NATIONAL Assessment Centre	(redulance	MILLERING	71	
10 0 1 1 (4) 2	Services (mer s Janos)	Date & Time Completed	Done by	
Date In: 109 200	SAS e-filing			
Ref No NBH (77 1001695 444				
Veh No	E-mail (within 8hrs, AIC 2hrs)			
DOA 1810819018 13/43	i-Motor Claim Form	1.		
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs	TP 4hrs)	•	
	i-Photo Uploaded			
TP Insurer:	Assessment/Survey Report Ass't Report by Fax / Hand t	o Owner/Wksp		
The state of the s	Ass I Report by <u>Fast Hans</u>		ax:)
Preferred Wksp / INC Assign Wksp / QW: (TP Particulars: Veh No: VA	1162 INC ()/Non-INC()		
100	110	Tel:)	
Owner / Driver: (iod: ()	Cover Type: ()	
Policy No: () Peri	Date:	Time:	7	NOSTOBELIK
	Note-Est. Status (WO): N: 0-2	0%; P: 21-79%. F: 80-1	(00%)	
	Varranty: YES ()/NO ()		
Excess: (\$) Loading: \$1,00	00()/\$2,000()			
General Remarks:-		White the East of the Control	120.9 1	
() Walk-In Customer : Customer's infor	rmation strictly Confidential & S	trictly NO refer of repairer.		
() Total Loss Case : to e-mail Insure				
Drive-In ()/ Towed-In (); Invoice		Towing Co: ()
		Date&Time Completed	Done by	y
Remarks:- (INC hotline: 6788 6616)	Courtesy Car ()	(2) 10 10 10 10 10 10 10 1		
7 11 7	Journey Car (
2) OC Charle / Daniel Penair Inchestion	()			
2) QC Check / Post Repair Inspection 2) Unload Resurvey Photo (Remair Cost > \$3	()			
3) Upload Resurvey Photo [Repair Cost > \$3	()			
	()	1,	erenii e e e	
3) Upload Resurvey Photo [Repair Cost > \$3 Injury:	()		8. 2001 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
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3) Upload Resurvey Photo [Repair Cost > \$3 Injury:	()		800 St. 1-2-2 R.1	
3) Upload Resurvey Photo [Repair Cost > \$3 Injury : Date/Time Actions			Ant (\$)	
3) Upload Resurvey Photo [Repair Cost > \$3 Injury:	Invoice P	eparation Checklist	Anit (\$)	
July : Date/Time Actions WOUSOLGO	Invoice P	ent Reporting (\$30);		"Ant (5)
Journant's Particulars:	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towin	ent Reporting (\$30); ge Assessment (\$100); INC g Fee	(\$80) \$40/\$45	
July : Date/Time Actions Injury: Date/Time Actions Injury: Date/Time Actions Driver/Owner:	Inveice P 1) AR: Accid 2) DA: Dam 3) TF: Towin 4) FT: Fellow	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey)	(\$80) \$40/\$45 \$120 \$30	
July : Date/Time Actions Repair Cost > \$3 Injury : Date/Time Actions Repair Cost > \$3 Injury : Date/Time Actions	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towin 4) FT: Fellov 5) FT: Follow	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey) ig against INC Only (wef 10 Jan 2	(\$80) \$40/\$45 \$120 \$30	
July : Injury : Date/Time Actions Repair Cost > \$3 Injury : Date/Time Actions Contact No:	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towin 4) FT: Fellov 5) FT: Follow For claimin 6) TR: Re-in 7) N1; idao	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey) ig against INC Only (wef 10 Jan 2 spection DA + SMRT Survey	(\$80) \$40/\$45 \$120 \$30 \$005)	
July: Date/Time Actions Injury: Date/Time Actions Inimant's Particulars: Oriver/Owner: Contact No: Damaged Portion:	Invoice P 1) AR: Accid 2) DA: Dame 3) TF: Towir 4) FT: Follov 5) FT: Follov For claimis 6) TR: Re-in 7) N1: Idao 8) NTUC Ad OD*	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey) ag against INC Only (wef 10 Jan 2 spection DA + SMRT Survey ditional Services:	(\$80) \$40/\$45 \$120 \$30 \$005) \$75 \$160	
July: Date/Time Actions Injury: Date/Time Actions Inimant's Particulars: Oriver/Owner: Contact No: Damaged Portion:	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towir 4) FT: Fellov 5) FT: Follov For claimin 6) TR: Re-in 7) N1: Idao 8) NTUC Ad OD* *N5: Cour	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey) ge against INC Only (wef 10 Jan 2 spection DA + SMRT Survey ditional Services:-	(\$80) \$40/\$45 \$120 \$30 905) \$75 \$160	
3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions Claimant's Particulars:- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	Invoice P 1) AR: Accid 2) DA: Dame 3) TF: Towir 4) FT: Follov 5) FT: Follov For claimi 6) TR: Re-in 7) N1: Idao 2 8) NTUC Ad On!* *N5: Cour *N6: Repe	ent Reporting (\$30); ge Assessment (\$100); INC g Fee v-Through Survey v-Through Survey (Resurvey) ge against INC Only (wef 10 Jan 2 spection DA + SMRT Survey ditional Services:- lesy Car / Tpt Allowance ir Co-ordination Repair Inspection	(\$80) \$40/\$45 \$120 \$30 905) \$75 \$160 \$5 \$10 \$25	"Amt(\$)
3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions Claimant's Particulars:- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towir 4) FT: Fallor 5) FT: Follor For claimin 6) TR: Re-in 7) N1: Idao 8) NTUC Ad OD!* *N5: Cour *N6: Repe *N7: Post *N8: DV	ent Reporting (\$30); ge Assessment (\$100); INC g Fee y-Through Survey y-Through Survey (Resurvey) ge exalust INC Only (wef 10 Jan 2 spection DA + SMRT Survey ditional Services: tesy Car / Tpt Allowance ir Co-ordination Repair Inspection Collect Excess Coordination	(\$80) \$40/\$45 \$120 \$30 905) \$75 \$160	
3) Upload Resurvey Photo [Repair Cost > \$3 Injury: Date/Time Actions	Invoice P 1) AR: Accid 2) DA: Dama 3) TF: Towir 4) FT: Fallor 5) FT: Follor For claimin 6) TR: Re-in 7) N1: Idao 8) NTUC Ad OD!* *N5: Cour *N6: Repe *N7: Post *N8: DV	ent Reporting (\$30); ge Assessment (\$100); INC g Fee V-Through Survey V-Through Survey (Resurvey) ig egalust INC Only (wef 10 Jan 2 spection DA + SMRT Survey ditional Services: tesy Car / Tpt Allowance ir Co-ordination Repair Inspection Collect Excess Coordination : TP (Non INC) against INC	(\$80) \$40/\$45 \$120 \$30 905) \$75 \$160 \$55 \$10 \$25 \$5 \$20 \$30	

