SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 <u>truthful and accurate</u> 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.

ACGIDENT STATEMENT Date Of Report 10/04/2019 14:49 Date Of Accident 10/04/2019 02:20 Exact Location Of Accident LORONG 17 GEYLANG Country/State of Loss SINGAPORE DETAILS OF OWN VEHICLE //ehicle Registration Number SMJ3328D DETAILS OF OWN VEHICLE //ehicle Registration Number SMJ3328D TANG HENG HUAT HRIC No S14733020 SINGAPORE //ehicle Prome No S14733020 SINGAPORE //ehicle Prome No Office-98383328 //ehicle Particulars //ehicle Particulars //ehicle Particulars //ehicle Particulars //ehicle Particulars //ehicle Category PRIVATE CAR //ehicle Category PRIVATE CAR //ehicle Category PRIVATE CAR //ehicle Category PRIVATE CAR //ehicle Coverage COMPREHENSIVE //epiect Policy NO Policy Number //orver Divier Name of Driver TANG HENG HUAT //ehicle Obiver //ehicle Obiver TANG HENG HUAT //ehicle Obiver //ehicle O	archiving and that copies of this report will, for a fee, be made avai 7. By the lodgement of this report to the insurers, you hereby const aforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
Date of Accident 10/04/2019 02-20 Exact Location Of Accident LORONG 17 GEYLANG SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Pagistered Owner TANG HENG HUAT SIA7302G Vehicle Particulars Mobile Phone No (LOCAL) +65-98383328 Vehicle Particulars Manufacturer MERCEDES-BENZ E200 Vehicle Particulars Manufacturer Merce Season Seaso	dioresald.	ACCIDENT STATEMENT
Date of Accident 10/04/2019 02-20 Exact Location Of Accident LORONG 17 GEYLANG SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Registration Number SMJ3328D Vehicle Pagistered Owner TANG HENG HUAT SIA7302G Vehicle Particulars Mobile Phone No (LOCAL) +65-98383328 Vehicle Particulars Manufacturer MERCEDES-BENZ E200 Vehicle Particulars Manufacturer Merce Season Seaso	Date Of Report	10/04/2019 14:49
DETAILS OF OWN VEHICLE Vehicle Registration Number SMJ3328D Vehicle Registration Number TANG HENG HUAT VENIC No S1473302G Vehicle Policy No Vehicle Vehicle Policy No Vehicle Vehicle Policy No Vehicle Vehicle Policy No Vehicle WERCEDES-BENZ Manufacturer Manufacturer Manufacturer Manufacturer Manufacturer Model Exact Purpose for which vehicle was being used at time of accident Vere you claiming under your own insurance policy or repair to your vehicle? Vehicle Category No Please state action to be taken Vehicle Category No Please state action to be taken Vehicle Coverage COMPREHENSIVE No Please State action to Vehicle Venic Policy No No Please State Action to Vehicle VEN ON Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No No Please State Action to Vehicle Venic Policy No N	Date Of Accident	10/04/2019 02:20
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Insured/Policyholder Insured/I	Country/State of Loss	SINGAPORE
Insured/Policyholder Name Of Registered Owner Note Mall (LOCAL) +65-98383328 NOEMAIL (LOCAL) +65-98383328 Note Mall (LOCAL) +65		DETAILS OF OWN VEHICLE
Name of Registered Owner NRIC No S1473302G Mobile Phone No NoEMAIL Mobile Phone No Notemative Phone No Note Number Number Number Note Num	Vehicle Registration Number	SMJ3328D
RRIC No Email Address NOEMAIL Mobile Phone No Clice-98383328 Noternative Phone No No Noternative Phone No N	Insured/Policyholder	
Email Address Mobile Phone No (LOCAL) +65-98383328 Alternative Phone No Office-98383328 Vehicle Particulars Manufacturer Mendel Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR Insurance Company Alia ASIA PACIFIC INSURANCE PTE. LTD. Type Of Coverage Coder Policy Policy Number Cover Note Number Cover Note Number Driver Name of Driver TANG HENG HUAT SIRIC No S14733026 Date Of Birth Office P8383328 MERCEPS-98383328 MERCEPS-98383328 MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ E200 ALE OF SIRIC No S14733026 Date Of Birth Office-98383328 MERCEPS-98383328 MERCEPS-98383328 MERCEPS-98383328 MERCEPS-98383328 MERCEDES-98383328 MERCEDES-98383328 MERCEDES-98383328 MERCEPS-98383328 MERCEDES-98383328 MERCEPS-98383328 MERCEDES-98383328 MERCEDES-983	Name Of Registered Owner	TANG HENG HUAT
Mobile Phone No (LOCAL) +65-98383328 Alternative Phone No Office-98383328 Wehicle Particulars MERCEDES-BENZ Monufacturer MERCEDES-BENZ Model E200 Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Wehicle Category PRIVATE CAR INSURANCE PTE. LTD. Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth Office-98383328 (LOCAL) +65-98383328 Office-98383328 Office-98383328 MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ MERCEDES-BENZ E200 ALECAL STATEMENT OF ST	NRIC No	S1473302G
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Manufacturer Model E200 Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR Insurance Company Insurance	Alternative Phone No	Office-98383328
Model Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Wehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Alig ASIA PACIFIC INSURANCE PTE. LTD. Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Driver Name of Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth E2200	Vehicle Particulars	
Exact Purpose for which vehicle was being used at ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken //ehicle Category Name of Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. Type Of Coverage Company Policy Number Policy Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G 22/02/1961	Manufacturer	MERCEDES-BENZ
ime of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR PRIVATE CAR Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Driver Name of Driver TANG HENG HUAT SIRIC No Date Of Birth AIR SIRIC No SI 1473302G 22/02/1961	Model	E200
or repair to your vehicle? If No, Please state action to be taken Vehicle Category PRIVATE CAR PRIVATE CAR Insurance Company Name of Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Fleet Policy NO Policy Number Policy Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth PRIVATE CAR	Exact Purpose for which vehicle was being used at time of accident	
Alg ASIA PACIFIC INSURANCE PTE. LTD. Type Of Coverage COMPREHENSIVE Fleet Policy Number 1900010942 Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Are you claiming under your own insurance policy for repair to your vehicle?	YES
Name of Insurance Company Name of Insurance Company Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. COMPREHENSIVE Fleet Policy NO Policy Number 1900010942 Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	If No, Please state action to be taken	
Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD. Cype Of Coverage COMPREHENSIVE NO Policy Number 1900010942 Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Vehicle Category	PRIVATE CAR
COMPREHENSIVE Fleet Policy NO Policy Number 1900010942 Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Insurance Company	
Fleet Policy Policy Number 1900010942 Cover Note Number Driver Name of Driver NRIC No S1473302G Date Of Birth 22/02/1961	Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Policy Number 1900010942 Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Type Of Coverage	COMPREHENSIVE
Cover Note Number Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Fleet Policy	NO
Driver Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Policy Number	1900010942
Name of Driver TANG HENG HUAT NRIC No S1473302G Date Of Birth 22/02/1961	Cover Note Number	
NRIC No S1473302G Date Of Birth 22/02/1961	Driver	
Date Of Birth 22/02/1961	Name of Driver	TANG HENG HUAT
	NRIC No	S1473302G
Occupation INDOOR	Date Of Birth	22/02/1961
	Occupation	INDOOR

