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Insured/Driver Liability: (%) [Note-Est Status (WO): N: 0-20%; P: 21-79%, P: 30-100%] Year of Registration: () Warranty: YES ()/NO () Excess: (\$) Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 ()/32,000 () General Activities: () Londing: \$1,000 () 100 () 100 () General Activities: () Londing: \$1,000 () 100 () 100 () General Activities: () Londing: \$1,000 () 100 () 100 () General Activities: () Londing: \$1,000 () 100 () General Activities: () Londing: \$1,000 () 100 () General Activities: () Londing: \$1,000 () General Activities: () Londing: () Londing: \$1,000 () General Activities: () Londing: () Londing: () Londing: () Londin	-
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SINGAPORE ACCIDENT STATEMENT

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 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.

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 second of the second of	ACCIDENT STATEMENT
Date Of Report	04/03/2019 17:37
Date Of Accident	28/02/2019 15:45
Exact Location Of Accident	EXIT FROM BUKIT BATOK ROAD TO PIE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKV6653E
Insured/Policyholder	
Name Of Registered Owner	CAR COVE LEASING PTE LTD
Co Reg No	200710651D
Email Address	AMYMBHOWARD@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-88694194

OFFICE-88694194

DRIVING CHILD HOME FROM SCHOOL

Alternative Phone No Vehicle Particulars

Manufacturer BMW

X5 XDRIVE35I 7SEATER LED NAV Model

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

COMMERCIAL VEHICLE Vehicle Category

Insurance Company

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

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

999994316 Policy Number

Cover Note Number

Driver

HOWARDS AMY MAXINE Name of Driver

G3160181P NRIC No Date Of Birth 06/10/1963 INDOOR Occupation Date Of Driving Pass 29/07/2016

Driving Experience 2 YEARS AND 7 MONTHS

Gender FEMALE

(LOCAL) +65-88694194 Mobile Number

Fax Number

OTHERS-88694194 Contact Number

AMYMBHOWARD@HOTMAIL.COM EMail Address

Address

329 RIVER VALLEY ROAD #25-02 YONG AN PARK

Postcode

238361

OTHER - HIRER

Was driver an employee of the Insured's Company NO

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 - HEAD TO REAR

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

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

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

Number of Passengers (Including Driver)

NO

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 Carnera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBF1696E

Vehicle Make/Model/Colour

TOYOTA

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

ZHANG DONGDONG

NRIC/Passport Number

G6249750K

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be gampleted by the Policyholder and/or the Authorised Driver.
- Information provided must be as trushful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to regudate policy liability.
- 4 The issue and acceptance of this Form by insurance companies is not an admission of pokey liability on the part of the insurance companies.
- 5. Any talse reporting may be referred to the Traffic Police Department for investigation.
- 5. This report will be forwarded by the insurers to the GIA Records Mangement 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 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.
- 6. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that

- (a) My insurer, noy 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 insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers law yersitaw tirms, 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 perfain personal data about me to pring about delivery of the same as well as on the external cover of envelopes/med pockages), antifor
- (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 unhicle(s) involved in this accident and the Insurers' (awyers/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 discussed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sitted outside of Singapore, for one or more of the above Purposes.

ver's Signature lift erver is not the policyholder/10/ 5.7ms 3:49 pm.

peaked by Reporting Centre Fell

Sketch Plan *

SUKIT BATOK RO

тоуота

A) SKN 6653 E B) 9BF 1696E

WAS OVENING AT THE JUNCTION TO JOIN THE SLIP ROAD TO THE PIE. AS THE TOYOTA IN FRONT OF MG CROSSED THE RUAD JUNCTION ONTO THE SUP RUAD I LOOKED RIGHT TO CHECK THE ONCOMING TRAPPIC FOW. 1 STARTED TO ACCELERATE TO USIN THE TRAFFIC FLOW BUT THE TUYOTA APPEARED TO HAVE STOPPED, ON WAS MOVING VERY SLODBY ON THE SLIP ROAD AND (WAS

Declaration

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



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Jan/04/03/2019

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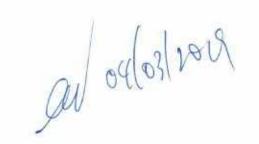
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3/4/2019





SINGAPORE ACCIDENT STATEME	NT
IMPORTANT NOTICE	
incurrence companies to requiring policy 11201111V	up the claims process. e <u>Authorised Driver</u> . e <u>Systole</u> . Any wilful micrepresentation or withholding of material facts may allow
The Issue and acceptance of this Form by insurance comp Any talse reporting may be referred to the Traffic Police	arries is not an admission of policy liability on the part of the insurance companies Department for Investigation.
ACCIDENT STATEMENT	
Date and Time of Accident	* Date: 28 Feb 2019 Time: 3: 45 pm
Exact Location of Accident	+ EXIT TO PIE FROM BUKIT BATOK RD (SONTH)
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	* 80 SKV 6653E
INSURED / POLICYHOLDER (OWN VEHICLE	<u> </u>
Name of Registered Owner (See Insurance Cert.)	
Personal Identification - NRIC (Singaporean/PR) - FIN/Passport Number	
- Not Applicable	
VEHICLE PARTICULARS (OWN VEHICLE)	ManufacturerModel
Vehicle Make / Model Type of Vehicle*	Saloon MPV ORV Van OLorry Bus M/cycle Others
Exact Purpose for which vehicle was being used at time accident Are you claiming under your own insurance policy for relyour vehicle? Vehicle Category*	
INSURANCE COMPANY (OWN VEHICLE)	
Name of Insurance Company *	
Type of Policy	Comphensive Third Party Fire & Theft TP Only
Fleet Policy	Yes O No
Policy Number	
Motor CI	
DRIVER	Same as Insured above
Name of Driver	AMY MAXING HOWARD.
Personal Identification - NRIC (Singaporean/PR)	A CONTRACTOR OF THE CONTRACTOR
- FIN/Passport Number	* G3160181P
Date of Birth	* 6 dd/ 10 mm/ 63 /yy
Driving Date Pass	4 26 dd/ 01 mm/ 87 /yy
Year of Driving Experience	* 32 Year(s) Month(s)
Occupation	* HOUSEWIFE Indoor Outdoor
Gender	t Male Female
Contact Number / Mobile Phone / Fax No	* 8869 4194

200 929	329 RIVER VALLEY RO, # 25-02, YONG AN PAVUE Postcode (238361) amymbhoward @ hotmail.com
Address of Driver	YONG AN PARUC Postcode (238361)
Email Address	amymbhoward @ hotmand.com
Was driver an employee of the Insured's Company?	O Yes O No
f No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own	Yes ← No
Vehicle Registration Number of Drivers Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	100
COURT A DESCRIPTION OF THE ACCIDENT	
GENERAL INFORMATION OF THE ACCIDENT Type of Collision (Eg. Chain collision, Head-On collision, Side	FRONT TO REAK
Swipe, Front to Rear)	
Weather Conditions	Olear O Raining Others
Road Surface	Dry O Wet O Others,
ATTITUTE ASSESSMENT OF THE PARTY OF THE PART	
OTHER INFORMATION	Yes (VNo
Was anybody injured in the accident? Was any other vehicle or property damaged? (Including Witness)	Yes No
DETAILS OF POLICE ACTION	
Was the Accident reported to the Police?	Yes No (If Yes, please state which Police Station.)
Police Station Name	
Police Station Address	
Police Station Contact	Tel No. Fax No
Was notice of intended Prosecution given?	Yes No (If Yes, against whom?)
DETAILS OF OTHER VEHICLE / PROPERTY 1	1
Vehicle Registration Number	GBF 1696E
Vehicle Make/ Model/ Colour	TOYOTA VAN - SILVER-GREET
Details of Properties	Metters - February - F
Name of Driver	ZHANG DONGDONG
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	GG249750K
Contact Number	40-11-1-1
Address	E 1
Name of Insurance Company	
No. of Passenger (Including Driver)	
(Note - Please use page 6 if you need to add more vehic	iles)

REPUBLIC OF SINGAPORE FIN G3160181P





Name
HOWARD AMY MAXINE

Date of Birth 06-10-1963 Nationality BRITISH Sex





FA1846546

DEPENDANT'S PASS

Immigration Regulations



FIN G3160181P

22-06-2017

Date of Expiry 09-07-2019



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



YOU ARE USENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

EFFECTIVE DATE

EFFECTIVE DATE

EFFECTIVE DATE

EFFECTIVE DATE

AND JULY 2016

Moles cars with unladen weight and other motor

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yenicles with unladen weight at 250,049



14P 128A





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) MULES, 1959 (MALAYSIA)

M.T.400 (The below excess is subject to GST)

Comprehensive Commercial Motor

CERTIFICATE NO. 999994316 POLICY EXCESS

S\$1,200.00 ** (I)

WINDSCREEN EXCESS

\$\$100.00

SUM INSURED

Market Value

INSURING WITH COE/PARF Yes

1) VEHICLE REGISTRATION NO.

SKV6653F

2) NAME OF POLICYHOLDER

Goldbell Car Rental Pte Ltd

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

01 January 2019

4) DATE OF EXPIRY OF INSURANCE

31 March 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

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

Additional Excess of \$1000 applies to all claims for Drivers below 23 years old and/or with Driving Experience less than 12 months Additional excess of \$500 applies to all claims for accident outside Singapore

** Policy Excess vary according to Vehicle Usage. Refer to Policy for more details.

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.

5) LIMITATION AS TO USE*

- 1) Use for social, domestic, pleasure purposes and hosiness purposes of insured
- 2) Use für social, domestic, pitrasure purposes and business purposes of any person 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 lowing (other than for reward) of any one disabled mechanically propelled vehicle.
- Use for the carriage of passengers for hire or reward by any person to whom the Wehicle is fired.
 Use for any purpose in connection with Motor Trade.

LOSS OF USE

Not Included

HIRE PURCHASE COMPANY

N.A.

"Limitations rendered inepenative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 159) and Section 95 of the Road Transport Act, 1987 (Malaysia), we not to be included under these headings.

T/We hereby Cestify 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 180) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 15 Jan 2019

030123-000 Acom international Network Pte Ltd 48 Changi South St 1 Level 3 SINGAPORE 486130

AIG Asia Pacific insurance Pte. Ltd.

AUTHORISED WERKESENTATIVE

ORIGINAL

SSPKW.I