

(over 1 Jan'05)

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NA1901547

FOR: 10-DEC-2018 MON 06:09

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 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. 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.

ACCIDENT STATEMENT

Date Of Report	28/02/2019 14:58
Date Of Accident	24/02/2019 20:30
Exact Location Of Accident	AT 71 WOODLANDS AVENUE 10
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH5943E
Insured/Policyholder	
Name Of Registered Owner	JIAXING INTERIOR DESIGN PTE LTD
Co Reg No	201722794W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83410477
Alternative Phone No	OFFICE-83410477

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	AVCPSB0092421800
Cover Note Number	

Driver

Name of Driver	CHEN ZHENLONG
Passport No/FIN	G7852532R
Date Of Birth	04/10/1982
Occupation	OUTDOOR
Date Of Driving Pass	20/04/2017
Driving Experience	1 YEAR AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83410477
Fax Number	
Contact Number	OTHERS-83410477
Email Address	NOEMAIL

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	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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?	NO
Was there any audio recorded?	NO


SKETCH PLAN

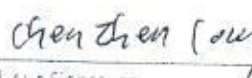
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

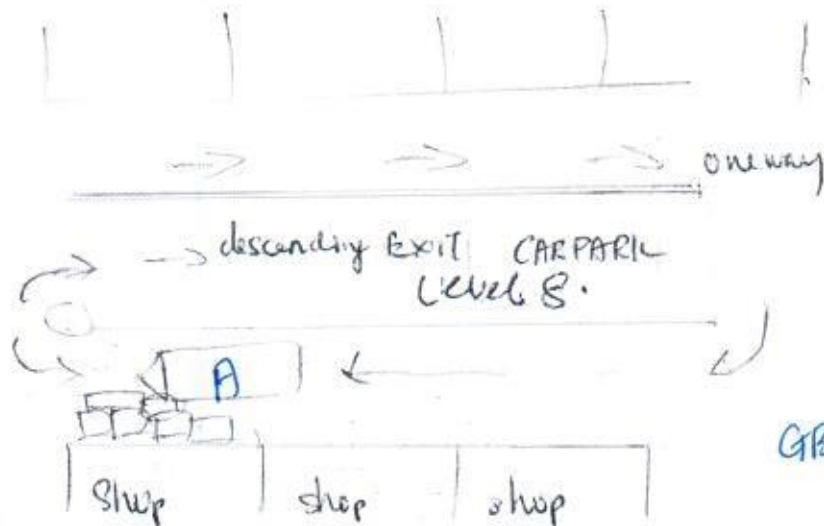
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
 - (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
- (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:
 - (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
Policyholder's Name
Date & Time


Reporting Centre's Signature
Name
Date & Time

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving towards exit way at right turn and my left side vehicle hit onto blocks of bulkey item along the driveway. My vehicle swift to the right and cause the right vehicle was hit at the exit way wall.

DECLARATION

I declare the foregoing is true and correct.

[Signature]



Chen Zhen (owner)

[Signature] 28/02/2019
Ref N 100003

GBH 5943E

DATE OF ACCIDENT	24 / 02 / 2019	
TIME OF ACCIDENT	20:30 AM/PM	
LOCATION OF ACCIDENT	71 WOODLAND AVE 10	
Exact Purpose use during accident		
NAME OF OWNER	JIAXING INTERIOR DESIGN PTE LTD	
TELP NO	6747 0908	
NRIC	201722794W	
CLAIM TYPE	<input checked="" type="radio"/> OD / THIRD PARTY / Reporting Only	
PRIVATE HIRE	YES/NO ?	
INSURANCE CO.	ALLIED WORLD INSURANCE	
TYPE OF CAVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	AVLPSB 0092421800	
NAME OF DRIVER	As above / If No: CHEN ZHENLONG	
NRIC	057246073	Any passengers:
DATE OF BIRTH	04 / 10 / 1982	
OCCUPATION	<input checked="" type="radio"/> Outdoor / Indoor	
DATE OF DRIVING PASS	20 / 04 / 2017	
GENDER	<input checked="" type="radio"/> Male / Female	
CONTAC NO.	8341 0477 Office:	Home:
ADDRESS		
DRIVER HAVE ANY OWN Vehicle	<input checked="" type="radio"/> NO / If yes : Reg No:	
RELATIONSHIP	<input checked="" type="radio"/> Employee / If No:	
WEATHER CONDITION	<input checked="" type="radio"/> Clear / Raining / Other :	
ROAD SURFACE	<input checked="" type="radio"/> Dry / Wet / Other :	
ANY INJURIES	<input checked="" type="radio"/> No / If yes : Who?	
CONTAC NO.		
POLICE REPORT	No / If yes : Where?	
VEHICLE B NO.	Any Passenger :	
NAME		
CONTAC NO.		
VEHICLE C NO.	Any Passenger :	
VEHICLE D NO.	Any Passenger :	
VEHICLE E NO.	Any Passenger :	
VEHICLE F NO.	Any Passenger :	
ANY WITNESS		
WITNESS CONTACT NO.		
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO	
PARTICULAR WORKSHOP		
TELP NO		
CONTACT PERSON		
FAX NO.		



