MNA41910956 NATIONAL Assessment Centre Services. [wel 1 Jar/05] . Done by Date &Time Completed Date In: 20/08/2019 17:03. Jeb description RESINO. NBA/AG19014622/F SAS e-Illing Vol No GY 83R E-ingif (&jala sur, AtC 2hrs) I-Motor Claim Form 0.01 18/08/2019 15:00 I-Motor W/O (Withle: OD 2hrs, TP 4hrs) OD TP (Reporting Only I-Photo Uploaded Assessment/Survey Report TP Insurer: Ass't Report by Fax / Hand to Owner/Witsiz Fax: Profurred Wksp / INC Assign Wksp / QW: ()/Non-INC(SM8 8219T. INC (Veh No: TP Particuliars:) Tcl: Owner / Driver: () Cover Type: (Policy No: (Period: (Thues Confirmed by : (Dates %) [Note-Est Status (WO): N: 0-20%; P: 21-79%. P: 80-100%] Insured/Driver Liability: (Year of Registration: (Warranty: YES ()/NO(Bxccss: (\$ Londing: \$1,000 ()/\$2,000(General Republication of the state of the st) Walle-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.) Total Loss Case : to e-mail Insurer URGENTLY.); Invoice: YES (Drive-In ()/Towed-In (remains a service in the service of 1) Apply for Transport Allowance () / Courtesy Car (2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost> \$3000] Injury : 1) All I Apaldent Itsporting 3) Tr 1 Towing Pro \$120 4) PT : Follow-Through Euryey Driver/Owner: 3) PT; Poliow-Through Survey (Resurvey)
For plaining against ING Only (Wef 19 Jan 200) Contact No: 6) TR: Re-imposition \$160 7) NI I Idao DA + SMRT Survey Darnaged Portion: 1) NTUC Additional Services:-NS: Courtery Cor / Tpt Allowance OC Checked by (Engr-In-Charge): 510 * No: Repair Co-nedination *N7; Fort Repair Inspection *NB: DV / