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| Veh No. V 19 V3 | I-Motor Cialm For | | = 2/ | 4 | + |
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| OD (TP-) Reporting Only | | 1 | | | 2.77 |
| | I-Photo Uploaded | December | | 1 | |
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| Owner / Driver: (+ | | | | | |
| Policy No: () P | erlod: (| | rer Type: (| 3 | |
| Confirmed by : (| | itei. | | 100% | 1. |
| Insured/Driver Liability: (%) | [Note-Est Status (WO): | The state of the s | F: 21-1990, F: 60 | | |
| Year of Registration: () | 11 211 211 | NO() | | | |
| Execus: (\$ ') Londing: \$1, | 000 ()/\$2,000 (| 7 - VIII and II | · · · · · · · · · · · · · · · · · · · | ETTELL CONTRACTOR | 1 |
| 3。由于由于150000000000000000000000000000000000 | 位为代别是他的特别的特别的 | MANUAL POR | NO safet of tending | 35. | |
| () Walk-In Customer : Customers In | ormation strictly Confide | nual & Strictly | NO lates of tehanic | | |
| () Total Loss Case : to e-mall Insu | rer URGENTLY. | ** | 17 | |) |
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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 GtA Records Management Centre established by the General Insurance Association of Singapore (GtA) 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 PARTY OF THE P | ACCIDENT STATEMENT | | |
|--|---|--|--|
| Date Of Report | 09/04/2019 18:16 | | |
| Date Of Accident | 08/04/2019 08:00 | | |
| Exact Location Of Accident | BLK 177 AND BLK 179 LOMPANG ROAD | | |
| Country/State of Loss | SINGAPORE | | |
| Parket Street Street Street | DETAILS OF OWN VEHICLE | | |
| Vehicle Registration Number | PC1943S | | |
| Insured/Policyholder | | | |
| Name Of Registered Owner | XINGSHENG TRANSPORT SERVICES | | |
| Co Reg No | 41490300E | | |
| Email Address | NOEMAIL | | |
| Mobile Phone No | (LOCAL) +65-90230917 | | |
| Alternative Phone No | OFFICE-85557207 | | |
| Vehicle Particulars | | | |
| Manufacturer | TOYOTA | | |
| Model | COASTER 19 SEATER | | |
| 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? | NO | | |
| If No, Please state action to be taken | THIRD PARTY | | |
| Vehicle Category | BUŞ | | |
| Insurance Company | | | |
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | | |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT | | |
| Fleet Policy | NO | | |
| Policy Number | DMB1SN1639041802 | | |
| Cover Note Number | | | |
| Driver | | | |
| Name of Driver | TAN KHOON SONG | | |
| NRIC No | S0012989E | | |
| Date Of Birth | 25/07/1954 | | |
| Occupation | OUTDOOR | | |
| Date Of Driving Pass | 09/10/1990 | | |
| Driving Experience | 28 YEARS AND 5 MONTHS | | |
| Gender | MALE | | |
| Mobile Number | (LOCAL) +65-90230917 | | |

OTHERS-85557207

NOEMAIL

Address

BLK 309C ANCHORVALE ROAD

#11-47

Postcode

543309

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 - HEAD ON COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?

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)

15

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJE338G

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

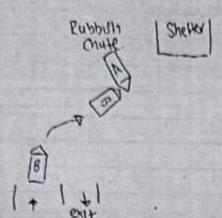
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

A= PC 19439 B= SJE 3386



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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|--------|-------|----------|------|---------------------|------------------------|--|--|--|--------|-------------------|
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I/We declare the foregoing particulars are true in every raspect.

Policyholder's Signature

Date & Time:

Orber's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN NO.

