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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

W. Constitution	
÷	ACCIDENT STATEMENT
Date Of Report	10/07/2019 10:14
Date Of Accident	09/07/2019 15:40
Exact Location Of Accident	JUNC OF GUILLEMARD RD & LOR 22 GEYLANG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBJ6160E
Insured/Policyholder	
Name Of Registered Owner	BLU VENTURES PTE LTD
Co Reg No	
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-69396200
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DHOM110168781900
Cover Note Number	CONTRACTOR OF THE PROPERTY OF
Driver	
Name of Driver	TAN PENG SOON (CHEN BINGSHUN)
NRIC No	S7123646C
Date Of Birth	14/07/1971
Occupation	OUTDOOR
Date Of Driving Pass	04/09/1998
Priving Experience	20 YEARS AND 10 MONTHS
Gender	MALE
Nobile Number	(LOCAL) +65-96934326
ax Number	TO SERVICE STORY OF THE SERVIC
Contact Number	
Mail Address	NOEMAIL

Address

BLK 227 SIMEI ST 4 #09-44

Postcode

520227

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

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

SIDE SWIPE

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

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

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

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJV883J

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

IMPORTANT NOTICE

- 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>.
- 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.

BLU VENTURES PTE LTD

66 Tannery Lane #02-03, SINDO Building, Singapore 347805 T: +65 6939 6200 F: +65 6747 3647

E. bluventures@singnet.com.sg

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

DECLARATION

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

BLU VENTURES PTE LTD

660Textree 1 sang #17203, SINDO Ruildring Singapore 347805 T: +65 6939 6200 F: +65 6747 3647 E: bluventures@singnet.com.sg

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

I WAS TRAVELLING ALONG GUILLEMARD RD ON THE CENTER LANE, WHILE APPROACHING JUNC WITH LOR 22 GEYLANG, THE LIGHT WAS ON MY FAVOR AND THE CENTER LANE I WAS DRIVING IS FOR TURNING LEFT AND GOING STRAIGHT LANE, WHILE TURNING LEFT INTO LOR 22 GEYLANG, SUDDENLY VEH B COME FROM THE EXTREME LEFT LANE (ONLY FOR TURNING LEFT) GOING STRAIGHT CROSS THE JUNC, AS THE RESULT, WE BOTH VEH COME TO A COLLISION.

ACCIDENT STATEMENT

LOCATION: June of Gwillemard Rd & Lor 22 Geyl 1. DETAILS OF VEHICLE OIVEHICLE NUMBER: GET 616 0 E DINSURANCE COMPRENT: CIPOLICY NUMBER: GIPOLICY TYPE: (COMPRENTINE) JIPOLICY TO COMPRENTINE) JIPOLICY TO COMPRENTINE JIPOLICY TO COMPRENTINE JIPOLICY HOLDER ANAME: BLM VENTURES FRE LEW ANAME: BLM VENTURES FRE LEW JIPOLICY HOLDER ANAME: BLM VENTURES FRE LEW JIPOLICY HOLDER ANAME: BLM VENTURES FRE LEW JIPOLICY HOLDER ANAME: Tan Peng Soon. (MALE / FEMALE) DINRIC/FIN/PASSPORT: CONTACT: 9693 43 26. JIPOLICY TYPE: (COMPRENTINE) JIPOCOLUPATION: (INDOOR / OUIDOOR) JIPOCOLUPATION: (INDOOR / OU	A	CCIDENT DATE:	7.17.1	9)(DD/MM/Y	YYY), TIME:(/	5 . 4a 1/44
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2. INSURED / POLICY HOLDER A)NAME: BIM Ventures Pre Ltd. (MALE / FEMALE) b)NRIC/FIN/PASSPORT: CONTACT: 6139 (2200 "CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER BINKER "CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER BRIVER O]NAME: Tam Peng Soom. (MALE / FEMALE) b)NRIC/FIN/PASSPORT: CONTACT: 9693 4326. (1) CONTACT: 9693 4326. "CONTACT: 9693 4326.			Let the Amazon Chall	THE RESIDENCE AND A SECOND	PI ID 4 4 4	
AJNAME: BLU Ventures Pte Ltd. [MALE/FEMALE] b)NRIC/FIN/PASSPORT:	7			PARTY CLAIM /	REPORTING O	NLY)
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REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7123646C



TAN PENG SOON (CHEN BINGSHUN)

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CHINESE

14-07-1971

SINGAPORE



For LKK/NAC Use Only





12-03-2018

APT BLK 227 SIMEI STREET 4 -#09-44 SINGAPORE 520227

* TO DRIVE VEHICLES-IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

For LKK/NAC Use Only



United Overseas Insurance Limited 3 Anson Road #28-01 Springleaf Tower Singapore 079909 Tel (65) 6222 7733 Fax (65) 6327 3869 / 6327 3870 Email: ContactUs@uol.com.sg uoi.com.sg Co. Reg. No. 197100152R

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)

ORIGINAL

CERTIFICATE NO.

DH0M110168781900

Excess:

\$500/-SECTION 1

Type of Cover

COMPREHENSIVE

\$3000/-APPL TO <25 YRS & OR <3YRS EXP

Vehicle Number

GBJ6160E

\$100/-WINDSCREEN DAMAGE CLAIM

Name of Insured

BLU VENTURES PTE LTD

Restricted Driver(s) NOT APPLICABLE

Period of Insurance 12 June 2019 to 11 June 2020

Engine#

1KD2857601 Chassis# JTFAT35Y00K213361

Hire Purchase

Daimler Financial Services Africa & Asia Pacific LTD

Goods carrying - Private Type [MZ 300]

AUTHORISED DRIVER

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

LIMITATIONS AS TO USE

(1) Use in connection with the Insured's business
(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's

(3) Use for social domestic and pleasure purposes THE POLICY DOES NOT COVER

(1) Use for hire or reward or for racing pace-making reliability trial or speed-testing (2) Use whilst drawing a trailer except the towing of any disabled mechanically propelled vehicle

Provided that the person 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

*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

FCZAH

Date: 13/06/2019