04/01/1982

37 YEARS AND 3 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98383328

Fax Number

Contact Number OFFICE-98383328

EMail Address NOEMAIL

BLK 21 HAIG RD #01-15 Address

Postcode 430021 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

Type Of Accident **COLLISION - HEAD TO REAR**

NO

2

NO

NO

NO

2

NO

NO

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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)

Passenger 1 Name: : UNKNOWN

> 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

REFER POLICE REPORT NO: T/20190410/2017. GEYLANG NPC.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

REFER CSE KO Remarks/ Reasons:

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **SFN288S**

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)

Sketch Plan

SKETCH PLAN

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
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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")
- 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.

Kerlyn Ong Kai Li

DID: 6771 4420 HP: 9186 5113

Email: kerlyn.ong@cyclecarriage.com.sg

Cycle & Carriage Industries Pte Lan

Customere Service Control Somers Loop

Name: KERLYN NRIC/FIN No.:

Policyholder's Signature Date & Time 10/04/2019 1422 Driver's Signature (If driver is not the policyholder) Date & Time

ETCH PLAN		
COURT CIRCUMSTANCES OF THE ASSESSMENT		
CRIBE CIRCUMSTANCES OF THE ACCIDENT		
CLARATION		
declare the foregoing particulars are true in every respect.	vert and file the claim under your own policy. Falling t	a de
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re	vert and file the claim under your own policy. Failing t	o do
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re r insurance company will not allow nor accept	t the claim.	o do
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re r insurance company will not allow nor accept	t the claim.	o do
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re r insurance company will not allow nor accept	vert and file the claim under your own policy. Failing t t the claim.	o do
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declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re ir insurance company will not allow nor accept	t the claim. surance company for any further details) Kerlyn Ong Kai Li	
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re ir insurance company will not allow nor accept	kurance company for any further details) Kerlyn Ong Kai Li DID: 6771 4420 HP: 9186 5)	13
declare the foregoing particulars are true in every respect. ase note that you have 14 calendar days to re ir insurance company will not allow nor accept	t the claim. surance company for any further details) Kerlyn Ong Kai Li	13

