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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 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.

| | ACCIDENT STATEMENT |
|--|--|
| Date Of Report | 17/05/2018 18:30 |
| Date Of Accident | 04/05/2018 10:00 |
| Exact Location Of Accident | ALONG TELOK BLANGAH CRESCENT |
| Country/State of Loss | SINGAPORE |
| | ETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SJK463X |
| Insured/Policyholder | |
| Name Of Registered Owner | STRATA PAK BOXES (S) PTE LTD |
| Co Reg No | 200009203G |
| Email Address | STRATAPAKBOX1038@GMAIL.OM |
| Mobile Phone No | (LOCAL) +65-97979354 |
| Alternative Phone No | OFFICE-97979354 |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | COROLLA ALTIS-1.6 (A) |
| 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 | REPORTING ONLY |
| Vehicle Category | PRIVATE HIRE |
| Insurance Company | |
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5094276440 |
| Cover Note Number | |
| Driver | |

Driver

Name of Driver CHUA CHYE HUAT

 NRIC No
 S0229656Z

 Date Of Birth
 12/09/1950

 Occupation
 OUTDOOR

 Date Of Driving Pass
 30/05/1968

Driving Experience 49 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97979354

Fax Number

Contact Number OTHERS-97979354

EMail Address STRATAPAKBOX1038@GMAIL.OM

Address

BLK 33 TELOK BLANGAH WAY

#11-1038

Postcode

090033

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?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

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)

1

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

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

SGS6326M

Vehicle Make/Model/Colour

TOYOTA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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: Driver's Signature

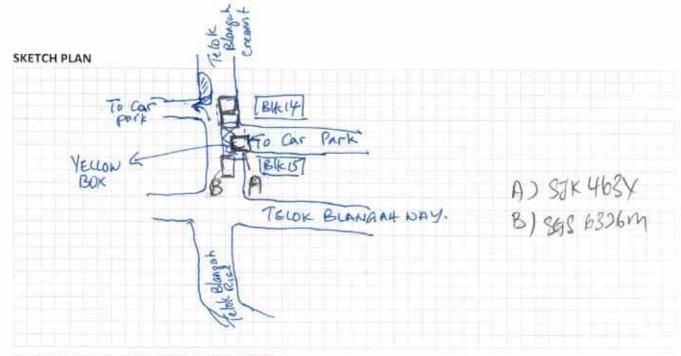
(If driver is not the policyholder)

Date & Time:

Reporting Centro Personnel's Signature

Name:

NRIC/FIN No.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

05 2018 about 10 am I was dusoing my can st Car Park along Telok Blangah Cresent pedestrian Trallie Light TWO behille one was Was pick-up was a cas thad STOP Control Ded. In brood was YELLOW BOX which was truing drive my car while to driven by another River SAS 6326 M brake to let him SAUCEZE PASS ME me am his one the little time Later Jam his again to stop prabe again. Car bumper touches nia that and SAId 1 told him he want to call car I will stay the police arrived, put and ward till means. photos side bumper and also my 000 order Inease he make a report pumper ctain told him that bin NSWance Policu jaming your car brake swural manner is very dangerows. Ark LOW to cause distaine about less than 25 km XOC 15

DECLARATION

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

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

Reporting Centre Personnel's Signature/ Name: WAD / WHOTO

NRIC/FIN No

Policyholder's Signature Date & Time:

Photoe

Normal

Photos 2018-9-17

Photos 2018-5-17

History 2018-5-17

Edit.

Edit

Edit

NAC_BUNIT_MERAH_800676; NATIONAL ASSESSMENT CENTRE SERVICES (B URIT MERAH)) on 17 May 2018 1E-28

NAC_BLIKET_MERAM_H00676; NATIONAL ASSESSMENT CENTRE SERVICES (B. ORET MERAM)) on 17 May 2016 18-28

NAC_BURIT_MERAH_800676| NATIONAL ASSESSMENT CENTRE SERVICES (B.

URT! MERAH)) on 17 May 2018 18-28

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BUSINESS PROFILE



REQUEST CRITERIA

(You have requested to search on the following)

Date of Request:

06/06/2017

Name of Requestor:

DP INFORMATION NETWORK PTE LTD (BUREAU)

Requested Entity Name:

STRATA PAK BOXES (S) PTE LTD

Requested Entity Number:

200009203G

SEARCH RECORD

Entity Name:

1) STRATA PAK BOXES (S) PTE LTD

2) ADVANCED FUNERAL PRODUCTS (S) PTE LTD

Entity Number:

200009203G

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY BUSINESS PROFILE (COMPANY) ACRA

WHILST EVERY ENDEAVOUR IS MADE TO ENSURE THAT THE INFORMATION PROVIDED IS UPDATED & CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

DETAILS OF COMPANY

Entity Name:

STRATA PAK BOXES (S) PTE LTD

Entity Number:

200009203G

Date Of Registration (dd/mm/yyyy):

28/10/2000

Country Of Incorporation:

SINGAPORE

Date Of Change Of Name:

28/01/2002 ADVANCED FUNERAL PRODUCTS (S) PTE LTD (28/10/2000)

1) Former Name (Effective Date):

EXEMPT PRIVATE COMPANY LIMITED BY SHARES

Type Of Company: Registered Office Address:

33 TELOK BLANGAH WAY

#11-1038

SINGAPORE 090033

Date Of Change Of Address:

27/02/2016

Principal Activity / Activities:

1)MANUFACTURE OF CORRUGATED PAPER AND PAPERBOARD

(17021) SUPPLIER FOR PAPER BOXES, CARTON BOXES, PALLETS

AND PACKAGING MATERIAL

2)PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR

HIRE WITH OPERATOR AND TRISHAWS) (49219)

Status:

LIVE COMPANY

Status Date:

28/10/2000

CAPITAL STRUCTURE

| Capital Structure: | No. Of Shares | Currency | Amount |
|--------------------|---------------|--------------------|-----------|
| ISSUED ORDINARY | 70,000.00 | SINGAPORE, DOLLARS | 70,000.00 |
| PAID-UP-ORDINARY | ±0 | SINGAPORE, DOLLARS | 70,000.00 |

Note: The number of shares is displayed up to two decimal points.

CHARGE(S)

AUDITOR(S)

Name Date Of Appointment

OFFICER(S) / AUTHORISED REPRESENTATIVE(S)

| Name ID | Address Date Of Change Of Address | Nationality | Date Of Appointment/ Position Held |
|-----------------------------|--|----------------------|---------------------------------------|
| LOH MEOW CHENG 50094483A | 33 TELOK BLANGAH WAY #11-1038 SINGAPORE 090033 22/03/2016 | SINGAPORE | 05/08/2014 SECRETARY |
| CHUA CHYE HUAT S0229656Z | 33 TELOK BLANGAH WAY #11-1038 SINGAPORE 090033 22/03/2016 | SINGAPORE CITIZEN | 24/01/2002 DIRECTOR |

SHAREHOLDER(S)

(Entity Numbers Prefixed with UF Or ACRA are Numbers allotted by ACRA for Purposed of Identification.)

| Name ID | Nationality | Address Date Of Change Of Address |
|-----------------------------|-------------------|--|
| LOH MEOW CHENG S0094483A | SINGAPORE CITIZEN | 33 TELOK BLANGAH WAY #11-1038 SINGAPORE 090033 22/03/2016 |
| Type. | No Of Shares | Currency |
| ORDINARY | 1.00 | SINGAPORE, DOLLARS |
| Name ID | Nationality | Address Date Of Change Of Address |
| CHUA CHYE HUAT S0229656Z | SINGAPORE CITIZEN | 33 TELOK BLANGAH WAY #11-1038 SINGAPORE 090033 22/03/2016 |
| Туре | No Of Shares | Currency |
| ORDINARY | 69,999.00 | SINGAPORE, DOLLARS |

Note: The number of shares is displayed up to two decimal points.

COMPLIANCE RECORD

| Date Of Last AGM: | 27/06/2016 | |
|-------------------------------|------------|--|
| Date Of Last AR: | 08/07/2016 | |
| Date Of A/C Laid At Last AGM: | 31/12/2015 | |

THE ABOVE INFORMATION IS UPDATED TO 01 DAY FROM 06/06/2017
PLEASE NOTE THAT THE INFORMATION HEREIN CONTAINED IS EXTRACTED FROM FORMS FILED WITH THE AUTHORITY

THIS REPORT MUST NOT BE COMMUNICATED TO THE PERSON/S OR FIRM/S REPORTED ON, OR TO ANY OTHER PARTY. It is furnished by DP Information Network Pte Ltd (UEN 198302653E) ("DP Info") in STRICT CONFIDENCE at your request for your exclusive use. In accepting this report you hereby agree to be responsible for all damages arising from a violation or breach of the above confidentiality obligation. This report is not intended to be used as the sole basis for any business decision and is based upon data which is provided by third parties, the accuracy or completeness of which