Keld worth

IMPORTANT NOTICE

- 1. Please report correctly 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.
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (e) 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/mall 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.
- (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

(If driver is not the policyhalder)

Date & Times

Reputing Centre Personnel's Signature
Name:
NRIC/FIN No.:

| Road surface: Dry Wet | Usage of veh during of accident: |
|---|----------------------------------|
| Weather condition: Clear Raining | |
| Speed: | |
| speed. | |
| Does driver own a vehicle: yes /no | |
| if yes, veh number plate: | |
| veh insurance co: | |
| Relationship with insured: Employed & Employed | |
| Witness (if any): yes/no | |
| Witness name: | |
| Witness hp: | |
| Witness email (if any): | |
| Witness add: | |
| Witness IC no: | |
| | |
| Third party veh number: SJE 338 G . | |
| Name of third party driver: | |
| IC of third party driver: | |
| HP of third party driver: | |
| Address of third party driver: | |
| Insured/Co name of third party vehicle: | |
| Contact number of insured/Co: | |
| Insurance co of third party vehicle: | |
| insurance co of time party terms | |
| Police report (if any): yes/no | |
| Police report reported at which police station: | |
| Any intended prosecution given: yes /no | |
| if yes, against whom: veh A /veh B driver | |
| | |
| Action taken : claiming third party / claiming own damage / | reporting only |
| No of Pax: 15 pax | |
| | |
| Connect3 client vehicle no: PC 1943 S. | |
| Owner contact no: 9003 09 17 - | |
| 2-1114 02 1011 2010 | |
| Location of accident: BIK 177 a 179 Lompang | KQ. |
| Time of accident: 08:00n/s. | |
| THILL OF MUSICALITY PROPERTY. | |

Any injury: yes /no (if yes, must have police report)

REPUBLIC OF SINGAPORE IDENTITY CARD NO. SOO12989E





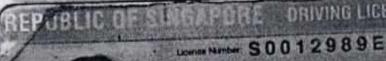
Hame

TAN KHOON SONG

CHINESE

Date of birth 25-07-1954 Country of birth BINGAPORE

non trottor



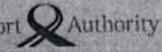
DRIVING LICENCE

TAN KHOON SONG

Bet Date: 25 Jul 1954 lease Date: 01 Sep 2003



Land Transport Authority





VOCATIONAL LICENCE

Licence No: S0012989E

: TAN KHOON SONG

Issue Date : 5/3/2008

Please visit www.lta.gov.sg to check the status of this vocational licence

H/p: 8555 7207





12-03-2010

APT BLK 309C ANCHORVALE ROAD #11-47 SINGAPORE 543309

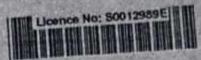
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS 09 JK

Motorcyclin not exceeding 200 cc pg Jul far Motorcycles between 201 oc and 400 Class 28 C9-JOI-1977 Motorcycle's exceeding 400 co. 09 Oct 1974 Motor-Cars and Wotor Tractors the weight of

which unladen does not exceed 2500 billiog while 46 Peb 1990 Heavy Motor Care and Motor Tractors Has weight of which unladen exceeds 2500 killagrams Class 4 18 Sep 1991 Motor Vehicles which are not constructed Class 5

linemselves to carry any load and the weight of which unladen exceeds 7250 killograms

NP 428A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Issue Date Description Type 10/04/1997 10/04/1997 BUS VL 03 BUS ATTENDANT 04





中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. Co Peg No 200208384E

M2601 R SN AN0580A Cov.Type: F

MOTOR PRIVATE BUS

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chepter 189)
Mister Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia)

ORIGINAL

CERTIFICATE No.

DM81SN1639041802

Engine No :NO4CTQ11377 Chano: 3TGFC538903000127

I ledes Mark and Registration

PC19435

Number of Vehicle

2. Name of Policy Holder

XINGSHENG TRANSPORT SERVICES

Effective date of the Commencement of Invariance for the purposes of the Regulations, Ordinance or Enactment

15 June 2018

Excess Sect. II s\$750.00

4 Date of Expiry of Insurance

14 June 2019

5. Persons or Classes of Persons entitled to dove?

Any person provided he is in the Policyholder's employ and is driving on their order or with their permission or any person driving with policyholder's 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.

6. Limitations as to use:"

Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Schedule.

The Policy does not cover

(1) use for 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.