Reporting Centre Personnel's

Name: KERLYN

NRIC/FIN No.:

Driver's Signature

Date & Time

(If driver is not the policyholder)

Policyholder's Signature

Date & Time 10/04/2019 1422





Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999 1 of 3 Report No. T/20190410/2017

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/04/2019 03:19		Made:	Vide Report No.:	Station Diary No.: 12		
Informa	nt's Partic	ulars		The second of the second of the second		
	f Informant: IENG HUA		Address: APT BLK 21 HAIG ROAD #01-15 SINGAPORE 430021			
ID Type / ID No.: NRIC NO / S1473302G			Contact No.: Home/Office:	Mobile: 98383328		
Nationality: SINGAPORE CITIZEN		EN .	Email:			
Sex: Age: Date of Birth: Male 58 22/02/1961			Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: SOLE PROPRIETOR			Driving Licence Information: Class:	Date of Expiry:		

Seneral Inform	mation of the Accide	ent			
Type of Accident:	Non-Injury Others				
Location: Along Road 1 LORONG 17					
01		Road Surface: Dry	R	oad Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	1000	Traffic Volume: Light	
Type of Collisi Between Movi	ion: ing Vehicles - Head 1	o Rear		nyone conveyed by mbulance:	

Details of V	ehicle Invo	lved		1500000		Section 1
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SFN288S	Car					1
SMJ3328D	Car	MERCEDES BENZ	E200 AVG (R18 LED)	Black	Slightly Damaged	2

Details of V	ehicle Insurance		The state of the s	100000
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMJ3328D	AIG ASIA PACIFIC INSURANCE PTE.	1900010942	30/01/2019	29/01/2020





Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014

Report No. T/20190410/2017

Tel No: 1800-8486999

CONTINUATION OF REPORT

Details of Perso	n Involved		Mary Carlotte	Marine Street	3,000	A STATE OF THE PARTY OF THE PAR
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	edestriar	Cross	sing: NA
Driver		10 PH 100		1000		THE RESIDENCE OF THE PERSON NAMED IN
Name	TANG HENG HUAT	Т		ID No	+	S1473302G
Related Vehicle	SMJ3328D (Car)			Conta	ict No.	98383328
Hospital/Clinic	NIL			Class Drivin Licend Expire	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	12.00	Date Disc	_	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o		_	

Brief Details.

On 10/04/2019 at about 2.19am, I was reversing my car SMJ3328D along the backlane of Lor 17 Geylang. When my vehicle was reversing outward, I turned my head to check the rear and I saw another on-coming car from Lor 17 Geylang.

I quickly step my brake and my car came to a complete stop. However, the car continue to move forward and his car front left hit onto my car rear right causing a dent on my car rear right bumper, the car continue to move forward and brushed against my car causing multiple scratches on his own vehicle .However, when I asked the driver for his contact details but he refused to give. his car plate number is SFN288S.

I am not injured and I do not have in car camera installed.





Police Station Of Origin: Geylang N.P.C 132 Paya Lebar Road SINGAPORE 409014 Tel No: 1800-8486999

3 of 3 Report No. T/20190410/2017

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sgt 2 NG KA WAI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/04/2019 03:19
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	



COVER NOTE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

The following risk describes on this Cover Note is hereby HCLD COVERED on the terms and condition

Name of Policyholder : TANG HENG HUATO Period of Insurance 30:-24 Jan 2019 to 25 Jan Engine No.

: 27492031674921 Chasis No. : WDD2130422A561156

Vehicle No. Cover Note No. Endorsement No.

Issued Date

: 1900010942 : 24 Jan 2019

SMJ 3328D

ABOUT THE COVER

Mai e/Model : MERCEDES Benz E200 Sedan Avantgarde

Engine Capacity/Tonnage : 1,991.00 CC

Driver Restriction :NA

Sum Insured : Mari at Value Off Peak Car : No

First Year of Registration : 2019 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*;

In Proposition

In Proposition

In Proposition

An other person who is arising on the Policyhodis's order or with higher personation.

This indicy will indentify the Policyholder or any authorised driver only if height meals the specified age condition.

You it are to pay an eddifunal sum of \$3,000 as "Young and/or inexportanced Driver Excess" ("YEPR") if You are or Your Authoris years' officing expurience.

Age Condition

: All Age Condition

Limitation as to use*

Our city for anciel, domestic and pleasure purposes and for the Policyholder's business. This Policy does not caver use for his or reward, disking sulfion, driving test, neoing, pace-mak busins, as a use for any purpose in convection with heliot Trade.

Loss of Use 2000ec

*Lint allows rendured into tradition by Socials 6 of the Mater Vehicles (Third-Perly Risks and Compensation) Act (Co.), 189) and Socials 95 of the Read Transport Act, 1987 (Materylls), are not to be included under these headings.

all devices of a control of the party of the

EXCLESS

Section 1 Fire - 50 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Wineserson: \$100

Named Driver and Excess (where applicable) TALIC HEND HUAT - \$816 (Own Danage)

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

1.Cy le & Carriage Euros: Service Center (For accident reporting only). Add: 330 Uni Rood 3 Singapore 408550 62:41818

2.Cy:le & Cerriage Pandun Loop Service Cerriar - Body Core & Repair Add: 186 Panden Loop Singapore 128376 -2061818

For cuber Approved Reporting Contract/NG Authorised Repairers, please contact our 24-hour accident emergency habine at +65 6336 6200. Alternatively, you may refer to AIC wotable www.alg.com.ag

INPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

If you do not require your Curplicate of incurance and policy decoments within 30 days from the inception cate elated on this cover note, planed contact AIG immediately.

Evel be aby, confly that this Cover Note is based in accordance with the provisions of on Motor Values (Third harry Raiss and Co. persuators) Act (Cop. 103), Part IV of the Road Transport Act, 1987.

(Males), a) and Mater Vehicles (Third Party Reiss) Rules, 1999 (Maleyste). For Corporate Poticies, the Cover Note is a last or 60 days from the commencement date of the period of insurance.

00046-2233

CYCLE & CARRIAGE - JULI

239 ALEXANDRA ROAD

SINGAPORE 159830

Under written by AIG Asia Pacific Insurance Pte, Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

REPUBLIC OF SINGAPORE DRIVING LICENCE Licotan fearnine S 1 4 7 3 3 0 2 G TANG HENG HUAT

> ben Date 22 Feb 1961 mass Date: 19 Apr 2004

FOR C&C USE ONLY 0011193407

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1473302G





TANG HENG HUAT

董 兴 發

22-02-1961 M

SINGAPORE



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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of 94 Jan 1982 which unladen does not exceed 2500 kilograms

™ S1473302G



FOR C&C USE ONLY

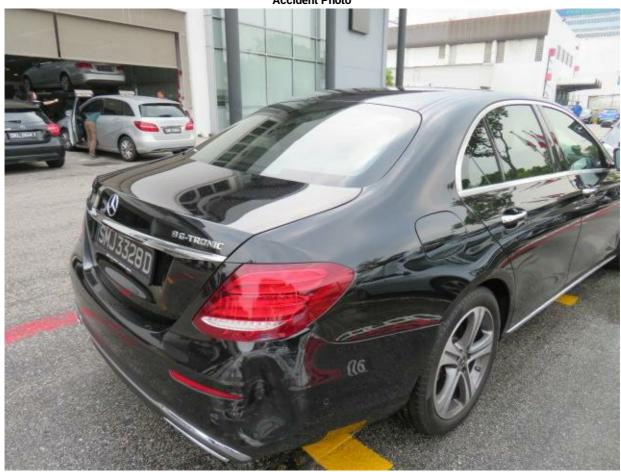
07-09-2004

APT BLK 21 HAIG ROAD #01-15 SINGAPORE 430021

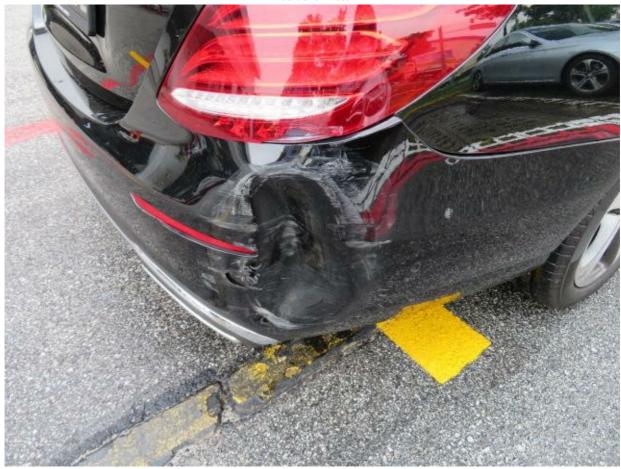
NP 428A











Accident Photo



Accident Photo



Accident Photo

