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 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.	
	ACCIDENT STATEMENT
Date Of Report	17/05/2018 15:09
Date Of Accident	16/05/2018 14:35
Exact Location Of Accident	TPE EXIT PUNGGOL WAY SLIP ROAD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLX7961L
Insured/Policyholder	
Name Of Registered Owner	ALPINE CAR RENTAL PTE LTD
Co Reg No	199003483E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65113023
Vehicle Particulars	
Manufacturer	OPEL
Model	MOKKA-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	RENTAL USE GRAB
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 HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5093613878
Cover Note Number	
Driver	

Name of Driver TAN CHIAH CHOON

NRIC No S7818035H

Date Of Birth 30/06/1978

Occupation OUTDOOR

Date Of Driving Pass 10/11/2009

Driving Experience 8 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96467414

Fax Number
Contact Number

EMail Address GUARDSMAN78@YAHOO.COM

208C PUNGGOL PLACE Address

Postcode 823208

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

Type Of Accident **COLLISION - HEAD TO REAR**

Weather Conditions **RAINING** Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

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 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?

If Yes, against whom?

NO NO

Circumstances of Accident

REFER TO REPORT ATTACHED

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **SJR4474B**

Vehicle Make/Model/Colour MITSUBISHI LANCER

Details Of Properties

PRIVATE CAR Vehicle Category

LYNN Name of Driver

NRIC/Passport Number S6938259B **Contact Number** 98194744

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

KATCH PLAN	5 /
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1) 8	
	6 / 3 6
CHILL FIELD	
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SCRIBE CIRCUMSTANCES OF TH	4E ACCIDENT
^	
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my car fer	ked from I went down and realist
SJR4474B	1 9 1 t to a war but per
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DECLARATION	
(We doctate the foregoing particular	s are true in every respect.
(6)	
L VANSUS	
Policyholder's Signature	Driver's Signature Reporting Centre Personnel's Signature
Date & Time:	(If driver's hot the policyholder) Name:
	Date & Time: PUS 10 1278/Live NRIC/FIN No.:

ARES CONTRACTORS

SKETCH PLAN

OR ANT NOTICE

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- 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:
 - (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.

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

17/5/18

Date & Time:

Punt

reporting Centre Personnel's Signature Name:

NRIC/FIN No.:





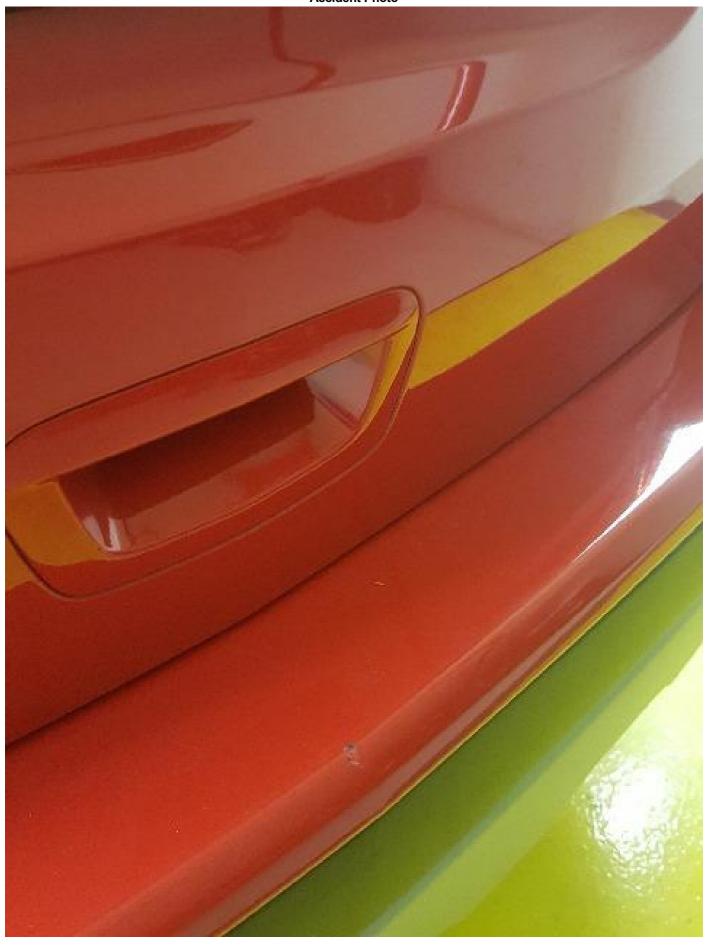




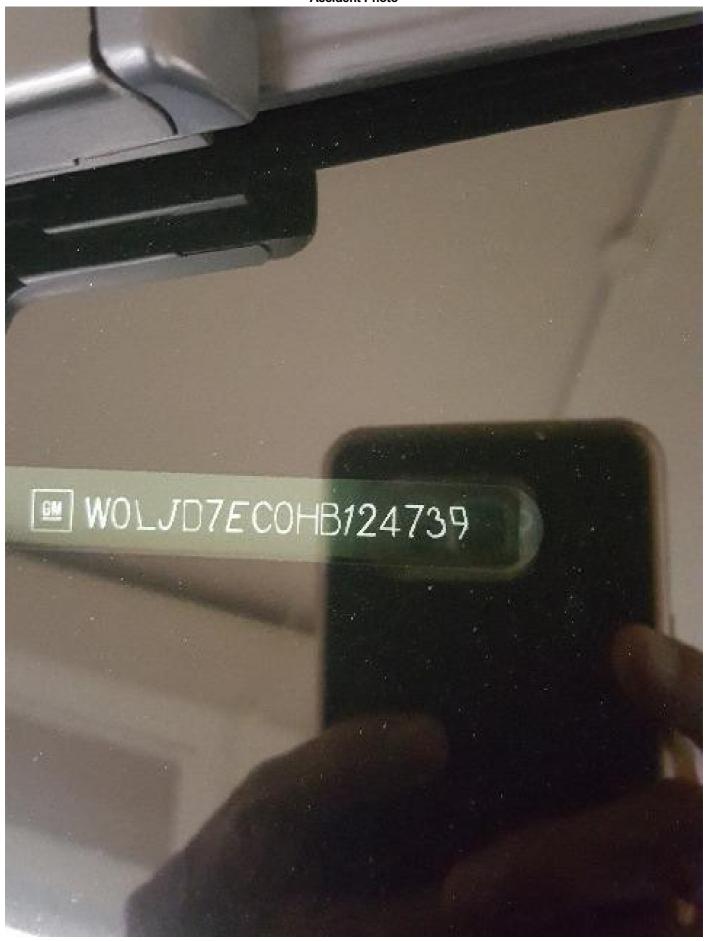














Accident Photo



INSURANCE CERT



Certificate of Insurance

50079610

- 12 Act 2018

: 33 Apr 2019

Cover : orlyo PREMIUM

ALPINE CAK REMI'AL PTE LTD.

W0LID76C0H8124739

MOTUR VEHICLES (THERD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THERD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYEM)

MOTION VEHICUS (THIRD PARTY RISKS) RULES, 1959 [MALAYSIA]

Certificate Number: 5093613878

1. Index mark and Registration Number of Vehicle

Chesis Number

2. Name of Policyholder

Effective Oate of insurance

4. Expiry Date of Insurance

5. Persons or Classes of Persons antitled to drawe

(a) The Folloyholder

(b) Any other person who is driving an the Policyholder's order or with higher permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to these 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 Uses.

(a) Use for social domestic and placeure 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 parriage of goods (other than complet) in connection with any trade or business.
- (c) Use for any surpose in connection with the Motor Trade.

F Umitations rendered insperative by Section 8 of the Motor Voltido (Third Pany Rids and Companishing). Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these handlines.

EXCESS (SECTION 1) : \$51,400
EXCESS (SECTION 2) : \$51,400
WINDSCREEN EXCESS : \$51,00
ADDITIONAL EXCESS : N/A

UNNAMED DRIVER BUCESS : PLEASE REFER OVERLEAF

REPAIR AT CHANCE'S PROFERRED WORKSHOP MES POSCHE WITH COL 1.78% NCO PROTECTION. NO TRANSPORT ALLOWANCE : NO EXCESS WAINER. 1.800 PRIMARY DRIVER 1970 NAMED CRIVER (1) CN/A MAMED DRIVER (2) 10.70 HIRE PURCHASE COMPANY DBS BANK LTD

SUM INSURED MARKET VALUE OF INSURED VEHICLE ATTIME OF LOSS

Whe hereby Certify that the Policy to which this Contribute relative is assured in accordance with the provisions of the Morgo. Vehicles (Third Party Risks and Companisation) Act (Chapter 183) and Part Mof the Road Transport Act, 1987 (Malaysia)

Agency ALPINE CREDIT PTE LTD (0000061,5424)

Date of feme : 21 Aug 2017 12:23 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Driving License

