date Of Accident	20/09/2017 09:20
Exact Location Of Accident	ALONG TPE EXIT 2 TOWARDS LOYANG AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE					
Vehicle Registration Number	SLD573A				
Insured/Policyholder					
Name Of Bagistared Owner	ANO DENO LILIAT				

Name Of Registered Owner ANG BENG HUAT
NRIC No S1656250E

Email Address ABHTWB@SINGNET.COM.SG

Mobile Phone No (LOCAL) +65-94876350
Alternative Phone No OTHERS-94876350

Vehicle Particulars

Manufacturer MAZDA

Model MAZDA3 4DOOR SEDAN 1.5L SP.6EAT

Exact Purpose for which vehicle was being used at

time of accident

TRAVELLING TO WORK

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 SOMPO INSURANCE SINGAPORE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number D17MTPV01006858

Cover Note Number

Driver

Name of Driver ANG BENG HUAT

 NRIC No
 \$1656250E

 Date Of Birth
 17/10/1964

 Occupation
 INDOOR

 Date Of Driving Pass
 06/08/1986

Driving Experience 31 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-94876350

Fax Number

Contact Number OTHERS-94876350

EMail Address ABHTWB@SINGNET.COM.SG

Address 638C PUNGGOL DRIVE #05-459

Postcode 823638

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 - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.
Number of Passengers (Including Driver) 1

Details of Police Action

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

I WAS DRIVING SLD573A ALONG TPE EXITING EXIT 2 TOWARDS LOYANG AVE WHEN GBE5143 GRAZED AGAINST THE LEFT SIDE OF MY VEHICLE.

Attachment(s)

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

Sketch Plan

SKETCH PLAN

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- 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. 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

A

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

Witnessed by Reporting Centre Personnel

Sketch Plan

CERT OF INSURANCE Pg. 1



Sompo Insurance Singapore Pte. Ltd.

50 Railles Place, #05-01/06 Singapore Land Tower, Singapore 048623 Tel. 6461 6555 | Fax. 6221 3302 | Website: www.sompc.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M200903198

Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES,1959 (MALAYSIA)

Cert No./Policy No. : D17MTPV01006858 Insured : ANG BENG HUAT

Motor Car (Registration No.) : SLD573A

: Comprehensive - ExcelDrive PRESTIGE Cover

Policy Commencement Date: 31 MAY 2017 00:00 Policy Expiry Date : 30 MAY 2018 23:59 Maximum Liability (Section I): Market value at time of loss

: \$500 - Section I

(Waived up to S\$1,000 if accident repair is done at ExcelDrive Workshops for the first claim

Voluntary Excess* : N.A

Windscreen Excess* : S\$100.00 - Waived if Repair at ExcelDrive Workshop

: Per Policy Schedule Loss of Use

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

- 2. Any other person who is driving on the Insured's order or with his permission.
- 3. In the event of the death of the insured,
 - a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission
 - to drive had not been withdrawn prior to the death of the insured; and
 b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car 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 Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.27

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue: 02 MAY 2017 15:07

IMPORTANT NOTICE

- Keep the Certificate in your Motor Car;
 Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
 On the sale of the Motor Car or if for any reason the Insurance is terminated during its currency, the Insured 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 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);
 This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name : 11F02709 & FINEXIS ADVISORY PTE LTD CI Code: 22A _3JADLOO4KLMB0_A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1656250E







ANG BENG HUAT

洪 敏 发 Paco CHINESE

CHINESE
Date of Birth
17-10-1964
Country of Birth
SINGAPORE

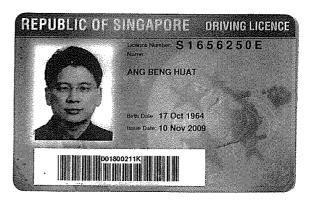


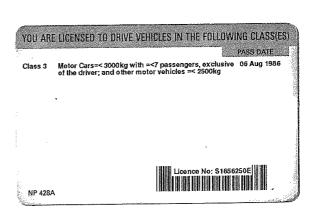
Pic No. S1656250E

Blood Group Date of tassee
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APT BLK 638C PUNGGOL DRIVE #05-459
SINGAPORE 823638
NRIG No: S1656250E Date: 07-04-2005 No: 5127463

DRIVING LICENSE Pg. 1





Common Statement

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Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

















Addendum Sheet

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
Original Report No :	MGE 117125092 Vehicle Registration No : SDL 573 A
Name(as shown in NRIC):	LIM BAD ZHI
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No:	
Address:	638C Ruggal Drive #05-459 \$ 823638
Contact (Tel):	
	ABHTINB @ SINGNET COM SG
	20 9 17 Time of Accident : 09 : 20
	Along TPE Exit 2 towards Laylang Ave
Insurance Company:	Sompo Insurance Singapore Ple 14d
TOTAL INDIVISION ID	amend from 3DL573 A to 34D 573A
Signature of Vehicle Owner /	Driver Driver
Date:	5 10 17

10 Anson Road #06-16 International Plaza Singapore 079903 Phone : + 65 6224 0010 Fax : +65 6224 0030 Operating Hours : Monday to Friday 9am to 5pm