Letter of Authorisation

RE: ACCIDENT NVOLVING SGX 6848Y and SHA 76787
ALONG/AT Parking Int at Sin Ming Vicom Car Park ON 27 103 1 2019
1. I/We, Unique Tourit Service Pte Ltd (NRIC No. 1974 01067R), owner/driver of motor vehicle no. SGX 6848Y, & residing at
repairing my/our vehicle, I/we hereby authorise you to claim on my/our behalf for the costs of repair and loss of use. I/We further confirm and authorise you to use my/our name/s to engage the said service of a solicitor to proceed with negotiation with the defaulting party's insurance company for payment of the same and in the event negotiation fails, to instruct the solicitor to issue Summons on my/our behalf and in my/our name/s to claim for the same. Irrespective whether the claim is successful or not, all legal costs incurred shall be borne by you, provided we rendered our assistance as per second paragraph stated herein below.
2. I/We understand that by signing this Letter of Authorisation, I/we has/have to render whatever reasonable assistance to you including signing all relevant Court's document and attendance in Court to give evidence to enable the claim to succeed. If I/we failed or neglected to do so despite request from you, you shall be entitled to claim from me/us the repair costs together with legal costs, other incidental costs and expenses pertaining the issuance of Summons in order to obtain payment from defaulting party.
3. You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my/our claim, you are authorised to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my/our claim, on my/our behalf. You also have my/our full authority to collect all compensation monies pertaining to the above-mentioned accident from insurance company or any other party, directly to your workshop M/s
4. In the event the claim is settled or judgment is obtained against the defaulting party, payment after deducing all costs and disbursements incurred should be drawn in your name or my/our name/s (at your discretion) and will be forwarded to you.
5. This letter of Authorisation is irrevocable.
Signature: Name: Duique Fourt Gernice Pte Ital
NRIC NO: 17+40+06+K
Date this 06. day of November 20 19.

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

7. By the loagement of this report to the insurers, you hereby conso- aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	27/03/2019 15:11
Date Of Accident	27/03/2019 13:45
Exact Location Of Accident	PARKING LOT AT SIN MING VICOM CAR PARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SGX6848Y
Insured/Policyholder	
Name Of Registered Owner	UNIQUE TOURIST SERVICE PTE LTD
Co Reg No	197401067R
Email Address	UNIQTOUR@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62927656
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
The Parties of Control of the Contro	

COMPREHENSIVE Type Of Coverage

YES Fleet Policy

999994576/1007347/18-00000 Policy Number

Cover Note Number

Driver

ONG GEE BEN Name of Driver S1218589H NRIC No 18/02/1956 Date Of Birth INDOOR Occupation 10/08/1976 Date Of Driving Pass

42 YEARS AND 7 MONTHS Driving Experience

MALE Gender

(LOCAL) +65-97644490 Mobile Number

Fax Number Contact Number

NOEMAIL **EMail Address**

5 JURONG EAST STREET 32 Address

#16-04

609479 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

YES

NO

0

NO

NO

CLEAR Weather Conditions DRY Road Surface

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?

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)

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.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

SHA7678Z

TAXI

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

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)

Page 2 of 16

Sketch Plan Pg. 1

SKETCH PLAN

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- 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.
- 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.
- 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:
 - 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:
 - 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.

Driver's Signature

2.7 MAD 2019

W111-50

's signature

10

(If driver is not the policyholder)

Date & Time:

2 7 MAD 2019

(S:(IN)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:Poh Kwee Choo \$6840683A

GIARMIC SketchPlanForm VS

Sketch Plan Pg. 2

SKETCH PLAN
-Vicour Inspection-Centre
1 ASKA 7678 Z
Q 84 680 A 7
LA 78
Parking Lots
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
Do strangle song newicle sax 6848 y was
parked at Sin Wine VICOM Car Park lot No. To.
Approx. 1345 hrs, a taxt leg No 31/11/01
parked infront by Mr. him long sens, 1/2 No
500377371 707VI
1011- ann and crushed on
NO one was injuried.
DECLARATION
I/We declare the foregoing particulars are true in every respect.
Reporting Centre Personnel's Signature
Policyholder's Signature Name: Poh Kinge Choo
CAPAC Securitary 27 WAP 2019

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CERTIFICATE OF INSURANCE Pg. 1



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, 1959 (MALAYSIA)

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994576/100734718-00000

OWN DAMAGE EXCESS WINDSCREEN EXCESS

S\$1,200.00 (1) S\$100.00

(for policies with effect from 1st November 2002)
SUM INSURED \$\$1.00

INSURING WITH COE/PARF

NO

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

SGX6848Y

UNIQUE TOURIST SERVICE PTE LTD

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

1 Jun 2018

4) DATE OF EXPIRY OF INSURANCE

4) DATE OF EXPIRY OF INSURANCE 31 May 2019
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Insured's order or with their 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) LIMITATION AS TO USE *

Use for the carriage of passengers or goods in connection with the Insured's business.
Use for social, domestic, pleasure 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 whitst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER

N/A

HIRE PURCHASE COMPANY NA

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 (Malaysia), 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-Parly Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 6 Jun 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD.

500533-010 NEW FRONTIERS ALLIANCE PTE LTD 371 ALEXANDRA ROAD #05-05 AIA ALEXANDRA SINGAPORE 159963 SP-LC

Authorised Representative

ORIGINAL

DRIVER'S NRIC + DRIVING LICENCE Pg. 1