Our Ref: MT/CA/TP/001/0993353-001/JLY/VU

08 May 2018

STRATA PAK BOXES (S) PTE LTD BLK 33 #11-1038 TELOK BLANGAH WAY SINGAPORE 090033

Dear Policyholder

CLAIM NUMBER: MT/0993353 001

ACCIDENT INVOLVING SJK463X / SGS6326M on 4 May 2018

We would like to inform you that a claim has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

S/S

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely

Goh Peng Hong

Manager

Motor Insurance

NTUC Income Insurance Co-operative Limited

Income Centre 75 Bras Basiah Road Singapore 189557 + Tel: 6788 1777 + Fax: 6339 1500 + Email: esquery@income.com.sg + Website: www.income.com.sg

an NTUC Social Enterprise 🚥

ACCIDENT STATEMENT

| | LOCATION: Pelole Blengah Gresent. | TIME: (COM (HH:MM) |
|---|--|---|
| | 1. DETAILS OF VEHICLE QIVERICLE NUMBER: STE 463 X B)INSURANCE COMPANY: IN UM 6 C)POLICY NUMBER: SO 9 42 76 44 0 d)POLICY TYPE (COMPREHENSIVE) THIRD PART B)MAKE & MODEL: TO 407A ACCOMMENCIA f)TYPE (SALOON) COUPE / MPV /V AN / LORRY g) VEHICLE CATEGORY: (PRIVATE / COMMERCIA h)PURPOSE OF USING AT ACCIDENT TIME: DICE i) ARE YOU CLAIMING UNDER YOUR OWN INSUR IF NO. PLEASE STATE (THIRD PARTY CLAIM / REF | AL / MOTORCYCLE / OTHERS) AL / MOTORCYCLE) FOR MY WIFG RANCE (YESMO) |
| Mumber of Passanger Including Devine | 2. INSURED / POLICY HOLDER A)NAME: CHUN CHYE HUNT. b)NRIC/FIN/PASSPORT: SOZZA6S6-Z- c)ADDRESS: BIK 33 # 11-1038 | (MALE) FEMALE)CONTACT: 97979354 |
| | *d)DATE OF BIRTH: (12 / 09 / 1950) (DD/M e)OCCUPATION: (INDOOR OUTDOOR) f)DATE. OF DRIVING PASS :: 1968 4. WAS DRIVER AN EMPLOYEE OF THE INSURE IF NO, RELATIONSHIP OF THE DRIVER WITH 5. a)WEATHER CONDITION: CLEAR RAINING / O | D'S COMPANY? (YES NO) |
| C 1) | b) ROAD SURFACE: DRY WET / OTHERS 6. WAS ANYBODY INJURED (YES NO) 7. DIREPORTED TO POLICE (YES NO) IF YES, PLEASE STATE WHICH POLICE STATION: 8. THIRD PARTY VEHICLE D) VEHICLE NUMBER: SCS 6326M b) DRIVER'S NAME: NA | MODEL: TOYOTA |
| PASSANGER INCLUDING DRIVER NUMBER OF PASSENGER | c) NRIC/FIN/PASSPORT: NA. 9. THIRD PARTY VEHICLE d) VEHICLE NUMBER: e) DRIVER'S NAME: f) NRIC/FIN/PASSPORT: | _CONTACT:N(\(\Lambda\)\\ _CONTACT: |
| INCLUDING DRIVER | | į. |

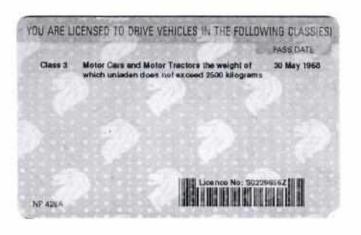
1) EMAIL: stratopakbox 1038@gmail.com.

>) VIDEO !











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)

Cover : drivo CLASSIC Certificate Number: 5094276440

1. Index mark and Registration Number of Vehicle

: SJK463X

Chassis Number

: MR053ZEE206108150

2. Name of Policyholder

: STRATA PAK BOXES (S) PTE LTD

3. Effective Date of Insurance

: 18 Sep 2017

4. Explry Date of Insurance

: 01 Oct 2018

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.

: 552,000 EXCESS (SECTION 1) : \$\$1,500 EXCESS (SECTION 2) : 5\$100 WINDSCREEN EXCESS + N/A ADDITIONAL EXCESS : PLEASE REFER OVERLEAF UNNAMED DRIVER EXCESS : NO REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : NO NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER - N/A PRIMARY DRIVER

: N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY

: MARKET VALUE OF INSURED VEHICLE LESS RESIDUAL COE/PARF SUM INSURED VALUE AT TIME OF LOSS

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)

: REV AUTO PTE LTD (00000571335)

Date of Issue

: 18 Sep 2017 12:54 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive