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- Insur				ort by Fax / Hand to	Owner/Wksp		
Preferred	Wksp / INC Assign	n Wksp / QW: (LEE BRO		Tel:	Fax:	
TP Partic	culars:	Veh No:	SFK 131 B)/Non-INC(
Owner/	Driver: (•			Tel:	<u> </u>	
Policy N	lo: () Pe	riod: ()	Cover Type: (——— <u> </u>	
(Confirmed by : (Date:	Time:		
Insured/	Driver Liability:	(%)[Note-Est. Statu	s (WO): N: 0-20	%; P: 21-79%. F: 8	30-100%]	
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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.
- 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

THE STREET STREET, STR	ACCIDENT STATEMENT
Date Of Report	11/06/2019 09:12
Date Of Accident	10/06/2019 12:15
Exact Location Of Accident	PIE TWDS SLIP RD TO JURONG TOWN HALL
Country/State of Loss	SINGAPORE
THE CONTRACTOR OF THE CONTRACT	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJV4895Z
Insured/Policyholder	
Name Of Registered Owner	MR NEO CHENG GUAN
NRIC No	S7610472G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93877897
Alternative Phone No	OTHERS-93877897
Vehicle Particulars	
Manufacturer	NISSAN
Model	TEANA
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3073451800
Cover Note Number	

Driver

Name of Driver MR NEO CHENG GUAN NRIC No S7610472G Date Of Birth 12/04/1976 Occupation INDOOR Date Of Driving Pass 15/11/1997 Driving Experience

21 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93877897

Fax Number

Contact Number OTHERS-93877897

EMail Address NOEMAIL Address BLK 154 GANGSA ROAD

#21-331

Postcode 670154

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

- S

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? NO

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

NO

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. 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

PLS REFER TO THE ATTACHED STATEMENT.

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

SFK131B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

SALLY TAI

NRIC/Passport Number

Contact Number

98236806

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

I MORTANT NOTICE

- 1. I lease report correctly the details of the accident to speed up the claims process.
- 2 his 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 acts 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 temperature.
- 5 Inv 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 issociation of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. We 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)

lunderstand, acknowledge, agree and consent that:

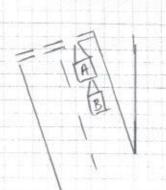
- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal 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:

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: PIE towards also road town Hall

SJU 48952



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

-	I was driving along the above mention Roos. I Stopped											
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the	Suller	I	Ca	Fett	QA.	Impact	Som	the	rear.	we	excharge	details
antl	leH.											
					711							

DECLARATION

Date & Time:

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

X Policyholder's Signature

Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature

Name:

DATE OF ACCIDENT	10 / 06 / 2019.
TIME OF ACCIDENT	1215 AM / (1).
LOCATON OF ACCIDENT	PIE towards slip nood to Farany Town Hall
Exact Purpose use during accident	personal ase,
NAME OF OWNER	
TELP NO.	Neo Cheng Guan.
NRIC	93877897. S76104726.
CLAIMIYPE	
INSURANCE CO.	China Reporting Only
TYPE OF COVERAGE	Corprehensive / Third Party / Third Party Fire & Theft
POLICYNO.	DMPCSN 367345 1800 .
NAME OF DRIVER	A above / If No;
NRIC	Any Passenger; ••
DATE OF BIRTH	12 / 04 / 1976
OCCLIPATION	Outdoor / mdor
DATE OF DRIVING PASS	15 /11 /1997.
GENDER	/ Female
CONT ACT NO.	Office: Home:
ADDRESS	B/ 154 gangsa Road # 21-331 sc670154).
DRIV EROWN ANY VEHICLE	No / Yes (Reg No):
RELA TIONSHIP	Employee / If No:
WEATHER CONDITION	or / Raining / Others,
ROAD SURFACE	/ Wet / Others,
ANY INJURIES	/ Yes (Who?):
CONTACT NO.	
POLICE REPORT	Oo / Yes (Where?):
VEHICLE (B) NO.	SFILI31B Any Passenger O.
NAME	Sally Tai
CONTACT NO.	9823 6806.
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.	
PARTICULAR WORKSHOP	Lee Brothers Automotive Pte Ltd
ADDRESS	1 Kakit Bukit Ave 6 #02-47
	Autobay@Kaki Bukit Singapore 417883
CONTACT NO.	(O) 6509 5521 (Fax) 6509 5523
EMAIL	sales@leebrothers.com.sg

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7610472G



NEO CHENG GUAN (LIANG QINGYUAN)

清

CHINESE

12-04-1976

SINGAPORE



EPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7610472G

NEO CHENG GUAN (LIANG QINGYUAN)

But Date: 12 Apr 1976 Issue Date 29 Sep 2003

3809864 KN S7610472G 24-07-2006 APT BLK 154 GANGSA ROAD #21-331 SINGAPORE 870154 Date: 15/03/2014 (R) NRIC No: \$76104726

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(E

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 15 Nov 1997

VAC Use Only

NP 428A





中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

MIXIT N SN ANOS62A COMPREHENSIVE AUTOSAFE

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)

CERTIFICATE No.

DMFCSN3073451800

Engine No : VQ25481576A

Chassis No: JNIBBUJ3200002336

1. Index Mark and Registration Number of Vehicle

2. Name of Policy Holder

MR NEO CHENG GUAN

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

15 NOVEMBER 2018 (16:12 HOURS)

NAMED DRIVERS EX SECT. I.....S\$1,000.00 IN ADDITION TO NAMED DRIVERS EX:

26 JANUARY 2020

4. Date of Expiry of Insurance

EX SECT. I - AGE >= 26......\$\$500.00

* AGE AS AT DATE OF ACCIDENT

5. Persons or Classes of Persons entitled to drive *

(A) THE POLICYHOLDER.

(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S GROEF OR WITH HIS 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 FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING FACE-MAKING, RELIABILITY TPIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$500 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) PTE LTD AS HP OWNER

* 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-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.

Countersigned By:

Authorised Signatory