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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 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.
- 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.

TO THE WAR STREET	ACCIDENT STATEMENT
Date Of Report	08/10/2018 18:50
Date Of Accident	06/10/2018 23:50
Exact Location Of Accident	SLIP ROAD TO ANG MO KIO AVENUE 3 FROM CTE
Country/State of Loss	SINGAPORE
Department of the control of the con	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLW5159E
Insured/Policyholder	
Name Of Registered Owner	PYRO CARS PTE LTD
Co Reg No	201710328D
Email Address	KAIPENG.CHIA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96201026
Alternative Phone No	OFFICE-96201026
Vehicle Particulars	
Manufacturer	MAZDA
Model	3
Exact Purpose for which vehicle was being used at time of accident	DRIVING 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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MJ001123-R00
Cover Note Number	
Driver	
Name of Driver	CHIA KAI PENG
NRIC No	S7703235E
Date Of Birth	26/01/1977
Occupation	OUTDOOR
Date Of Driving Pass	21/08/1995
Driving Experience	23 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96201026
Fax Number	The second secon
Contact Number	OTHERS-96201026
EMail Address	KAIPENG,CHIA@GMAIL,COM

Address

33 PASIR RIS LINK

09-31

Postcode

518154

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

CLEAR

Road Surface

DRY

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

Number of Passengers (Including Driver)

3

Passenger 1

NAME:

: PASSENGER

GENDER:

: FEMALE

Passenger 2

NAME:

: PASSENGER

GENDER:

: FEMALE

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?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJT6204R

Vehicle Make/Model/Colour

CHEVROLET AVEO

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

FONG WENG HONG JEREMY

NRIC/Passport Number

S9832500Z

Contact Number

96891272

Address

Postcode

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
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- 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 aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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:
 - (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;
 - (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
- 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.
- 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) Date & Time: &

Reporting Centre Personne

I was driving my car SLW 5159E along the slip road from CTE going Ang Mo Kio Ave 3. While saity exiting from slip road I stop to chock for traffic and I was hit from behind by SJT 6204R

DECLARATION

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

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: S | (a { (} Beporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

WASHING SHOOT THE COME OF

PYRO CARS PTE. LTD.

73 Ubi Road 1 #08-65 Oxley Bizhub Singapore 408733

Agreement Date: 14/09/2018

Agreement No:

AUTOMOBILE LEASE AGREEMENT

THE SCHEDULE

Lessor)	Name: PYRO CARS PTE, LTD. Address: 73 UBI ROAD 1 #08-65 OXLEY BIZ	ROC No:201710328D HUB SINGAPORE 408733
(Lessee)	Name: CHIA KAI PENG	NRIC/PP/UED No: S7703235E
	Address: 33 PASIR RIS LINK #09-31 S(518154)	
(Guarantor)	Name: Address:	NRIC/PP/UED No:

DESCRIPTION OF VEHICLE ("Vehicle")

MAKE/MODEL AND DISTRIBUTOR OF VEHICLE	COLOUR	REGISTRATION NO
Make/Model: MAZDA 3 Chassis : JM6BN22A8H0166402 Engine No : P520458149 Distributor : ("Distributor")	GREY	SLW5159E

TERMS OF RENTAL PAYMENT

- Commencement Date: 14/09/2018
- Period of Lease: From 14/09/2018 to 14/09/2023 (5 Year) ("Lease Period").
- 3. Initial Payment of SGD \$420.00 for 1st week ("Rental"), due on every FRIDAY of the week (payable in advance) ("Due Date").
- Security Deposit: SGD § 500.00
- PYRO CARS PTE. LTD. UOB Account Number: 310 306 9376

OTHER TERMS OF LEASE(*Except for Items 8,12 & 13, please delete the option clearly if inapplicable)

- 1. Service: Lessor's Package ("Package") / Lessee to pay for own service at [BLK 10 ANG MO KIO AVE 5 #03-12 AMK AUTO POINT \$568047] 95490185 Ah Dee
- Mileage Limit: YES [(20,000) Kilometer every (12) Months / NO
- 3. Motor Insurance: Included in Rental / Not-included in Rental
- 4. Road-Tax: Included in Rental / Not-included in Rental
- 24 Hr Emergency Break down 7 Towing IN Singapore: YES NO
- 24 Hr Emergency Break down 7 Towing IN Malaysia: YES / NO
- Collision Damage Waiver (CDW): YES NO
- 8. Mandatory Excess SGD \$5,000 (in Singapore) and SGD \$N/A in Malaysia) in respect of each every single accident.
- GPS Tracking: YES (Please refer to clause 17.3) NO
- Provision of Courtesy Car: YES (Subject refer to clause 7.4) NO
- 11. Replacement cost of Vehicle's Tyres: Included in Package (Payable by Lessor
- 12. Contractor (pursuant to Clause 12.1.1):
- 13. Upon completion of the whole 60 mths lease with no outstanding rental payment, car ownership will automatically be transferred to your name with no further payment.

14.



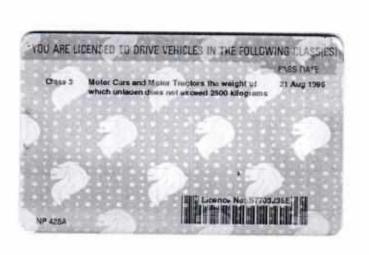
ACCIDENT STATEMENT

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Tokio Marine Insurance Singapore Ltd.

(Company Reg. No. 192300014M/(GST Reg No. M2+0000023-4)

20 McCallum Street #09-01 Toklo Marine Centre Singapore 069046

(65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E tmis@tokiomarine.com.sg W www.tokiomarine.com





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)

Policy No.: 18-MJ001123-R00 (Private Motor Car)

1. Index Mark and Registration Number

SLW5159E

Chassis No.: JM6BN22A8H0166402

of Vehicle

2. Name of Policyholder

PYRO CARS PTE LTD

 Effective date of the Commencement of Insurance for the purposes of the Act

11/09/2018

4. Date of Expiry of Insurance

20/08/2019

Persons or Class of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.

The hirer.

Any other person who is driving on the hirer's order or with his/ their 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or 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.
- Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- * 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2397DDA

Insurance Plan:

Comprehensive Approved Workshop Plan

Limit for total loss or theft:

Prevailing Market Value Own Damage Claims

SGD 2,000

Policy Excess:

Excess-Third Party (Sect II) SGD

SGD 1,500 SGD 100

Financial Interest:

Windscreen Excess KENSO LEASING PTE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Yeo Chor Joo Irene - Mot

Printed 11/09/2018



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: 566550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report. ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: _Vehicle Registration No: SLW 5159E Original Report No : NRIC/FIN/Passport No : S7703235E Name(as shown in NRIC) : 4 √*Vehicle Drived / Vehicle Owner) (*) Please delete as appropriate Address Singapore(96201026 Contact (Tel) Mobile No.: **Email Address** Date of Accident Time of Accident: Place of Accident Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: Ile & DRIVING LICANICA WLOOD VWWO

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature

Name: NRIC/FINNo.;

Date: