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1 P 10301CT	ssment/Survey Report		
Professed Wksp / INC Assign Wksp / QW: (Report by Fax / Hand t		ax:
TP Particulars: Veh Nor JF 97	nic/		
Owner / Driver: (R . MC()/Non-INC().	· · ·
Policy No: () Period: (· · · · · · · · · · · · · · · · · · ·	Cover Type: (
Confirmed by : (· Dates	Times	
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Year of Registration: () Warranty:)	
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() Walle-In Customer : Customer's information s	trictly Confidential & St	<u> </u>	T. A. H. L.
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Drive-In ()/Towed-In (); Invoice: YES ()/NO();T	owing Co: (· , '	.)
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1) Apply for Transport Allowance ()/ Courtesy C	AMARIA BULLA DA SA	el Hurrens Front Green Hibrer and	bilitaria po
Apply for Transport Allowance ()/Courtesy C QC Check / Post Repair Inspection	()		
3) Upload Resurvey Photo [Repair Cost>\$3000]	(3		7.
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iver/Owner:	3) TF : Towing P. 4) PT : Follow-Ti	rough Survey	120
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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.
- 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

AND	ACCIDENT STATEMENT
Date Of Report	15/08/2019 19:40
Date Of Accident	04/08/2019 07:45
Exact Location Of Accident	OLD AIRPORT ROAD HAWKER CENTER CARPARK
Country/State of Loss	SINGAPORE
· · · · · · · · · · · · · · · · · · ·	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLD4496M
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	K.TAN33@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92293093
Alternative Phone No	OFFICE-92293093
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994316
Cover Note Number	
Driver	
Name of Driver	TAN ENG HEAN
NRIC No	S1497886J
Date Of Birth	15/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	21/06/1983
Oriving Experience	36 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92293093
ax Number	

OTHERS-92293093

K.TAN33@YAHOO.COM

Address

15 ELIAS GREEN

#03-05

Postcode

519966

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

1

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

WWW.Destroy.org/12000.pm

NO

Was any body injured in the Accident?

...

Was any injured conveyed to hospital by ambulance?

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

PLEASE REFER TO SKETCH PLAN

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

SLF87B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

VOZZA MOK JEK CHEOW

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.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthly and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to regulate 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to the GIA Records Mangement Centre establised 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 todpement 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)

10 JOH 81P

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 'taw yers/law times, the Monetary Authority of Singapore and any relevan, government agency/authority (such as the police), for the purpose(s) of ;

- processing, handling and/or dealing with my cisims 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, atotements, 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 envalopes/mail packages), and/or
- (v) complying w ith 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.

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	and the				1/10	Turke L
		<u> </u>	l l		1 4 54	HALLANI.
- 1 5			111			SLE876

Describe Circumstance of the Accident *
Sunday morning 4th Buguet around 745am after
Sunday morning 4th August around 745am after buying breadfort, driving out from the Parking let at the back of the Hawker Ornter in old Appropriate
100ad
Parking lot, I notice there are some ours behind my car passing by slowly to locate parking lot
I have checked to encue all clear before
came from nominae so close to my car his car when scratches my bit back bumper. I don't think I'm in a reverse made yet when this happen.
Scratches my hight back bumper, I don't think I'm
in a reverse made yet when this happen.
back bottom bunger got a small hale, this happen to
The owner of SLESTL west & soul list on the
his whool and estimate and his below to have to
meredes modeship for Inejection to pushe no damage the whool and extinate conthis kl, no for Inspection the is badiculars, it is not my fault and he is blamic ma.

Declaration tower declare the foregoing particulars are true in every respect.

Policynolder's Signature Nation No. 10

* Wu 5/8/19 gam

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

Wanesled by Reporting Certife Personnel

Address of Driver	15, Elias Green 03-05
Email Address	Postcode (\$ 1996)
Was driver an employee of the insured's Company?	* K.tan33 Ryahov.com
If No, Relationship of the Driver with the Insured	O Yes O No
Vehicle Registration Number of Driver's Own	
Vehicle Registration Number of Driver's Own Vehicle (if	() Yes () No
applicable)	
Insurance Company of Driver's Own Vehicle (if applicable	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Collision (Eg. Chain collision, Head-On collision, Si	
Swipe, Front to Rear)	* Front Right wheel to bumper.
Weather Conditions	4 Clear C Raining C Others.
Road Surface	+ Ory O Wet O Others.
OTHER INFORMATION	
a. Was anybody injured in the accident?	* O Yes O No
 Was any other vehicle or property damaged? (Including Witness) 	4 O Yes No
DETAILS OF POLICE ACTION	
Vas the Accident reported to the Police?	Yes No (If Yes, please state which Police Station.)
Police Station Name	The state which Pouce Station.)
Police Station Address	the second second
Police Station Contact	Tel No.
WARREN TO BE \$100	Pax No.
Vas notice of intended Prosecution given?	Yes No (If Yes, against whom?)
ETAILS OF OTHER VEHICLE / PROPERTY 1	
ehicle Registration Number	1150912
ehicle Make/ Model/ Colour	20, 219
etails of Properties	
ame of Driver	A PROPERTY OF THE PROPERTY OF
rsonal Identification - NRIC (Singaporean/PR)	1 VOZZA MOK Jek (hear)
- FIN/Passport Number	
ontact Number	
dress	
me of insurance Company	
The Crimbolatice Company	
of Passenger (Including Driver)	I- H-II-II-II

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SINGAPORE ACCIDENT STATEMENT	
IMPORTANT NOTICE	
Complete and submit this Form toAuthorised Report	ling Centre ("ARC")for offling.
2. Please report correctly the details of the accident to speed up th	e clams process.
 This Form must be completed by the Policyholder and/or the Au Information provided must be as truthful and accurate as possible insurance companies to repudiate policy liability. 	thorsed Driver. ig. Any willul misrepresentation or withholding of material facts may allow
	is not an admission of policy liability on the part of the insurance companies.
ACCIDENT STATEMENT	REALIZADA INC. 19 VACARIMINA
Date and Time of Accident *	Date: 4 \$ 14 Time: 7 4 7 14 15
Exact Location of Accident	1773
DETAILS OF OWN VEHICLE	old Hispart Rd Hawker Conter Park
Vehicle Registration Number *	SLD 4496M
INSURED / POLICYHOLDER (OWN VEHICLE)	>CD 44 18 M
Name of Registered Owner (See Insurance Cert.)	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
- Not Applicable	
VEHICLE PARTICULARS (OWN VEHICLE)	1
Vehicle Make / Model	Menufacturer Model
Type of Vehicle*	Andrew State of the Control of the C
Exact Purpose for which vehicle was being used at time of	O Bus O M/cycle O Others
accident * Are you claiming under your own insurance policy for repair to	
your vehicle?	Yes O No (If No, Pls select O Third Party (D Reporting)
Vehicle Category*	Private Commercial Molorcycle
INSURANCE COMPANY (OWN VEHICLE)	
Name of Insurance Company *	
Type of Palicy	Comphensive Third Party Fire & Theft TP Only
Fleet Policy	Yes No
Policy Number	
Motor CI	
DRIVER	Same as insured above
Name of Driver +	Tan Eng Hear
Personal Identification - NRIC (Singaporean/PR)	S1497 8867°
- FIN/Passport Number +	VA -
Date of Birth +	15 dd/ 00 mm/ c //yy
Driving Date Pass 4	2 dd/ 0 6mm/ & 3/yy
rear of Driving Experience	3 (Year(s) 2 Month(s)
Occupation 4	Sciles Manager (Indoor of Duldoor
Gender t	Male Femple
Contact Number / Mobile Phone / Fax No 5	91293093
The state of the s	



REPUBLIC OF SINGAPORE

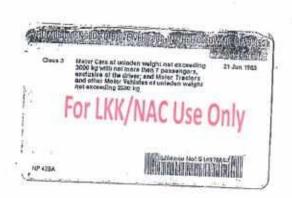


TAN ENG HEAN





For LKK/NAC Use Only







CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1968 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

Comprehensive Commercial Motor

POLICY EXCESS

S\$800.00 ** (I)

CERTIFICATE NO.

999994316

WINDSCREEN EXCESS

\$\$100.00

(The below excess is subject to GST)

SUM INSURED

Market Value

INSURING WITH COE/PARF

1) VEHICLE REGISTRATION NO.

SLD4496M

2) NAME OF POLICYHOLDER

Goldbell Car Rental Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

01 January 2019

4) DATE OF EXPIRY OF INSURANCE

31 March 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

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

Additional Excess of \$1000 applies to all claims for Drivers below 23 years old and/or with Driving Experience less than 12 months Additional excess of \$500 applies to all claims for accident outside Singapore

** Policy Excess vary according to Vehicle Usage. Refer to Policy for more details.

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) LIMITATION AS TO USE.

- 1) Use for social, domestic, pleasure purposes and business purposes of Insured
- Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.

The Policy does not cover

- Use for racing, pace-making, reliability trial or speed-testing.
 Use whitat drawing a trader except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- Use for the carriage of passengers for hire or reward by any person to whom the Vehicle is hired.

4) Use for any purpose in connection with Motor Trade.

LOSS OF USE

Not included

HIRE PURCHASE COMPANY

Hong Leong Finance Ltd

*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),

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 (Molaysia).

Issued in Singapore 16 Jan 2019

AIG Asia Pacific Insurance Pte. Ltd.

030123-000 Acorn International Network Pte Ltd 48 Changi South St 1 Level 3 SINGAPORE 486130

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPKWJ