SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report $\underline{\text{correctly}}$ the details of the accident to speed up the claims process.
- 2. This Form must be $\underline{\text{completed by the Policyholder and/or the Authorised Driver.}}$
- 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 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

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	ACCIDENT STATEMENT			
Date Of Report	13/05/2016 14:56			
Date Of Accident	13/05/2016 08:35			
Exact Location Of Accident	BARTLEY ROAD EAST TOWARDS BRADELL			
Country/State of Loss	Singapore			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SKB4061G			
Insured/Policyholder				
Name Of Registered Owner	DOWNTOWN TRAVEL SERVICES PTE LTD			
Co Reg No	198403671H			
Email Address	NOEMAIL			
Mobile Phone No				
Alternative Phone No	Office-67038000			
Vehicle Particulars				
Manufacturer	SUBARU			
Model	LEGACY-2.5 GT WAGON TURBO (A)			
Exact Purpose for which vehicle was being used at time of accident				
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			

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd.

Type Of Coverage Comprehensive

Fleet Policy Yes

D16MTRENT000099 Policy Number

Cover Note Number

Driver

Name of Driver MUHAMMAD YUSOFF BIN OMAR

NRIC No S8121925G Date Of Birth 20/07/1981 Indoor Occupation **Date Of Driving Pass** 06/05/2003

Driving Experience 13 Years And 0 Months

Male Gender

Mobile Number (Local) +65-96866080

Fax Number

Contact Number

EMail Address yusoff@dts.com.sg APT BLK 719 TAMPINES STREET 72 #02-37

Address Postcode

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

Insurance Company of Driver's Own Vehicle

No

General Information of the Accident

Type Of Accident Collision- Chain Collision

Weather Conditions Clear Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No Was any body injured in the Accident? Yes Was any other material or property damaged? Yes Was there any video captured by Car Camera? No Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? Nο

If Yes.Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

ON 13TH MAY 2016 AT 0835HRS, WHILE I WAS DRIVING TOWARDS BRADELL ROAD AT BARTLEY ROAD EAST, I REALIZED THAT THERE WAS A CONGESTION NEAR THE EXIT TO KPE(ECP). I WAS ON THE RIGHT MOST LANE. I SLOWED DOWN MY CAR AS I WAS AWARE OF THE CONGESTION NEAR THE EXIT TOWARDS KPE(ECP). THE TAXI IN FRONT OF ME SLOWED DOWN AND STOPPED. I SLOWED AND STOPPED MY VEHICLE IN TIME, WHEN SUDDENLY VEHICLE NO.SKG 1799E HIT ME HARD FROM THE REAR. MY BRAKES WERE ENGAGED DURING THE POINT OF IMPACT. BUT THE IMPACT WAS TOO STRONG THAT MY CAR WAS PUSHED TOWARDS THE TAXI IN FRONT OF ME (SHA 2587K) CAUSING MY NUMBER PLATE TO BE DENTED. BUT THERE WERE MINIMAL IMPACT AND NO VISIBLE DAMAGE WERE SEEN ON THE TAXI. I AM EXPERIENCING SOME PAIN ON MY LOWER NECK AND MY UPPER BACK. I SHALL BE VISITING THE DOCTORS.

Are accident photos available for attachment?

DETAILS OF OTHER VEHICLE PROPERTY 1

SKG1799E Vehicle Registration Number Vehicle Make/Model/Colour TOYOTA

Details Of Properties

MOHANA DASS S/O A RENGASAMY Name of Driver

NRIC/Passport Number S1616174H Contact Number 91776202

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number **Email Address**

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHA2587K

Vehicle Make/Model/Colour HYUNDAI SONATA (COMFORT CAB)

Details Of Properties

Name of Driver KOH CHYE SENG

NRIC/Passport Number S1306109B

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number Email Address

DETAILS OF INJURED PERSON 1

Name MUHAMMAD YUSOFF BIN OMAR

Approximate Age 35

Injuries Sustain

Injured person in which vehicle? SKB4061G

Were seat belts worn? Yes
Was injured conveyed to hospital by ambulance? No

Address APT BLK 719 TAMPINES ST 72 #02-37

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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' law yers/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;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature /	Reg. No. 198403671H D		is not the policyholder) /	Date Witnessed by Personnel	Reporting Centre
ketch Plan	(Tow	BARTLE		ст	
			SHAD587K	3k8.4061G	SKG1799
A PONDED'S YOR	ECP				

Describe Circumstances of the Accident BRADDEL 13™ may 2016 @ 0835HES WHILE WAS DRIVING BARTLEY THERE WAS A CONGESTION NEAR REALIZED THAT THE EXIT THE RIGHT MOST LANE, I SLOWED DOWN MY CAR KPE (ECP). ON AS AWARE OF THE CONGESTION NEAR THE EXIT TOWARDS KPE (ECP) AND STOPPED. I SLOWED AND STOPPED MY TAX! IN FRONT ME SLOWED DOWN VEHICLE IN TIME REAR. MY VEHICLE SKG 1799E HIT ME HARD FROM THE WHEN SUDDENLY NO. POINT IMPACT BUT THE IMPACT WAS TOO STRONG WERE ENGAGED DURING THE WAS PUSHED TOWARDS THE TAXI 16) FRONT ME (SHA 2587 K) CAUSING THAT MY CAR THERE WERE MINIMAL IMPACT AND NO VISIBLE PLATE TO BE DENTED BUT DAR DAIN LOWER Som€ my EXPERIENCING DAMAGE WELE SEEN ON THE TAXI Am DOCTORS . NEOK AND MY BACK. I SHALL BE VISITING UPPER THE

Declaration

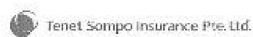
IWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (# driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

INSURANCE



Certificate of Insurance

WOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER199) MOTOR VEHICLES (TMRD-PARTY RISKS AND COMPENSATION) RULES (1998) ROAD TRANSPORT ACT (1997 (WALAYSIA) MOTOR VEHICLES (THIRD-PARTY RESID) HILLES, 1966 (VALAYSM)

: DESMITEDATIONOSS Gert Mou/Policy No. : SKB4021G - Hem No. 56 1. Republished on No.

: DOWNFOWN THAVEL SERVICES ITTELTO 2. Insured Name

3. Commencement Bale : 26 MAY 2015 00:00 1 24 MAY 2017 25/92 4. Euchy During

6. Coverage . Manual value of time of local - Comprehensive

. \$1200 - Section I -Self-Criser : \$1900 - Section I -Chartist r-Oriver 6. Eugens

7. Persons or Classes of Horser's english to drive?

b) Any purson who is sirtying on the insureofs order or with their permission. by any patient who is a review on the industrial experience when their patients are continued in proceedings with the faculting or other laws on equivalent to 1990 the Motor Vehicle or has been an eparatised and is not discretely led by order of a Court of Law or by reason of any anadment or requirement in their honely from diving the Motor Wehlde.

And providing further that the Motor Wehlde is registered under the Road Traffic Act and its registeration under the Road Traffic Act and its registeration and or the Road Traffic Act and its registeration and or

6) USB for the carriage of persengers or poorls in connection with the insured's factiness.

to the for social dominate and placeure purposes and assiness paraceus of any person to whom the weblide is: blood.

The Policy does not cover:

 Use for monity, proximating, substitity that or speechhoding.
 the while! drawing a traffer council the towing (or or than for reward) of any one disprive mechanically. tropel of valida.

2) We for the carriene of passengers for him or reward by any parson to whom the vahiole is bired.

 Oscatürter Workshope & Avoldont Reporting
 It's a core from proceeder I to I ability that the Policyholder shall, expedient with the Mater Vehicle.
 oil of the Company's Academi Reporting Center and report the excident within \$4 hours of the academic or try the read working day theroof.

If is computably to have the noticent repairs to the insured exhibit control out at ExpelOries Workshops. otherwise dialim is not poyable

(f) 81 Orrespondy and for directions to the Company's Academs Reporting Centers, please non-lack during Declarations (SS) 6404-6585.

Via Liewwwienerbrompty.com agrice list of Ewool Enkre Workshops and Acoldent Reporting Centers.

We RECENT DESIGN that the process of the particular relations provide accordance with the provided widths that the test to the provided with the test to the test

Terrot Berripo Insurance Pte. Utd.

Studley

Oste/Time of Isaber: 17 DECEMBER 2015 18:35:

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interpretable trackings.

Training the sensity was a standard for the conduct (16) 11 to 5 to 5 and 12 and 20 and 20 and 3 and 3

Individually Code 8 Name : 11112836 S. TANICHONG CREOT PTO LTD III Clock: 380 (IMONIOTALISKOLESAO)

LOGCARD

Vehicle Particulars

Vehicle No.:

SK840810

Register New Vehicle (Adknowledgement)

Vielable Types

etti - Private Hire (Self-Drive) Station Wagon Verept, and Rover

Normal.

A

Vehicle Attachment 1

With Sun Roof.

Vehicle Attachment 2: Viehinte Makab

BUBARU

Vanida Model:

Vertida Scheme:

Vehicle Attachment 31

LEGACY WACCH 2 SCT AWD GAT ABS ARBAGS

Chassis No.

JP18R9 (VSA)3008360

Engine No.1

HI28E033429

Morre No. Propolant.

Petrol:

traite Chases No.: Passenger Capacity:

Engine Capacity:

2467 00

Power Ratings

Unladen Welghti 1680 kg

Sher

Bacandary Colour.

Makimum Laden Weight | 1825 kg

Minimum PARE Benefit \$17,250.05

First Registration Date: 25 May 2011. Original Hagashallon

25 May 2011

Manufacturing Years

PARE Eligibility

Primary Solout.

2010 View

Open Market Value:

\$84,050,00

Đ. No. of Transfers. Owner Particulars

Cwher Name:

DOWNTOWN TRAVEL SERVICES PTELTO

Center ID Type:

Company

911

Cener (D:

198405671H

Registered Address

Private Residential (Condb Apt or House) / Shopping / Office Complesses

Appen. Registered Block House

DUKIT TIMAH BOAD Registered Street Name:

Registered Unit No.:

Registered Building

Registered Postal Code: 589832

COR No. / Espiry Date:

2011040107000496N / 24 May 2021

CIDE Bld Category:

E - Open Category

OF Pale:

\$59,073,00

Transaction Details

Stormers Throughton

20110625140821790805

Het. No.:

Business Transpollon Date:

25 May 2019

Business Transaction

94500 23

Line: Жевенде

The above valid a has been successfully registered.

Physics hate that \$84,668,00 will be deducted from your \$180 seasont.

OK Land Theosperi 😡 Audiority

Ploase read through the Privacy Statement, Considers of Use and Bookered.

Please so not use the Book of Forward butters on your breaser as this may also due results of the conventions.

Death decody the C.S. Stoud stays, 2022 ARC contains:

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