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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 truthful and accurate as possible. Any wiful 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.

DEMONSTRATION OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	19/04/2018 18:39
Date Of Accident	18/04/2018 13:00
Exact Location Of Accident	PEI HWA AVE 1 CARPARK(CLOSE TO PEI HWA PRI SCHOOL)
Country/State of Loss	SINGAPORE
used the lander of strathers of the	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJK1579P
Insured/Policyholder	
Name Of Registered Owner	LIU LIHUI
NRIC No	S7161866H
Email Address	NHSLL@NUS.EDU.SG
Mobile Phone No	(LOCAL) +65-98324607
Alternative Phone No	OTHERS-98324607
Vehicle Particulars	
Manufacturer	NISSAN
Model	SUNNY
Exact Purpose for which vehicle was being used at time of accident	PICK UP KIDS
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MU010539
Cover Note Number	
Driver	
Name of Driver	LIU LIHUI
NRIC No	S7161866H
Date Of Birth	27/10/1971
Occupation	INDOOR
Date Of Driving Pass	29/04/2016
Driving Experience	1 YEAR AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98324607
Fax Number	
What is not a real with the composition	Transport of the section of the sect

OTHERS-98324607

NHSLL@NUS.EDU.SG

Address

29A WEST COAST PARK

#11-15

Postcode

127723

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 - OPENING DOOR OF VEHICLE

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?

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)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

CLEMENTI N.P.C

Police Station Address

ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT D/20180419/2024

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

SKH3087H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

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 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.
- 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.
- 7. 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:
 - (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.

Palicyholder's Signature
Date & Time:

19/4/w/B

4122/m

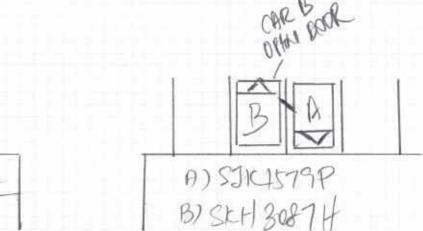
lia lihar

(If driver is not the policyholder)

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

NRIC/FIN Na ::

PACI HWA BUK I CARPORK



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DECLARATION

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

liu lihui

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

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





SJK

Report No. D/20180419/2024

POLICE REPORT (NP299)

Police Station Of Origin Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

Date/Time Report Made 19/04/2018 13:13	Vide Repo	rt No.	a ^{ea} m	Station Diary No. 52	
Name Of Informant	Address 29A WEST COAST PARK #11-15 SINGAPORE 127723				
ID Type / ID No. NRIC NO / S7161866H	Contact No. Home/Office		Mobile 98324607	8	
Nationality SINGAPORE CITIZEN	Email Address				
Occupation	Sex Female	Age 46	Date of Birth 27/10/1971	Race Chinese	
TEACHER Institution/School Name	Language				
Date/Time Of Incident 18/04/2018 13:00	Location Of Incident 7 PEI WAH AVENUE PEI HWA PRESBY PRIMARY SCHOOL* SINGAPORE 597610 Open Carpark outside Pei Hwa Primary School				

Brief details.

Mar City On 18/4/2018 at about 1302 hours, I parked my vehicle, bearing plate number SGK1579P at the open carpark outside Pei Hwa Primary School. I was in the vehicle. Subsequently, a driver of vehicle, bearing plate number SKH3087H, which was parked on the left of my vehicle, opened his driver door and hit onto the left front passenger door of my car. I made a check and saw some small scratches and a dent on the said door. I approached the driver regarding the matter and he claimed that he did not cause such damage. After further discussion, the driver insisted that he did not cause the damage and left the

Signature Of Officer Recording The Report:	Signature Of Informant:
D / Sgt 2 MUHAMMAD AIZAT BIN AMIR	Lin Limi
Signature Of Interpreter: Not applicable	Date/Time: 19/04/2018 13:13
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp ADIB RIDZUAN BIN MOHAMAD ROSLAN Contact No.: 67740000	Classification Of Case:

Authentication Stamp







Signature Of Informant:

Classification Of Case:

Date/Time:

19/04/2018 13:13

Cla Lithui

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20180419/2024

location. I am lodging this police report mainly for insurance claim purpose. I am unsure of the cost needed to repair the damage.

Signature Of Officer Recording The Report:

D / Sgt 2 MUHAMMAD AIZAT BIN AMIR

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp ADIB RIDZUAN BIN MOHAMAD ROSLAN Contact No.: 67740000

Authentication Stamp

SINGAPURE POLICE FORCE

SIGNATURE

ACCIDENT STATEMENT

ACCIDEN	NT DATE: 18	4 2018 10	D/MM/YYYY),	TIME:	02pmHH:MM]
LOCATIO	N: Pei	Hwa An	e / Ca	Park	(Pei Hwa
d	ETAILS OF VEHICLE VEHICLE NUMBE INSURANCE CO	ER:SU MPANY:TOA	alaman de la companya della companya de la companya de la companya della companya		rance
f)	POLICY NUMBER POLICY TYPE: (C) MAKE & MODEL TYPE: (SALOON /) VEHICLE GATEG PURPOSE OF USI ARE YOU CLAIM!! IF NO, PLEASE STA	COUPE / MPV / ORY: (PRIVATE / NG AT ACCIDE NG UNDER YOU ATE (THEOPERE	VAN / LORRY COMMERCIANT TIME: P OWN INSURA	MOTORCYCL MOTORCYCL MOTORCYCL MOTORCYC MICK WA	E/OTHERS) CLE ds
A b	NSURED / POLICY)NAME:)NRIC/FIN/PASSP)ADDRESS:	ORT: 57/1	Botann	CONTACT:_ West Coo	98329607 127723
(Including driver) b	CONTINUE TO 3.4 RIVER NAME:	10 21HV	1806H		98324607 Fark
6 f) 4, v	DATE OF BIRTH: JOCCUPATION: JOTÉ DE DRIVIN VAS DRIVER AN F NO, RELATION) WEATHER CONT	INDOOR / OUT IG . PASS EMPLOYEE OF SHIP OF THE !	THE INSURE	0/6 D'S COMPANY INSURED:	TO CYES TO WALLE
6. W 7. a) ROAD SURFACE / AS ANYBODY IN) REPORTED TO PO IF YES, PLEASE ST	JURED (YES / NO DLICE (YES / NO ATE WHICH POL	OTHERS D) LICE STATION:	CLRMAN	11 NPC
the of passenger of	DRIVER'S NAM	BER: SKH 3	087 H	MODEL: 7	y67A
() 9, TI	D) NRIC/FIN/PAS HIRD PARTY VEHIC H) VEHICLE NUM	CLE		_MODEL:	Esis
	DEIVER'S NAM	vte:		_CONTACT:_	
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	- 1	email =	nhsll	@ nus.e	du sg

yax =

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7161866H





LIU LIHUI

刘 丽



CHINESE Date of birth 27-10-1971 Country/Frace of birth CHINA



REPUBLIC OF SINGAPORE - DRIVING LICENCE



S7161866H

LIU LIHUI

Bran Date: 27 Oct 1971 www.Dute. 29 Apr 2016



5286271





Date of lasue 26-03-2014

29A WEST COAST PARK #11-15 SINGAPORE 127723

NRIC No: \$7161866H

Date: 01/10/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

Class 3A Motor cars without clut weight =< 3000kg with the standard as Apr 2016 with unladen weight =< 2500kg





NP 428A

Tokio Marine Insurance Singapore Ltd.

Company Rose No. 192300014Mcross FReq No. M2-0000323-1

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 € tmis #toksomarine.com.sg № www.toklomerine.com

Lower Marrier Group

SQ2 94 99 Certificate of Insurance

TOKIOMARINE INSURANCE GROUP

Box 4 March

News / Wall

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)

Policy No.: MU010539 (Private Car)

 Index Mark and Registration Number of Vehicle

SJK 1579P

Chassis No.: JN1CFAN16Z0114140

2. Name of Policyholder

LIU LIHUI

3. Effective date of the Commencement of Insurance for the purposes of the Act

09/10/2017 (00:00:00)

4. Date of Expiry of Insurance

08/10/2018

5. Persons or Class 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 Mofor 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 regulated under the Road Traffic Act and its registration.

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, speed-testing or 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

* Limitations rendered moderative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 1891 and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under those headings.

We hereby cartify that the Policy to which this Carolicate relates is issued in accordance with the provision of the Motor Vehicles. (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the

Please refer to the Poticy Schedule for full details, terms and conditions of the insutance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whetspeed teason, you must return the Certificate to Tokio. Manne Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation). Act (Chapter 189)

ADDITIONAL INFORMATION

Third Party

Insurance Plan: Financial Interest:

NIL

Account No: 2715DDB

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

User ID: 2716006

Page 1

Printed: 28-09-2017 13:55:54