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
- 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. 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.

The Control of the Co	ACCIDENT STATEMENT
Date Of Report	17/09/2018 19:23
Date Of Accident	18/08/2018 13:45
Exact Location Of Accident	KM 17.1 HIGHWAY FROM K.L TOWARDS SINGAPORE
Country/State of Loss	MALAYSIA/WILAYAH PERSEKUTUAN
DESCRIPTION OF THE PROPERTY OF	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJP3846D
Insured/Policyholder	
Name Of Registered Owner	PANG'S MOTOR RENTAL PTE LTD
Co Reg No	201608109H
Email Address	PANGMOTORRENTAL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86668968
Alternative Phone No	OFFICE-86668968
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMHCSN1709191801
Cover Note Number	
Driver	

LIM WEI SEN Name of Driver S8727925A NRIC No 11/09/1987 Date Of Birth OUTDOOR Occupation 04/03/2008 Date Of Driving Pass 10 YEARS AND 5 MONTHS Driving Experience MALE Gender (LOCAL) +65-86668968 Mobile Number Fax Number

OTHERS-86668968 Contact Number

PANGMOTORRENTAL@GMAIL.COM EMail Address

Address

BLK 371 HOUGANG STREET 31

#11-35

Postcode

530371

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

YES

Foreign Vehicle Registration Number

VAS1163 (PRIVATE CAR)

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

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)

2

Passenger 1

NAME:

: ENG THIAN TECK ,KENNETH

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

TRAFIK KULAIJAYA

ROAD: IBU PEJABAT POLIS DAERAH KULAI JAYA , POSTCODE: 81000 , COUNTRY: MALAYSIA

Police Station Address

TEL NO: - FAX NO: 07-6622522

Police Station Contact Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND TRAFIK KULAI/007775/18 (PHOTOS ONLY FROM THE INSURED HANDPHONE)

Attachment(s)

Are accident photos available for attachment?

NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

VAS1163

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

PRIVATE CAR

NRIC/Passport Number

Contact Number

Page 2 of 23

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

VR4591

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category 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

LIM WEI SEN

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SJP3846D

Were seat belts worm?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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 Sun Lure

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signi

Name:

NRIC/FIN No.:

GIARWE SketchPlanForm, VA



POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai

: Jabatan KDN/KA

Pegawai Penylasat

: R163775

Daerah

Jabatan KDN/KA

Kontinjen

: BUKIT AMAN

No Repot Bersangkut : TRAFIK

KULAIJAYA/007770/18

No Repot

TRAFIK KULAIJAYA/007775/18

Tarikh Waktu

18/08/2018 1426 PM

Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot

Nama: ASWADI BIN WAHAB

No Personel: R163775

Pangkat: SJN

Nama: --

Butir-butir Jurubahasa (Jika Ada)

No K/P (Baru): --Bahasa Asal: ---

No Polis/Tentera: ---

No Paspot: --

Alamat: ---

Butir-butir Pengadu

Nama: LIM WEI SEN No K/P (Baru) : ---

No Polis/Tentera : --

No Paspot: S8727925A

No Sijil Beranak : -

Jantina: Lelaki

Tarikh Lahir: 11/09/1987

Umur: 30 tahun 11 bulan

Keturunan: Cina

Warganegara: Singapore

Pekerjaan: SENDIRI

Alamat Tempat Tinggal: APT BLK 371 HOUGANG STREET 31 # 11-35, SINGAPORE, 530371

Alamat Ibu/Bapa: ---Alamat Pejabat : ---

No Tel (Rumah): --

No Tel (Pejabat) : ---

No Tel (HP): 6586668968

Emel: ---

Pengadu Menyatakan:-

PADA 18/8/2018 JAM L/KURANG 1345 HRS SAYA MEMANDU M/KAR NO. SJP 3846 D JENIS TOYOTA WI BERSAMA KAWAN BERNAMA ENG THIAN TECK KENNETH (WENG DIANZHI) DARI KUALA LUMPUR SINGAPORE APABILA SAMPAI DI KM 17.1 LEBUH RAYA UTARA -SELATAN ARAH SELATAN ,SAYA MEMANI DI LORONG KANAN TIBA-TIBA M/KAR NO. VR 4591 BREK ,SAYA PUN MEMBREK .KEMUDIAN SAYA DENG. BUNYI DENTUMAN KUAT DARI ARAH BELAKANG SAYA TURUN LIHAT M/KAR NO. VAS 1163 TEL MELANGGAR BAHAGIAN BELAKANG MIKAR SAYA MENYEBABKAN MIKAR SAYA MENGELUNGSUR HADAPAN DAN MELANGGAR BAHAGIAN BELAKANG M/KAR DI HADAPAN SAYA SAYA DAN KAWAN TIA CEDERA MANAKALA MIKAR SAYA MENGALAMI KEROSAKAN BUMPER DAN BONET HADAP KEMEK TANGKI AIR DAN AIR CORD PECAH LAMPU BESAR HADAPAN KIRI DAN KANAN PECAH BUMP DAN BONET BELAKANG KEMEK ,LAMPU BESAR BELAKKANG KIRI DAN KANAN PECAH ,PINTU SEBEL HADAPAN DAN BELAKANG ROSAK DAN LAIN -LAIN KEROSAKAN SAYA TIDAK PASTI INILAH LAPOR SAYA.

Tandatangap Rengadu:

Tandatangan Ji

ka ada):

Tandatangan Penerima Rep

ID Pencetak | Tariki

R16

018 02:44:56 PM

BIZ CHECK

COMPANY NAME: REGISTRATION NO.: 201608109H

PANG'S MOTOR RENTAL PTE, LTD.

