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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.
- 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

foresaid.	ACCIDENT STATEMENT	
THE STATE OF THE PARTY OF THE P	07/05/2018 13:42	
Date Of Report	04/05/2018 13:50	
Date Of Accident	PIE (TWDS UPP SERANGOON RD CTE ANG MO KIO)	
Exact Location Of Accident	SINGAPORE	
Country/State of Loss	DETAILS OF OWN VEHICLE	被服务
· 克勒斯特克斯特斯· 加斯· 2019年11月1日 - 1019年11日 - 1019日	SJK5338S	
Vehicle Registration Number	33/03300	
Insured/Policyholder	MICRO CREDIT (CAR LEASING) PTE LTD	
Name Of Registered Owner	200910504E	
Co Reg No	GUANXIANG91@HOTMAIL.COM	
Email Address		
Mobile Phone No	(LOCAL) +65-81332996 OFFICE-81332996	
Alternative Phone No	OFFICE-01332990	
Vehicle Particulars		
Manufacturer	HONDA	
Model	(報) (2)	
Exact Purpose for which vehicle was being used time of accident	PRIVATE USE	
Are you claiming under your own insurance policy for repair to your vehicle?		
If No, Please state action to be taken	THIRD PARTY	
Vehicle Category	PRIVATE HIRE	
Insurance Company		
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD	
Type Of Coverage	THIRD PARTY	
Fleet Policy	NO	
Policy Number	5091277285-01	
Cover Note Number		
Driver		
Name of Driver	TAN GUAN XIANG, GARY	
NRIC No	S9130882G	
Date Of Birth	02/09/1991	
Occupation	INDOOR	
Date Of Driving Pass	26/01/2017	
	1 YEAR AND 3 MONTHS	
Driving Experience	MALE	
Gender Mobile Number	(LOCAL) +65-81332996	
Fax Number Contact Number	OTHERS-81332996	
EMail Address	GUANXIANG91@HOTMAIL.COM	
Cividit Address		Page 1 of

BLK 511 PASIR RIS STREET 52 Address

#04-125

NO

510511 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

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?

YES Was any other material or property damaged?

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. 1

Number of Passengers (Including Driver)

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

SLM5468R

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

YAP YOU JIN, EUGENE Name of Driver

S8530825D NRIC/Passport Number 96463941 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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 insurers) 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: Oriver's Signature (If driver is not the policyholder) Date & Time:

NRIC/EIN NO

Réporting Centre Personnel's Signature

PIE (Towards Upp Serangoun Rd, CTE (Ang Mo Kio) SKETCH PLAN A) SUK5338S B 1 SLM 5468 R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

ging particulars are true in every respect.

Policyholder Date & Time:

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

Name NRIC/FIN No .:



Enquire Vehicle Registration Details

Owner Particulars	
NRIC/Passport/Company Cert No.:	200910504E
Owner ID Type:	Company
Owner Name:	MICRO CREDIT (CAR LEASING) PTE. LTD.
Registered Address:	
101 KITCHENER ROAD #03-03 JALA	N BESAR PLAZA SINGAPORE 208511
Mailing Address:	
Birth Date:	
Vehicle Particulars	
Vehicle No.:	SJK5338S
Previous Vehicle No.:	
Effective Date of Ownership:	23 Feb 2018
Original Regn Date:	24 Oct 2008
Registration Date:	24 Oct 2008
Year of Manufacture:	2008
	Private Hire (Chauffeur) Motor Car

Vehicle Type:		
Vehicle Scheme:		
Vehicle Attachment 1:	No Attachment	
Vehicle Attachment 2:	26	
Vehicle Attachment 3:	5	
Vehicle Make:	HONDA	
Vehicle Model:	FIT 1.3G A	
Primary Colour:	Yellow	
Secondary Colour:	25	
Passenger Capacity:	4	
Chassis No.:	GE61074058	
Engine No.:	L13A4082953	
Engine Capacity / Power Rating:	1339 cc/-	
Maximum Power Output:	73.0 kW (97 bhp)	
Propellant:	Petrol	
Max Unladen Weight:	1010 kg	
Maximum Laden Weight:	1285 kg	
Open Market Value:	\$11,830.00	

