SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 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 inont to the ort at the

7. By the lodgement of this report to the insurers, you hereby conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	22/02/2019 09:19		
Date Of Accident	21/02/2019 13:05		
Exact Location Of Accident	ALONG COMMERCE STREET		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SJH8421E		
Insured/Policyholder			
Name Of Registered Owner	SINOCHEM INTERNATIONAL (OVERSEAS) PTE LTD		
Co Reg No	200305994Z		
Email Address	NOEMAIL		
Mobile Phone No			
Alternative Phone No	Office-65385866		
Vehicle Particulars			
Manufacturer	AUDI		
Model	A6 2.0T		
Exact Purpose for which vehicle was being used at time of accident	COMPANY USE		
Are you claiming under your own insurance policy for repair to your vehicle?	NO		
If No, Please state action to be taken	REPORTING ONLY		
Vehicle Category	PRIVATE CAR		
Insurance Company			
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	2100349531-05		
Cover Note Number			
Driver			
Name of Driver	CHENG RUIMIN		
Passport No/FIN	G3219230R		
Date Of Birth	24/06/1968		
Occupation	INDOOR		

29/02/2016

2 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97395698

Fax Number

Contact Number

EMail Address CHENGRUIMIN@SINOCHEM.COM

Address C/O 7 MARYMOUNT TERRACE

#12-04

Postcode 573963 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

-

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

3

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : PU JIANG

Gender: : Male

Passenger 2 Name: : XU PU
Gender: : Female

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND REPAIR AT OWN WORKSHOP.

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 SLK5441C

Vehicle Make/Model/Colour TOYOTA

Details Of Properties Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE HIRE
YEO CHIN YONG

S1694178F

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 5. 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 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)
 - (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
- (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:
 - (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

43.12.R

(ii) for complying with requirements under any regulations, laws or court orders. SINOCHELI BITERMATIOLUL (OVEDSEAS) PTE

TEL: (00) 0333 6003 FAM: (65) 6538 9337 Policyholder's Signature Date & Time:

8 Marsia Movido 468

Agia 3

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

2 2 FE3 2019

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo NRIC/FIN No.: S6840583A

GUARAC SI MARIA 09 219 AM

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ESCRIBE CIRCUMSTANCES OF TH	E ACCIDENT TIME	21/2/2019 about 1:05	on	
The incident happe	ned on 21/2/2019	about 1-05pm		
I was turning on	to Conmerce street	as the other	-vehicle(SLK 544
drive quite fast	and hit onto my	car left from	nt portion	
The impact of m	y car left portion	front side de	inted an	nd damag
	other vehide (SLK	5441C) rig	nt side a	loor
dented and				
No one was 1	gived. The wes	ether was cl	con.	
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Nicyholder's Signature	Driver's Signature		re Personnel's Si	gnature

2.2 FEB 2019



CERTIFICATE OF INSURANCE

AUTOPLAN PRIVATE VEHICLE

Name of Policyholder : Sinochem International (Overseas) Pte Ltd

Period of Insurance : 26 Aug 2018 To 25 Aug 2019

: BPJ107994

Engine No. Chassis No. : WAUZZZ4F98N155612 Vehicle No.

: SJH8421E

Policy No.

: 2100349531-05

Endorsement No. Issued Date

: 21 Aug 2018

ABOUT THE COVER

: AUDI A6 2.0T Make/Model

Engine Capacity/Tonnage: 1,984.00 CC Driver Restriction · NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2008 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

Any parson who is driving on the Policyholder's order or with their permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than

Age Condition

: All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving fulfion, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

Section 1 Fire - \$0 Own Damage - \$800 Thaft - \$0 Flood Cover - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Sinochem International (Overseas) Pte Ltd - \$800 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres! AIG Authorised Repairers (For claims related repairs)
Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us),
For Approved Reporting Centres!AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website were aig.com.sg or AIG
SG Mobile App. Simply search and download "AIG SG" from ITunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

I/Wis hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503307000

9836 8571

371 ALEXANDRA ROAD #10-23 AIA ALEXANDRA SINGAPORE 159963 SP-CELINE-JAKEYU

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE



EMPLOYMENT PASS

Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer SINOCHEM INTERNATIONAL (OVERSEAS) PTE LTD.



CHENG PLUMIN MANAGING DIRECTOR

G3219230R

15-06-2017

Oate of Issue 27-06-2017 Date of Expiry 09-08-2020

L8070957



VISIT PASS

Name CHENG RUMIN



24-06-1968 M

CHINESE

Date of Issue Date of Expiry

G3219230R 27-06-2017 09-08-2020

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 29 Feb 2016 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

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SCENE PHOTO



SCENE PHOTO



