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SINGAPORE ACCIDENT STATEMENT

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.
- 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.
- 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 contre and to copies of the report being made available

| aforesaid | The second of the second secon | | | | |
|--|--|--|--|--|--|
| MANUFACTURE STATES | ACCIDENT STATEMENT | | | | |
| Date Of Report | 28/05/2018 11:31 | | | | |
| Date Of Accident | 25/05/2018 12:50 | | | | |
| Exact Location Of Accident | PIONEER JUNCTION CARPARK | | | | |
| Country/State of Loss | SINGAPORE | | | | |
| 建加加加加加加加加加 | ETAILS OF OWN VEHICLE | | | | |
| Vehicle Registration Number | GBD1229G | | | | |
| Insured/Policyholder | | | | | |
| Name Of Registered Owner | HENG HENG TRANSPORT SERVICE | | | | |
| Co Reg No | 53260834L | | | | |
| Email Address | NOEMAIL | | | | |
| Mobile Phone No | (LOCAL) +65-96359645 | | | | |
| Alternative Phone No | OFFICE-96359645 | | | | |
| Vehicle Particulars | | | | | |
| Manufacturer | NISSAN | | | | |
| Model | NV350-2.5 D PANEL VAN (M) | | | | |
| Exact Purpose for which vehicle was being used at time of accident | WORKING PURPOSES | | | | |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO | | | | |
| If No Please state action to be taken | THEO DARTY | | | | |

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage

COMPREHENSIVE

Fleet Policy

NO

Policy Number

2100377805-03000

Cover Note Number

Driver

Name of Driver NG KHENG HIN (HUANG QINGXING)

NRIC No S7337418I Date Of Birth 12/10/1973 Occupation OUTDOOR Date Of Driving Pass 18/03/1997

Driving Experience 21 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96359645

Fax Number

Contact Number OTHERS-96359645

EMail Address NOEMAIL Address

BLK 804B KEAT HONG CLOSE

#16-24

Postcode

982801

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

35

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

COLLISION - HEAD ON COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

? NO 2

Number of vehicles involved in the accident

YES

Was any body injured in the Accident?

Was any injured conveyed to hospital by

2000

ambulance?

NO

Was any other material or property damaged?

YES

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(TYPE OF COLLISION IS HEAD TO SIDE)

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

SLN9408H

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

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

NG KHENG HIN (HUANG QINGXING)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts wom?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SLIGHT INJURY

GBD1229G

YES

NO

SKETCH PLAN

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 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.
- 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 aforesald.
- 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)
 - (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;
 - (by) 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/mall 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
- 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:

ttet

- (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) Date & Time:

Reporting Centre Personn

Name:

NRIC/FIN No.:

| SKETCH PLAN | | | |
|-----------------|----------------|----------------------|--|
| | DIDNESS CENTRE | PIONEER JUNETIAN EXT | AND A 1997 A |
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THE STRAME

DECLARATION

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

Policyholder's Signature Date & Time:

The state of the s

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

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

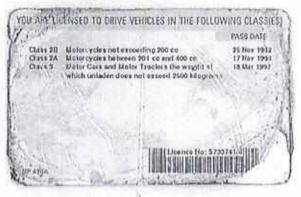
SINGAPORE ACCIDENT STATEMENT

| ACCIDENT DATE: 25 05 2018 | TIME: 12:50 Pm | (hh:num) 24 hrs Format |
|---|--|--|
| LOCATION PLONEER JUNCTION | CAR PARIC | X The state of the |
| | | |
| VEHICLE NUMBER GIBD 1229 G | | - Contract of the contract of |
| INSURED NAME HENG TRANS | CPART SERVICE | |
| NRIC/FIN 53260834L | | : 9635 9645 |
| MAKE WISSAW MODE | EL NV3SD | 1033 1015 |
| Are you claiming under your own insurance police | v for renair to your vehicle | 7 |
| () Yes, If No, Pls Select : () Third Party | () Reporting Only | |
| INSURANCE COMPANY AIG ASIA PACE | | I D |
| TYPE OF POLICY () COMPREHENSIVE | () THIRD PARTY (|) TPFT |
| POLICY NUMBER: 2100377805-030 | 0 | |
| | The same of the sa | |
| NAME DRIVER: NG KHENG HIN | (|) SAME AS INSURED |
| (Huang Qing Xing) | | |
| NRIC/FIN S 7 3374-18/ | CONTACT | : 9635 9645 |
| DATE OF BIRTH: (2 16 1973 | | |
| DRIVING PASS DATE: 18 03 199] | | |
| | OUTDOOR | |
| |) FEMALE | |
| EMAIL ADDRESS: | | (/) NO EMAIL |
| ADDRESS OF DRIVER: APT BIK GU4 R | KENT HONG CLOSE | - The state of the |
| #16-24 SINGINF | DEE 682804. | |
| Number Of Passenger Include Driver: #1 01 | DRIVER ONLY | |
| William Street Street | | |
| Was driver an employee of the Insured's Company | | |
| If No, Relationship Of The Driver With The In | | |
| () Owner () Spouse () Friend () I | Relative () Children (|) Sibling () Others |
| Does The Driver Own Any Other Vehicle? : (| YES (V) NO | |
| If Yes, Vehicle Registration Number Of Driver's (| Own Vehicle: | |
| Insurance Company Of Driver's Own Vehicle | | |
| Weather Conditions: () Clear () Ra | | () Others |
| Road Surface : () Dry () We | | - COMMONITOR OF THE PRINT - CONTROL - |
| Was Any Foreign Vehicle Involved In This Acc | | /) NO |
| Was Anybody Injured In The Accident? (| YES () NO | |
| If YES, Injured details: (1) Alg Kheng His | The state of the s | 579774/8I |
| Convey By Ambulance: () YES () N | | |
| Was There Any Video Capture By Car Camera? | (✓) YES ()NO | |
| Was There Accident Reported To The Police? | () YES (\smile) NO H | Yes Attach Police Report |
| Police Report Number (if any) | | |
| | / NRIC | Contact |
| Veh B SCN 9408H | | |
| Veh C | | |
| Veh D | | |
| Veh E | | |
| Veh F | | |
| Veh G | | |









CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY SISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.300

COMMERCIAL AUTOPLUS

CERTIFICATE NO. 2100377805-03000

(fie bette excess to extect to GST)

OWN DAMAGE EXCESS S\$800.00 WINDSCREEN EXCESS S\$100.00

SUM INSURED Market Value INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

GBD1229G

2) NAME OF INSURED

Heng Heng Transport Service

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

28 Jun 2017

4) DATE OF EXPIRY OF INSURANCE

27 Jun 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE

Any person provided he is in the Insured's employ and is driving on their order or with their permission. A Young and/or inexperienced Driver Excess ("YIDR") of \$\$3,000.00, in additional to the Policy Excess, applies to You and any Authorised Driver (numed or unwanted) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.

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) LIMITATION AS TO USE*

1) Use in connection with the insured's tursiness.
2) Use for the carriage of passenger (other than for hire or reward) in connection with the insured's business.
3) Use for social, domestic or pleasure purpases.
The Pokey does not cover; o) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
b) Use whilst drawing a trailer except the towing of any one disabled mechanically propolled vehicle.

APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAMS-RELATED REPAIRS)

1. Autolulion Industrial - 19 Ubi Rd 4 (T: 84909686) 2. ComfortDelgre Engre - 205 Braddell Rd (Tot: 63837118)

3. DPS Body & Paint - 209 Pandan Gardens (Tot: 65684501) 4. Ethez - 30 Bukit Belok Cres(Tot: 65647777)

5. Glass-Fix - 62 Ubi Ave 3 (Tot: 62780867) - For windscreen only 6. Kan Fook Sing Motor - 51 Defu Lane 12 (Tot: 67470560)

7. Lai Huat (Mang Kee) Motor - 21 Sin Ming Ind (Tot: 64538110) 8. Mova Automotive - 1008 Bukit Marah Lane 3 (Tot: 62723892)

9. Progressive Automotive - 3022A Ubi Rd 1 (Tot: 67415305) 10. SME Motor - 1 Kali Bukit Ave 6 Bik D (Tot: 67476106)

11. Ton Chong Mir - 913 Bit Timph Rd (T: 64694931/2/3) 12. Ton Chong Mir - 17 Lot 8 Toa Phych (T: 83570753/4)

13. TC AutoClinic - No 1 Sixth Lok Yang Rd (T: 62622212) 14. TC AutoClinic - 25 Long Kee Rd (T: 67038511/2/3)

LOSS OF USE Not included

* NAMED DRIVER NA

HIRE FURCHASE COMPANY TAN CHONG CREDIT PTE LTD

/EMPLOYER'S LOAN

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 93 of the Road Transport Act, 1997 (Moleysia), are not to be included under these headings.

17 We hereby Comity that the policy to which this Continuate relates is issued in expendence with the provisions of the Motor Vehicles (Third-Party Baks and Computabilised Act (Chapter 189) and Part IV of the Stood Transport Act, 1987 (Molaysia)

Issued in Singapore 27 Jun 2017

AIG Asia Pacific Insurance Ptc. Ltd.

501632-000 GOH CHIN YUAN BLK 970 TOA PAYOH NORTH 102-24 SINGAPORE 318992 SP · NONLIFE

AUTHORISED REPRESENTATIVE

ORIGINAL

ABINER

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business Owner ID: 0834L

Vehicle Details

Vehicle No.: GBD1229G

Vehicle to be Exported: Yes

Intended De-registration Date: 25 May 2018 NISSAN Vehicle Make:

NV350 PANEL VAN 2.5 5AT 5DR EURO V Vehicle Model:

Primary Colour: Grev Manufacturing Year: 2014

Engine No.: YD25349054A

Chassis No.: JN1MC2E26Z0002100

Maximum Power Output:

\$24,829.00 Open Market Value: Original Registration Date: 28 Jun 2014 28 Jun 2014 First Registration Date:

0 Transfer Count:

Actual ARF Paid: \$1,242.00

Intended PARF Rebate Details

PARF Eligibility: No PARF Eligibility Expiry Date:

\$0.00 PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date: 27 Jun 2024

C - Goods Vehicle & Bus COE Category:

COE Period(Years): 10

QP Paid: \$32,890.00 COE Rebate Amount: \$20,026.00 Total Rebate Amount: \$20,026.00

The information contained herein is correct as at 25 May 2018

OK