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

23 Oct 2018

Minimum PARF Benefit:

\$5,296.00

No. of Transfers:

4

IU Label No.:

1025858143

COE No.:

2008110101002975C

COE Expiry Date:

23 Oct 2018

COE Category:

A - Car (1600cc & below)

COE Registration Category:

A - Car (1600cc & below)

Quota Premium (QP) / Prevailing

Quota Premium:

\$10,989.00/-

Actual QP Paid:

\$8,725.00

QP (Regn Cat):

\$10,989.00

OPC Cash Rebate Eligibility:

No

QP during COE Bidding Exercise:

\$10,989.00

Additional Registration Fee Rate:

100.00%

Actual ARF Paid:

\$10,592.00

Vehicle Lifespan Expiry Date:

No Lifespan

CO2 Emission:					
CO Emission:		(4)			
HC Emission:					
NOx Emission:					
PM Emission:		*			
Message:					
	0	Describer payable is that	of Category A. Yo	ou are required	to affix

To renew the COE, the Prevailing Quota Premium payable is that of Category A. You are required to affix a pair of PHC decals on your vehicle windscreens at Authorised Inspection Centres within 3 calendar days, regardless of usage. The vehicle cannot be converted out until the decals have been affixed. This is a public service vehicle.

ACCIDENT STATEMENT

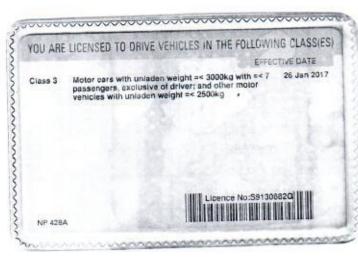
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	7. a	IREPORTED TO	POLICE (YES	100				W
		IF YES, PLEASE	E STATE WHICH	H POLICE ST.	ATION:			
97431	8. TF	HIRD PARTY VI	EHICLE	1220.000		Mint	ALL MATT	e 4(1
the of person	igar c) VEHICLE N	NUMBER: SLY	n 54681	KM	DDEL: NISS	tu K 11	VI.L
. With the st	1-1-1 L	D) DRIVER'S I	NAME: YAP	115 not	1 , EUGE	ONITACT: 9	146 214	1
2	(S) NKIO/FIN/	LASSECKI.	385 30 8	25 0	ONIACI	310	
****	9. Th	HIRD PARTY V	ehicle iumber:		M	ODEL:		5.50
fign of part	2,147=-	DEIVERS	NAME:		,010			-
the transfer of	determine	NRIC/FIN/	PASSPORT:	Section of the Section	c	ONTACT:		
· Y		p consissent order	(G		17.00			
7. 144.4						71		
		38					î	74
					100		W 80	

Chail = guan xiang 91 G hotmail · com











Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAI MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 19	TER 189) 60
ROAD TRANSPORT ACT, 1987 (MALAYSIA)	
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)	

Cover : Third Party Certificate Number: 5091277285-01

Index mark and Registration Number of Vehicle

: SJK5338S

Chassis Number

: GE61074058

: MICRO CREDIT (CAR LEASING) PTE LTD

2. Name of Policyholder 3. Effective Date of Insurance

: 21 Feb 2018

4. Expiry Date of Insurance

: 20 Feb 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

: N/A
: S\$1,500
; N/A
; N/A
: NO
: N/A
: NO
: N/A

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)

Agency

: HOBBES INSURANCE AGENCY (00000572363)

Date of Issue

: 15 Dec 2017 16:41 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech			1-1459						Gener	alClaim
Hello, NAC_BUKIT_MERAH	_800676		1000		SUSPENSE OF STREET	Contract Con	Change Lar	nguage	· Change Password	Log Out
My Desktop	Poli	cy Query								,
Notice of Loss	Policy f	No.				Date of Ac	cident	04/05	5/2018 13:50	
	Vehicle	Na. (For Motor)	SJK53385							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	ė	5091277285-01	MICRO CREDIT (CAR LEASING) PTE LTD	200910504E	GFT	Third Party	S3K5338S	SJK53385	21/02/2018	
					-	Continue				

Policy No.	5091277285-01	Policyholder	MICRO CRI	EDIT (CAR LEASING)	Policyholder NRIC	200910504E	
Address	101 KITCHENER ROAD #03-03	Name IALAN BESAR	PLAZA SING	APORE 208511			
roduct	FLEET INSURANCE	Plan			Group Policy Flag	N	
lame		Effective	29/12/201	7 00:00	Expiry Date	28/12/2018 2	3:59
ssue Date excess	15/12/2017	Date All Claim Excess	23/16/44	7 00100	autoricaseo		
Third Party Excess	1500	Own damage Excess	0		Windscreen Excess	0	
dditional	0	OS Premium	5398.36				
outside Singapore OD Excess	0	Outside Singapore TP Excess	1500			Young	g/Inexperience Driver Excess
Agent	HOBBES INSURANCE AGENCY	Agent Tel.	97919911		GST Flag	Υ	
Co- insurance Flag Open Policy Info Certificate Info	No						
O Policy	holder Mailing Address					Addrone 2	SINGAPORE 208511
Address 1	101 KITCHENER ROAD	Add	ress 2	#03-03 JALAN BES	AR PLAZA	Address 3	208511
Address 4			ress Type	Singapore address		Post Code	200311
Unit No.	12-14		nted Policy ober	5099317142			
1 Insur	ed Object: SJK5338S						
⊕ Endor	rsements						Endorsement Content
Seque	Date of Endorsement 17/01/2018 00:00	Basic Inforr Endorseme		Endorsement Numb	71 971000	ment Take	Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SICSS42K 17-01-2018 \$ 915.41 2. SLJ4518C 17-01-2018 \$ 915.41 3. SLL5631R 17-01-2018 \$ 915.41 4. SJY7152Z 17-01-2018 \$ 1,002.13 5. SLN5464 17-01-2018 \$1,002.13 In view of this amendment, a refund of \$4,750.49 (inclusive of GST) will be adjusted against the outstanding premium.
2	30/01/2018 00:00	Basic Infor Endorseme		000001286746213	Endorse Effectiv	ement Take e	opportunity to serve you. We confirm that the following vehicle(: has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PEMIUM (INCL GST) 1. SJB9164Y 25-01-2018 \$894.25 1. view of the amendment, a refund of \$1,788.5 (inclusive of GST) will be adjusted against the outstanding premium.
3	22/02/2018 00:00	Basic Info Endorsem		000001286760777	Endor: Effecti	sement Take ve	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJK5338S 21-02-2018 \$822.81 In view of this amendme an additional premium of \$822.81 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it you could make payment to us within 14 days from the date of the letter. For cheque payment, pleas issue the cheque in favour of "NT Income" with your name and polinumber indicated on the reverse the cheque. Alternatively, you coalso make payment at any of our branches by cash or NETS.

Claim Handling

Antinu No.	5091277285-01	Vehicle No.	SJK5338S	GST Registration No.	
Policy No.	MICRO CREDIT (CAR LEASING) PTE LTD		CONTROL SECTION SECTIO	Policyholder NRIC	200
Policyholder Name		Cover Type	Third Party	Loading	0
Product Code	FLEET INSURANCE		11112	Contact No.(Home)	
Contact No.(Mobile)	81332996	Contact No.(Office)		eCode	No
Email Address	GUANXIANG91@HOTMAIL.COM	Special Remark	- No Vos	eCode Reason	
KFK	No Yes	TCA	+ No Yes	Private Hire	Yes
NCD Protection	No.	NCD Entitlement(%)	0	Private tine	
→ Accident Details				-te.ng26921193	-
Report Date	07/05/2018 14:25	Accident Report Within 24 hrs	Yes	Accident Type	Co
Date of Accident	04/05/2018	Time of Accident hh:mm	13:50	Country of Accident	Sir
Reporting Centre	administrator	Orange Force	Yes	ICM No.	34
Accident Location	PIE (TWDS UPP SERANGOON RD CTE ANG	MO KIO)			
▽ Benefits					
▽ Excess					
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.0
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
GST Registered Informa	1000		GST Registration Date		
GST Registered	No		GST Status Verified	Yes	
GST Registration No.					
Modification History					
	dress				
	101 KITCHENER ROAD	Address 2	#03-03 JALAN BESAR PLAZA	Address 3	5
Address 1	TOT KITCHENER ROAD	Address Type	Singapore address	Post Code	2
Address 4		Related Policy Number	5099317142		
Unit No.	12-14		Walter Co.		
▽ OI Driver Info	201 125	Driver Type	Unnamed Driver		
Driver Name	Unnamed Driver	Driver Type	59130882G	Driver DOB	0
Unnamed driver Name	TAN GUAN XIANG, GARY	Driver NRIC		Driving Experience	1
Register Date of Driver License	26/01/2017	Driver Age	26	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)	STREET, STREET	Address 3	S
Address 1	BLK 511 #04-125	Address 2	PASIR RIS STREET 52		5
Address 4		Address Type	Singapore address	Post Code	-
Unit No.	04-125				
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.		Driver Insurer Company	
Declaration			HOUSE WHO		
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No		
Modification History					
The state of the state of					
Claim 002 OD-MX Ner	w				
	_				
25/2000 <u>2</u> 7/2000	OD-MX T	Insured Name	MICRO CREDIT (CAR LEASING)	Insured NRIC	E
Claim Type *	OD-MX	Contact No.(Home)		Contact No.(Office)	Ī
Contact No.(Mobile)			S)K5338S	TP Vehicle Number	5
Email Address		OI Vehicle Number	2/1/2303	Name of Preferred Workshop	Ī
Claim Description	SJK5338S / SLM5468R ON 4 May 2018	PARELY SEW DISSOURCE	-1		-
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault		r
Require Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknown Y	GIA report	-
	08/05/2018 10:03	Claim Close Date		Date Received	1
Date Registered	E-11-TOV-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T		0)	Total Loss but Repaired	
Date Registered	VOISHNASAMY	Workshop Repairer		Total adds -	
Date Registered Report Taken By	KRISHNASAMY	Workshop Repairer		Total and Table	

Attachment

http://giclaim.income.com.sg/gcs/icm/eclaim/claimantSave.do?stype=1&saction=&odOrTp=1&isWorkshop=®Check=1&taskInstanceId=0&taskId=0&objectId=2id=0.

Claim No.

Accident No.	MT/0993228	Claim No	is in	002			
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	List						
Attachment	Upload	ded By/Date	Category	9	Urgency		Descrip
C 8200	NAC_PAYA_UBI_800601(NATIONAL May 2	ASSESSMENT CENTRE SERVICES) on 08 018 10:01	NRIC/ Driving Li	cense	Normal		NRIC/ Driving Lic
10	NAC_PAYA_UBI_600601(NATIONAL May	ASSESSMENT CENTRE SERVICES) on 08 018 09:59	SAS		Normal		SAS 201
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	NAC_PAYA_UB1_800601{ NATIONAL May	. ASSESSMENT CENTRE SERVICES) on 08 2018 09:59	Photos		Normal		Photos 20
20	NAC_PAYA_UBI_800601(NATIONA May	L ASSESSMENT CENTRE SERVICES) on 08 2018 09:59	Photos		Normal		Photos 20
	NAC_PAYA_UB]_800501(NATIONA May	L ASSESSMENT CENTRE SERVICES) on 08 2018 09:59	Photos		Normal		Photos 20
3	NAC_PAYA_UBI_800601(NATIONA May	L ASSESSMENT CENTRE SERVICES) on 08 2018 09:59	Photos		Normal		Photos 2
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44	NAC_PAYA_UBI_BDD501(NATIONA May	L ASSESSMENT CENTRE SERVICES) on 08 2018 09:58	Photos		Normal		Photos 2
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