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 <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.

- 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 aforesaid.

ACCIDENT STATEMENT				
Date Of Report	03/07/2019 15:09			
Date Of Accident	03/07/2019 08:15			
Exact Location Of Accident	SOMMERVILLE ROAD			
Country/State of Loss	SINGAPORE			

DETAILS OF OWN VEHICLE		
Vehicle Registration Number	GBG8499G	
Insured/Policyholder		
Name Of Registered Owner	INTERTEC ENGINEERING PTE LTD	
Co Reg No	A201212620N	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-97231434	
Alternative Phone No	OFFICE-97231434	
Vehicle Particulars		

Vernoie i di docidio	
Manufacturer	NISSAN

Model NV350-2.5 D PANEL VAN (M)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

YES

If No, Please state action to be taken

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NC

Policy Number DMCVSN1767131801

Cover Note Number

Driver

 Name of Driver
 CHIN LEE KUEN

 NRIC No
 \$1622172D

 Date Of Birth
 08/06/1963

 Occupation
 INDOOR

 Date Of Driving Pass
 11/05/1981

Driving Experience 38 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97231434

Fax Number

Contact Number

EMail Address NOEMAIL

APT BLK 140 RIVERVALE STREET Address

#07-784

Postcode 540140

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 SIDE SWIPE Weather Conditions

CLEAR Road Surface DRY

Other Information

ambulance?

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

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)

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

SEE ATTACHED SKETCH PLAN AND PHOTO

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

SGG5419Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver PHILIP CHAN K.H

NRIC/Passport Number

Contact Number 97310254

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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)

| 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 dains 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.

INTERTEC ENGINEERING PTE LTD

Tate & Time: 3 /4 /281 9

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Drivs#s SignaturA

(If driver is not the policyholde Date & Time: 2/4/2019

2-42

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Sketch Plan #2 Pg. 1

SKETCH PLAN			7
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olicyholder's Signature	Direct Spignature		

CERTIFICATE OF INSURANCE Pg. 1



中国太平保险(新加坡)有限公司

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CHINA TAIPING INSURANCE ISINGAPORE: PTE, LTD

CERTIFICATE OF INSURANCE

Motor Vahicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vahicles (Third-Party Risks and Compensation) Rules: 196)
Road Transport Act, 1987 (Malaysia)
Motor Venicles (Third-Party Risks) Rules: 1959 (Malaysia)

CERTIFICATE NO.	SMC/801/797121611	Engine ha 1122533/248e. Thomask KalzylMcZEL*1)//a556
Index Man; and Registration Number of Vehicle	38081993	
2. Name of Policy Holder	H E INTERFET ENGI	NEDRING ROE 200
Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	on hoveness core	ESSELN SERVICES CONTRACTOR OF SERVICES CONTRA
4. Date of Expiry of Insurance	13 NOVEMBER 2313	
5. Pensons or Classes of Persons entitled to drive *		
ANY PERSON WHO IS DRIVING ON THE POLICE	AHOLDER, 2 OKOFE OK	WITH THEIR PREMISELAL.
RESULATIONS TO DRIVE THE NOTOR VEHICLE	OR HAS BEEN SO PE	HOE WITH THE LICENSING ON OTHER LAND OR PMITTED AND IS NOT DISQUALIFIED BY ORDER OF A IN THAT BEHALF PROM DEIVING THE MOTOR VEHICLE.
5. Limitations as to use: *		
(1) USE IN CONNECTION WITH THE POLICYH (2) USE FUR THE CARRIAGE OF PASSENDERS POLICYHOLDER'S BUSINESS: (3) USE FOR SOCIAL, DOMESTIC OF PLEASU	COTHER THAN FOR H	IRE OR REWARD) IN CONNECTION WITH THE
THE POLICY DOES NOT COVER: (1) USE FOR HIRE OR REWARD OR HACING. (3) USE WHILET DRAWING A TRAILER EXCEP	PACE-MAKING, KELIA T THE TOWING OF AN	BILITY THIAL OF SPEND TENTING. Y ONE DIRABLED MECHANICALLY PROPELIED VEHICLE.
HIRE PURCHAGE CC. I ONLIED CVERSERS BA *Lundations rendered inoperative by Section and Section 95 of the Road Transport Act, 1	n 8 of the Motor Vehicles	(Third-Party Risks and Compensation) Act (Chapter 189)

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

Countersigned By:

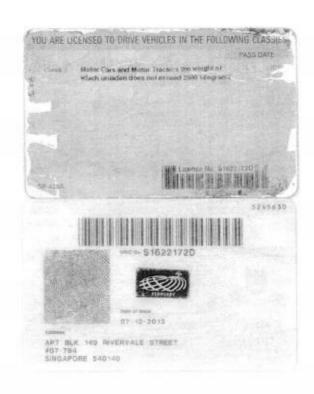
Authorised Officer

Authorised Signatory

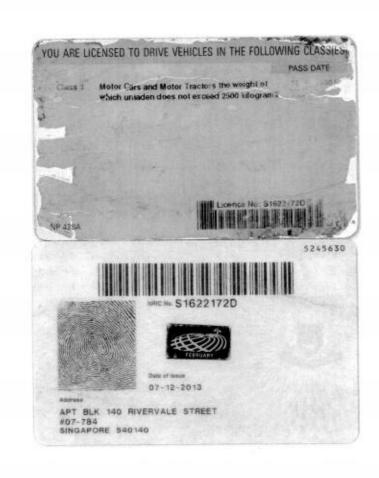
For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

ICDL Pg. 1











中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

13:0 TP 31 2:7.17pe: 0

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.

DMCV3N1757121801

Engine No :10250012888

Chassis No: JHIM2282820000555

1. Index Mark and Registration Number of Vehicle

GBG84993

2. Name of Policy Holder

M/S INTERTED ENGINEERING PRE LID

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

4. Date of Expiry of Insurance

19 NOVEMBER 2019

5. Persons or Classes of Persons entitled to drive *

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION:

PROVIDED THAT THE PERSON DRIVING IS PERMITTED IN ACCORDANCE WITH THE LICENSING OR OTHER LAWS OR RESULATIONS 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: "

- (1) USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- (2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- (3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES. THE POLICY DOES NOT COVER.

- (1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING.
 (2) USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

HIRE PURCHASE CC. : UNITED OVERSEAS BANK LIMITED AS HE 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 Officer

Authorised Signatory