MCD518154543 / ComfortDelGro Engineering Pte Ltd - Braddell ENTRY DATE & TIME: 29/11/2018 12:14 SUBMITTED BY: Brenda Ng Lay Hong

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.
- 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

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Date Of Report 29/11/2018 12:14 Date Of Accident 29/11/2018 08:20

Exact Location Of Accident ALEXANDRA ROAD TOWARDS PASIR PANJANG

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLG9246U

nsured/Policyholder

Name Of Registered Owner LCRF PTE LTD Co Reg No 201624597K

Email Address INSURANCE@LIONCITYRENTALS.COM.SG

Mobile Phone No

Alternative Phone No OFFICE-88888888

Vehicle Particulars

Manufacturer HONDA

Model SHUTTLE HYBRID 1.5 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?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number SLG9246U

Cover Note Number

Driver

Name of Driver LIM KHENG WUI

NRIC No S6832923Z Date Of Birth 08/08/1968 Occupation **INDOOR** Date Of Driving Pass 14/01/1994

Driving Experience 24 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98156395

Fax Number

Contact Number

EMail Address EDDY_LIMKW@YAHOO.COM.SG Address

BLK 288C PUNGGOL PLACE #12-833

Postcode

823288

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?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

Vas any injured conveyed to hospital by mbulance?

YES

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: ADRIAN FOO

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police? If Yes, Please state which Police Station

YES

Police Station Name

ROAD: 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING,

Police Station Address

POSTCODE: 319194, COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-2519999 - FAX NO: 63548749

TOA PAYOH NEIGHBOURHOOD POLICE CENTRE

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

SD CARD TAKEN BY POLICE

Was there any audio recorded?

NO

Details of Witness 1

Name

ADRIAN FOO

Phone Number

97454772

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SGP3389S

Vehicle Make/Model/Colour

HONDA / WHITE

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SIOW LING

NRIC/Passport Number

Contact Number

97995947

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKX785L

Vehicle Make/Model/Colour

VOLKSWAGEN / GREY

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

97604495

Address

ostcode

Însurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

.....

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SHC5448Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME:

Ξ:

GENDER: : MALE

DETAILS OF INJURED PERSON 1

Name

ADRIAN FOO

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SLG9246U

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 2

Name

LIM KHENG WUI

Approximate Age

50

Injuries Sustain

NECK & SHOULDER PAIN

Injured person in which vehicle?

SLG9246U

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 3

Name

TAXI DRIVER

Approximate Age

Injuries Sustain

LEG INJURED

Injured person in which vehicle?

SHC5448Z

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 4

lame

TAXI PASSENGER

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHC5448Z

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

SKETCH FLAN

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 Followholder and/or the Authorised Briver.
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- Any false reporting may be referred to the Police for investigation.
- 5. 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.
- Consent under the Personal Batz 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' 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 ma,
 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's Signature Date A Time:

Driver/ Signature

(If offiver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

MRIC/FIH Ho.:

SKETCK PLAN		
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DECLARATION		
Whe pedate the totalough barticulars	are true in even respect	
GFE A	are the treather	· X An-
[代]		4.1
Policyholder's Signature Date & Time:	Driver's signature	Reporting Centre Personnel's Signature
erwyd fan IIIIús	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:

GIARMC SkatchPlanForm_V3

Page 6 of 33





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

1 of 4 Report No. T/20181129/2034

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/11/2018 11:31			Vide Report No.: D/20181129/0036	Station Diary No				
Informant	's Partic	ulars						
Name of Ir LIM KHEN	IG WUI		Address: APT BLK 288C PUNGGOL F 823288	PLACE #12-833 SINGAPORE				
ID Type / ID No.; NRIC NO / S6832923Z Nationality:			Contact No.: Home/Office: Mobile: 98156395					
SINGAPO		EN	Email:					
Sex: Male	Age: 50	Date of Birth: 08/08/1968	Type of Informant: Driver					
Race: Chinese			Language: Institution / School Name:					
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3	Date of Expiry:				

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/11/2018 08:20	Type of Location: Straight Road
Location: Along Road 1 ALEXANDRA ALEXANDRA	ROAD ROAD TOWARDS PASI		1 20(111/2018 06.20	L.
vveatner: Clear	TOWN ROOF AGI	Road Surface: Dry	F	Road Speed Limit:
Traffic Flow:		Traffic Control:		raffic Volume: leavy
Type of Collision Between Movin	on: ng Vehicles - Head To Re	ear	A	Anyone conveyed by ambulance:

Vehicle No.	Type	The Secretary of the Contract Company of the Compan	Model	Color	manananananang katalog katalog k	表于2012年12.00年112.00年12日中10年12日 - 201
SGP3389S	Car	**************************************		OUIO		No of Passenger
	Cai	Į			Slightly	0
SHC5448Z	10	<u> </u>			Damaged	
317034402	Car				Seriously	1
SKX785L	Co.	<u> </u> 			Damaged	
CICCIDOL	Car				Slightly	0
SLG9246U	Can	<u> </u>			Damaged	
01032400	Car				Seriously	1
	<u></u>				Damaged	





Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

2 of 4 Report No. T/20181129/2034

Details of Perso	n involved	NAS MENERAL	ulling College groups	waste	NS120204		
Any Pedestrian II	The state of the s				10056-01551005		
No. of Pedestrian		**************************************	Use of Ped	destrian	Cross	ing: NA	
Dríver			2001-02/00/05/05/09			are so a se esta de la granta de la companya de la	
Name	SIOW LING		ID No.		NIL		
Related Vehicle	SGP3389S (Car)		·····	Contact No.		97995947	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc				
	ted Medical Leave	NIL	Degree of				
Driver				a sina i	e gregorija		
Name	Unknown Driver			ID No		NIL	
Related Vehicle	SHC5448Z (Car)	·		Conta	ct No.	NIL	
Hospital/Clinic	NIL	, , , , , , , , , , , , , , , , , , , ,		Class Driving Licend Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc		NIL		
	ted Medical Leave	NIL	Degree of Injury NIL				
Driver		a fi 1978 e despriedra (f. 1. bajar).		217187/31V4			
Name	Unknown Driver			ID No		NIL	
Related Vehicle	SKX785L (Car)			Conta	ct No.	97604495	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Discharge NIL				
	ted Medical Leave	NIL	Degree of		NIL		





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999 3 of 4 Report No. T/20181129/2034

CONTINUATION OF REPORT

Driver						
Name	LIM KHENG WUI			ID No.		S6832923Z
Related Vehicle	SLG9246U (Car)			Contact No.		98156395
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days granted Medical Leave NIL			Degree of	Injury		
Passenger					ing (gas)	
Name	ADRIAN FOO			ID No	•	NIL
Related Vehicle	SLG9246U (Car)			Conta	ct No.	97454772
Hospital/Clinic	NIL			Class Driving Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 29/11/18 at about 0820hrs, I am driving my car (SLG9246U) as a GRAB driver with one passenger (Adrian Foo, hp: 97454772) with me along Alexandra Road towards Pasir Panjang. The traffic is heavy and slow moving, and I am driving at the second lane.

Suddenly, a taxi (SHC5448Z) who was driving on the first lane, cut into the second lane from my rear and hit head onto the rear of my car. As a result, an accident between 4 cars happened. I hit the car in front of me (SKX785L), and that car hit the car (SGP3389S) in front of her. The 2 female drivers in front of me were in a rush and I only managed to get their contact number.

The front and rear of my car was badly damaged, and was eventually towed away. My passenger was conveyed by the ambulance, together with the passenger from the taxi (SHC5448Z). Traffic Police SS Syahid attended to me at the scene with report no vide D/20181129/0036. The TP IO was IO Phillips.

One Black Colour 16GB Micro SD card was handed over to the Traffic Police.

CONTINUATION OF REPORT





4 of 4

Report No. T/20181129/2034



Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Record E / Staff Sgt MUHAMMAD FAR	1,		Signature Of Informant:			
Signature Of Interpreter:	<u> </u>		Date/Time:			
Not applicable			29/11/2018 11:31			
Officer In Charge Of Case:			Classification Of Case:			
Sgt 2 LEE MING CAI	SINGAPORE		CD 450			
Contact No.: 65476960	POLICE FORCE	, ,	SN 168			
Authentication Stamp		\mathcal{M}				
NP168	Marketon (American Company)	1				
	SIGNA	۱ŤL	IRE			



HOTLINE TEL: (65) 6419-3000 FAX: (65) 6415-3723

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, 1953 (MALAYSIA)

M.Z.400

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO.

SLG9246U

ALL CLAIMS EXCESS

\$\$2000.00

(The below excess is subject to GST)

WINDSCREEN EXCESS

\$\$100.00

SUM INSURED

Market Value

INSURING WITH COE/PARF

SLG9246U

LCRF Pte Ltd

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

25 February 2018

4) DATE OF EXPIRY OF INSURANCE

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

24 February 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE

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

If You or Your Authorised Driver is below the age of 21 years old and/or has less than 1 year driving experience, the excess is \$\$3,500(Att Claims).

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 Courl 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 for social, domestic, pleasure purposes and business purposes of Insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or roward by any person to whom the vehicle is hired,

The Policy does not cover; 1) Use for tuition, driving test, 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. 3) Use for any purpose in cannection with the Motor Trade.

LOSS OF USE

ORIGINAL

Not included

HIRE PURCHASE COMPANY

Refer to Policy Terms and Conditions

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 (Majaysia), are not to be included under these headings.

17 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).

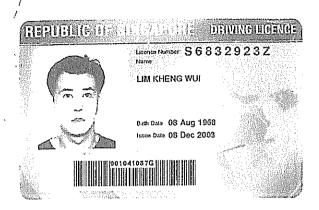
Issued in Singapore 13 Feb 2018

AIG Asia Pacific Insurance Pte. Ltd.

030080-000 Aon Singapore Pte Ltd 2 Shenton Way #26-01 SGX Centre 1 SINGAPORE 068804

AUTHORISED REPRESENTATIVE

SSPAHN



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$6832923Z



Race CHINESE Date of Beth 0B-08-1968 L¢ Country of Bath
SINGAPORE

LIM KHENG WUI

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS[ES]

PASS DATE

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms Class 3

14 Jan 1994

25-02-1993

NAC № S6832923Z

APT BLK 288C PUNGGOL PLACE #12-833 SINGAPORE 823288

NRIC No: \$6832923Z

Date: 08/01/2012 No: 6957549