SINGAPORE COMMERCIAL CREDIT BUREAU

REQUEST DATE	REQUEST NO.	CLIENT'S A/C REF.	REMARKS
11/09/2018 13:38:07	ONL180685281		

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY BUSINESS PROFILE INFORMATION



REGISTRY

(LOID IIV I	
REGISTRATION DATE	29/03/2016
NAME EFFECTIVE DATE	29/03/2016
COUNTRY OF INCORPORATION	SINGAPORE
COMPANY TYPE	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
REGISTERED ADDRESS	31 WEST COAST HIGHWAY, 01 - 34 117864 SINGAPORE
CHANGE ADDRESS DATE	29/03/2016
COMPANY STATUS	LIVE COMPANY
STATUS EFFECTIVE DATE	29/03/2016
REGISTERED ACTIVITIES	1. 49219 - PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (-) 2. 77101 - RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (-)
AUDITOR	
AUDITOR APPOINTMENT DATE	
ACCOUNT DATE	28/02/2017
DATE OF LAST AR	28/09/2017
DATE OF LAST AGM	31/08/2017

CHANGE OF COMPANY NAME

PREVIOUS NAME	EFFECTIVE DATE	
Nil		

CAPITAL

CURRENCY	CAPITAL AMOUNT	NO. OF SHARES
SINGAPORE DOLLARS	1.00	1
	1.00	NA NA
	CURRENCY SINGAPORE, DOLLARS SINGAPORE, DOLLARS	SINGAPORE, DOLLARS 1.00

OFFICER(S)/ OWNER(S)

OFFICER NAME/ ADDRESS/ CHANGE ADDRESS DATE	IDENTITY NO. / PA REG. NO.	POSITION	APPOINTMENT DATE	NATIONALITY
ANG KIM HONG 15 TOH TUCK TERRACE,,	S2511789A	SECRETARY	29/09/2016	SINGAPORE

596646, SINGAPORE			V	
PANG QI JIE VERNON	S8842395Z	DIRECTOR	29/03/2016	SINGAPORE CITIZEN
15 TOH TUCK TERRACE, 596646, SINGAPORE 29/03/2016				

SHAREHOLDERS

SHAREHOLDER NAME / ADDRESS/ CHANGE ADDRESS	COMPANY/ IDENTITY NO.	COUNTRY OF INCORPORATION	SHARE TYPE	CURRENCY	NOS. OF SHARES	SHARE
PANG QI JIE VERNON 15 TOH TUCK TERRACE, - 596646 SINGAPORE 29/03/2016	S8842395Z	SINGAPORE CITIZEN	Ordinary	SINGAPORE, DOLLARS	1	Individual

SHARE INTERESTS IN COMPANIES

COMPANY NAME SHARES OWNED (%) / POSITION STATUS
COMP CHAT THE SAME

REGISTERED CHARGES

CHARGE NO	CHARGE DATE	CHARGEE(S) COMPANY	CURRENCY	SECURED	STATUS OF SATISFACTION
Nil			<u>'</u>		

LIQUIDATOR(S) / RECEIVER(S) / JUDICIAL MANAGERS(S)

NAME /	POSITION	COMPANY	ADDRESS	APPOINTMENT DATE
ID NUMBER				

SEARCH BY FINANCIAL SECTORS

_	KCH B	V4.57/11	Commence of the last	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Year	Jan	Feb	Mar	Whi	,	720	- 2	0	0	0	0	
2010	2	0	1	2	1	0	0	U				
2018	-		-	2	4	1	2	2	1	2	1	- 4
2017	2	1	2	2	(5)	-	- 10	-		2	2	3
2016	0	0	0	1	1	1	1	2	1			

SEARCH BY NON-FINANCIAL SECTORS

	KCH B		Dr.	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Year	Jan	Feb	Mar	Ph.	,	CSW			n	0	0	
2018	2	0	1	2	- 1	0	- 0	U	U		70	
	-	2.0	-	- 2	4	- 4	2	2	1.	2	1	
2017	2	1	- 2		- 1		177	-	4	2	2	7
2016	0	0	0	1	1	1	1	2	- 1	- 4		

Created on: Sep 11, 2018 1:38 PM

DISCLAIMER THIS REPORT MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM OR MANNER WHATSOEVER.

This report is forwarded to the Subscriber in strict confidence for use by the Subscriber as one factor in connection with credit and other business decisions. The report contains information compiled from sources which D&B Singapore does not control and which has not been verified. D&B Singapore therefore cannot accept responsibility for the accuracy, completeness or timeliness of the contents of the report. D&B Singapore disclaims all liability for any loss or damage arising out of or in anyway related to the contents of this report.

Created on: Sep 11, 2018 1:38 PM

ACCIDENT STATEMENT	
13 45 - MH-MMI	
ACCIDENT DATE: 18, 08, 2008 (DD/MM/YYYY), TIME: 13 : 45)(HH:MM)	
LOCATION: 17.1. HIGHWAY FRANKL. 2. STORKE	
LOCATION: 1.1.1. HIGHIOMS	
The state of the s	
1. DETAILS OF VEHICLE SOP 38460	
alvehicle NUMBER: 301 200 200	
BINSURANCE COMPANY	
C)POLICY NUMBER: CHIED PARTY / THIRD PARTY FIRE &THEFT)	
C)POLICY NUMBER:	
e)MAKE & MODEL: (NAM / LORRY / MOTORCYCLE / OTHERS)	
GITYPE: GARGON / COUPE / MPV / VAIN LUNGTORCYCLE)	
HIPURPOSE OF USING AT ACCIDENT TIME: FOLD ATH	
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)	17
IF NO. PLEASE STATE THIRD THE CO. D. C.	
2. INSURED / BOLICY HOLDER WOL REUTER PHE (1) PMALE / FEMALE) A) NAME: PBMG18 NW WOL REUTER PHE (1) PMALE / FEMALE)	
b) NRIC/FIN/PASSPORT:CONTACT:	
CANDAT (M) CADDRESS:	
V (a) INITIIV	
· CONTINUE TO 3.4 IF DRIVER ALSO POLICY HOLDER	
STHO of passongs DRIVER UM WALL SHALL MALE GEMANTES 62	
CONTACT: 60003 IV	
(Including driver) binRiC/FIN/PASSPORT:	
() C)ADDRESS:	
(DD/MM/YYYY)	
* 6(1) 1 (1) = 1 (P. D(R)) (1) (1)	
e OCCUPATION: UNDOOR / OUTDOOR)	130
1) DATE OF DRIVING PASS	
S TIME ATHER CONDITION: (CLEAR / RAINING / STITE	86
b)ROAD SURFACE: (DRY / WET / OTHERS	U.
6. WAS ANYBODY INJURED (YES LNO)	11
THE PROPERTY OF THE PROPERTY O	1
IF YES, PLEASE STATE WHICH POLICE STATION:	
VCHICLE NUMBER: VT	
10) DRIVER 3 MONTH	
c) NRIC/FIN/PASSPORT:CONTACT	
9. THIRD PARTY VEHICLE VR 4591 MODEL:	-5%
d) VEHICLE NUMBER: CONTACT:	
PRODUCT THE PROPERTY OF THE PR	
The first defect of DRIVER'S NAME:CONTACT:CONTACT:	

EMPLL = pangsmotor rental@s mil.com VIOEO =

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8727925 A





LIM WEI SEN

林暐

森

CHINESE Des or Bree 11-09-1987 County or Bree SINGAPORE









S8727925A

Steel Steel . S

30-09-2002

APT BLK 371 HOUGANG STREET 31 #11-35 SINGAPORE 530371 YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 04 Mar 2008 of the driver; and other motor vehicles =< 2500kg

NP 428A



Co. Reg. No. 200208384E

R SN B AND591A Cov. Type: T

CERTIFICATE OF INSURANCE

(Third-Party Risks and Compensation Road Transport Act, 1967 (Malaysia) erisation) Rules, 1960 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No.

DMHCSN1709191801

Engine No :1223239098 Chano: 3TDER12w403003002

Index Mark and Registration Number of Vehicle

S3P38450

2. Name of Policy Holder

PANG'S MOTOR RENTAL PTE LTD

Effective date of the Continencement of Inturance for the purposes of the Regulations, Ordinance or Enactment

23 March 2018

Excess Sect. II 5\$1,500.00

Excess Sect.II (Outside Singapore)... 5\$3,000.00

4. Date of Expiry of Insurance

22 March 2019

5. Persons or Classes of Persons entitled to drive?

As per Named Driver(s) stated below.

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.

ANY EMPLOYEE OF THE COMPANY OR

ANY AUTHORISED HIRER

- 6. Limitations as to use:".
 - (1) use for the carriage of passengers or goods in connection with the Policyholder's business.
 - (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:PANG'S MOTOR ENTERPRISE..... Authorised Officer

Authorised Signatory

^{*} Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.