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

I/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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Office

Authorised Signatory

711/23/359936 Annex A Transaction ref 20170529134124987138

The owner and vehicle particulars for Vehicle No. PC1943S as at 29 May 2017 are as follows:

| 1. | Name | : XINGSHENG TRANSPORT SERVICES |
|-----|---|---|
| 2. | | : Business |
| 3. | 2232 1000 PREPARED AND AND AND AND AND AND AND AND AND AN | : 41490300E |
| 4. | DI OCD. | 1 = |
| 5. | | : PC1943S |
| 6. | D 1 11 11 1 21 | : - |
| 7. | | : 15 Jun 2016 |
| 8. | | : 13 Dec 2007 |
| 9. | First Pegistration Data | 12 Dec 2002 |
| 10. | Vehicle Type | : Z20 - Private Hire (Chauffeur) Bus/Coach/Minibus : Bus Carrying School Children : Air-Conditioned |
| 11. | Vehicle Scheme | · Rus Carrying School Children |
| 12. | Attachment 1 | · Air-Conditioned |
| 13. | Attachment 2 | · · |
| | Attachment 3 | * |
| | | : TOYOTA |
| 16. | | : COASTER 19 SEATER |
| 17. | [발대에 기계 기계 발표시험에 기계를 다시되다. | : 2007 |
| 18. | | : White |
| 19. | | : · |
| 20. | | |
| 21. | | : JTGFC538903000127 / - |
| 22. | Propellant | : Diesel |
| 23. | | : N04CTQ11377 / - |
| 24. | Engine Capacity(cc)/Power Rating(kW) | · 4009 /- |
| 25. | | : -/- |
| 26. | Unladen Weight(kg) | . 3390 |
| 27. | Maximum Laden Weight/kg | . 3300 - 4700 |
| 28. | Maximum Laden Weight(kg) Open Market Value | . \$68.201.00 |
| 29. | PARF Eligibility | : No |
| 30. | PARF Eligibility Expiry Date | |
| 31. | Minimum PARF Benefit | |
| 32. | 201 March 1997 | 3 |
| 33. | | : 1550173826 |
| 34. | | : 2007120105000197W |
| 35. | | 12 Dec 2017 |
| 36. | | : C - Goods Vehicle & Bus |
| 37. | Quota Premium/Prevailing Quota Premium | • \$15,001,00 |
| 38. | Actual Quota Premium/PQP Paid | - \$15,001.00 |
| 39. | [[[[[[[]]]]]] [[[[]]] [[[]]] [[]] [[]] | : \$15,001.00 : \$0.00 |
| 40. | CO2 Emission(g/km) | of the Committee Committee |
| 41. | Actual CEVS Rebate Utilised | <u> </u> |
| 42. | CEVS Surcharge Paid | 1- |
| 43. | [12] [14] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2 | : \$3,415.00 |
| 44. | [보고] [12] [12] [13] [13] [13] [13] [13] [13] [13] [13 | : 12 Dec 2027 |
| 45. | N7 Y2 | : 12 Dec 2027 |
| 46. | Road Tax Start Date | ; * : = |
| 47. | Road Tax End Date | • • • • |
| 48. | | |
| | a ventage | : To renew the COE, the Prevailing Quota Premium |

payable is that of Category C.



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: 3665500200 / 05T Reg. No.1 M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report. .:

| | ADDEN | DUM 4 5 |
|--|--|---|
| PARTICULARS OF PERSON N | AKINGTHEAMENDMEN | NTS: |
| Original Report No : Mug | t4G046432 | Vehicle Registration No: PC 1943 S |
| Name(as shownin NRIC) : Tou | KHOON SONS | NRIC/FIN/PassportNo : SOOD 989E |
| Vehicle Driver / Vehicle Ov | wner) (*) Please delete as | |
| Address : | | Singapore(|
| Contact (Tel) ; | | Mobile No.: 85557207 |
| Email Address : | , | 747. |
| Date of Accident : 080 | 04/2019 | Time of Accident: 08:00 |
| Place of Accident : BIK | C 177 AND BU | ix 129 Company from |
| Insurance Company:(| HINA MORINEL | |
| | | |
| ADDITIONALINFORMATIO | The state of the s | 7 770 1 7 7 12 12 |
| make the following amendn | | ent and would like to include additional information of |
| The state of the s | L: OMBISNIE | 29041802 |
| LACE - Kertulan | . 017111 | 2011 |
| <u> </u> | | |
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| V | | |
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| *************************************** | | |
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| | | |
| | | (ler |
| Policyholder / Driver's Sign | ature | Reporting Centre Personnel's Signature |
| Date: | | Name: |

NRIC/FIN No .:

31.

Date: