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.
- 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 aforesaid.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	25/07/2019 11:41
Date Of Accident	24/07/2019 15:05
Exact Location Of Accident	KAMPONG JAVA RD BESIDE KKH CHILDREN TOWER
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJN4079E
Insured/Policyholder	
Name Of Registered Owner	FRESH CARS PTE LTD
Co Reg No	201608540Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VIOS E 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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	999994463
Cover Note Number	
Driver	
Name of Duken	CTEVEN CHIA HUNG TING (VIE HONGTING)

Name of Driver STEVEN CHIA HUNG TING (XIE HONGTING)

NRIC No S8209747C
Date Of Birth 31/03/1982
Occupation OUTDOOR
Date Of Driving Pass 02/09/2010

Driving Experience 8 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87791520

Fax Number

Contact Number OFFICE-87791520

EMail Address NOEMAIL

BLK 453C FERNVALE ROAD Address

#10-529

Postcode 793453

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

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? YES

Was any injured conveyed to hospital by

ambulance?

NO

NO

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

4

NAME: : LEE CAI LING JESLYN

GENDER: : FEMALE

Passenger 2

NAME: : KAYDEN CHIA KAI LE GENDER: : MALE

Passenger 3

: ZAVEN CHIA ZE XUAN NAME:

GENDER: : MALE

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

ON STATED DATE AND TIME. MY VEHICLE WAS STATIONARY STOPPED ALONG THE STATED VENUE AS WAITING FOR VALET SERVICE TOGETHER WITH VEHICLE B WHICH HER VEHICLE IS BEHIND ME. SUDDENLY I FELT AN IMPACT OF MY VEHICLE AND REALIZE THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

Attachment(s)

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

Remarks/ Reasons: VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SBQ7788B Vehicle Registration Number

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)

Passenger 1 NAME:

GENDER:

DETAILS OF INJURED PERSON 1

STEVEN CHIA HUNG TING (XIE HONGTING) Name

2

Approximate Age

Injuries Sustain **BODY**

Injured person in which vehicle? SJN4079E

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 2

Name LEE CAI LING JESLYN

Approximate Age

Injuries Sustain **BODY** Injured person in which vehicle? SJN4079E YES

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

Accident Sketch Plan

SKETCH PLAN

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- 7. 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:

- 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)
 - (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.
- 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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

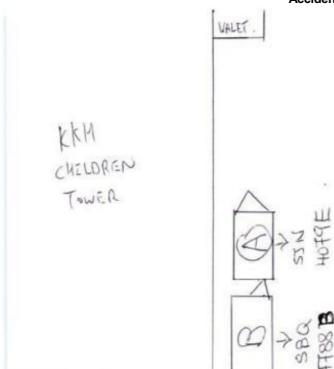
Reporting Centre Per nel's Signature Name

NRIC/FIN No.:

Accident Sketch Plan

KETCH PLAN		
	Refer to orderched Sheetch Plan	
	O	
	otheren Plan	
SCRIBE CIRCUMSTANCE	5 OF THE ACCIDENT	
Refer to State	m tot.	
CLARATION /e declare the foregoing part	iculars are true in every respect.	
accure the loregoing part	A A	
	Man Y Man	
icyholder's Signature	Driver's Signature Reporting Centre Personnel's S	Signature
te & Time:	(If driver is not the policyholder) Name:	

Accident Sketch Plan



241 PASSEN 14/2018

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ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)



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Business Profile (Company) of FRESH CARS PTE. LTD. (201608540Z)

Date: 25/07/2019

The Following Are The Bri	ef Particulars of :		
Registration No.	2016	08540Z	
Company Name.	FRES	SH CARS PTE. LTD.	
Former Name if any			
Incorporation Date	01/04	12016	
Company Type	EXEM	MPT PRIVATE COMPANY LIMITED BY SHAP	ES .
Status		Company	
Status Date	01/04	/2016	
Principal Activities			
Activities (1)	PASS	SENGER LAND TRANSPORT N.E.C. (EG.PR TRISHAWS) (49219)	VATE CARS FOR HIRE WITH OPERATOR
Description			
Activities (II)	RENT	TING AND LEASING OF PRIVATE CARS WIT	THOUT OPERATOR (77101)
Description			
Capital			
Issued Share Capital	Number of Shares *	Currency	Share Type
(AMOUNT)			
10000	10000	SINGAPORE, DOLLARS	ORDINARY
Number of Shares includes	number of Treasury Shares		
Paid-Up Capital	Number of Shares	Currency	Share Type
(AMOUNT)			
10000		SINGAPORE, DOLLARS	ORDINARY
COMPANY HAS THE FOLLO	OWING ORDINARY SHARES	HELD AS TREASURY SHARES	
Number Of Shares	Currency		

Authentication No.: W18438987F

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Business Profile (Company) of FRESH CARS PTE. LTD. (201608540Z)

Date: 25/07/2019

Registered Office Address

105 KAKI BUKIT AVENUE 1

#03-03

SHUN LI INDUSTRIAL PARK SINGAPORE (415987)

Date of Address

29/06/2018

Date of Last AGM

30/06/2017

Date of Last AR

26/07/2017

Date of A/C Lax at Last AGM

31/12/2016

Date of Lodgment of AR, A.C.

26/07/2017

Audit Firms

NAME

Charges

Charge No.

Date Registered

Currency

Amount Secured

Chargee(s)

Officers/Authorised Representative(s)

Name	10	Nationality	Source of Address	Date of Appointment
Address		Position Held		
ENG KAR KENG (WANG JIAQING)	\$8018202C	SINGAPORE CITIZEN	ACRA	01/04/2016
130 MARSILING RISE #10-324 SINGAPORE [730130]		Director		
LIU WEIKANG	\$83367971	SINGAPORE CITIZEN	ACRA	03/08/2016
13 CANTONMENT CLOSE #22-25 CANTONMENT TOWERS SINGAPORE (080013)		Secretary		

Name			Nationality/Place of incorporation/Origin	Source of Address	Address Changed
Addn	155	A CONTRACTOR			
	ENG KAR KENG (WANG HACING)	S8018202C	SINGAPORE CITIZEN	ACRA	01/04/2016

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INFORMATION RESOURCES

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Business Profile (Company) of FRESH CARS PTE. LTD. (201608540Z)

Date: 25/07/2019

Shareholder(s)					
Name	¥ .	10	Nationality/Place of incorporation/Origin	Source of Address	Address Changed
Address				NO TOTAL	
130 MARSIL #10-324 SINGAPORI					
Ordinary(Nun	nber)	Currency			
10000		SINGAPO	ORE. DOLLARS		

Abbreviation

- UL Local Entity not registered with ACRA
- UF Foreign Entity not registered with ACRA
- AR Annual Return
- AGM Annual General Meeting
- A/C Accounts

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

Note:

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan
 the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sq.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

ACRA180629139868

DATE

25/07/2019

This is computer generated. Hence no signature required.



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