JIAXING INTERIOR DESIGN PTE. LTD.
180 PAYA LEBAR ROAD
#09-03 YI GUANG FACTORY BUILDING
SINGAPORE 409032

11 Feb 2019

Your application is approved

Dear Sir / Madam

We are pleased to inform you that CHEN ZHENLONG's Work Permit application has been approved in-principle. Please bring your new worker to Singapore before this approval expires on 12 May 2019.

The next page lists the steps you need to take for your worker to be issued a Work Permit card. Your worker can start work on the second day of the arrival in Singapore while waiting for the steps to be completed.

You need to complete the steps within 14 days of the worker's arrival. Otherwise, MOM's approval will be withdrawn and you will need to send your worker home.

Yours sincerely

Penny Han (Mrs)
Controller of Work Passes

NAME OF FOREIGN WORKER
CHEN ZHENLONG

WORK PERMIT NO.
0 57246073

PASSPORT NO.
ED3948003

DATE OF APPLICATION
11 FEB 2019

CPF SUBMISSION NO
201722794W - PTE - 02

MONTHLY LEVY RATE
S\$

SB TRANSMISSION REF NO
8976201


▲ IMPORTANT


- You must comply with the Employment of Foreign Manpower Act, and the Conditions and Regulatory Conditions of Work Permit. MOM will take action on non-compliance. You can read the rules at www.mom.gov.sg
- The actual monthly levy varies from month to month, depending on your workforce profile.


REPUBLIC OF SINGAPORE **DRIVING LICENCE**

License Number: **G7852532R**
Name: **CHEN ZHENLONG**

Birth Date: **04 Oct 1982**
Issue Date: **20 Apr 2017**
Valid Till: **19/04/2022**



 0026765840



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 08 Mar 2012

NP 42BA



Licence No: G7852532R

CERTIFICATE OF INSURANCE

M2300/C

N SB

A466SD2

Cov. Type: C

KUKSBSB

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE

THE ROAD TRANSPORT ACT 1987 OF MALAYSIA

THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975
 THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968
 ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

CERTIFICATE No.

AVCP5B0092421800

ChaNo: JTFAT35Y30K210437

1. Index Mark and Registration
Number of Vehicle

GBH 5943 E

2. Name of Policyholder

JIAXING INTERIOR DESIGN PTE LTD

3. Effective Date of Commencement of Insurance
for the purposes of the Ordinance

27 July 2018
(08:55 Hours)

26 July 2019

4. Date of Expiry of Insurance

5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf)

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION.

ENSURE PTE LTD

Co. Reg. No.: 201017457N

38 Toh Guan Road East

#01-57 Enterprise Hub

Singapore 608581

Tel: 6515 5988 Fax: 6896 6321

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* (For certificate reference MX1, see overleaf)

A. USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.

B. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.

C. USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES.

THE POLICY DOES NOT COVER:

1. USE FOR HIRE OR REWARD OR FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.

2. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

Estimated Value : MARKET VALUE WITH COE/PARF

Hire Purchase Owner : MAYBANK

Type of Cover : Comprehensive

* Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 2794W

Vehicle Details

Vehicle No.: GBH5943E
Vehicle to be Exported: Yes
Intended Deregistration Date: 28 Feb 2019
Vehicle Make: TOYOTA
Vehicle Model: DYNA 150 5MT
Primary Colour: White
Manufacturing Year: 2018
Engine No.: 1KD2798677
Chassis No.: JTFAT35Y30K210437
Maximum Power Output: -
Open Market Value: \$27,084.00
Original Registration Date: 20 Jul 2018
First Registration Date: 20 Jul 2018
Transfer Count: 2
Actual ARF Paid: \$1,355.00

Intended PARF Rebate Details

PARF Eligibility: No
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 19 Jul 2028
COE Category: C - Goods Vehicle & Bus
COE Period(Years): 10
PQP Paid: \$14,576.00
COE Rebate Amount: \$11,660.00
Total Rebate Amount: \$11,660.00

The information contained herein is correct as at 25 Feb 2019

OK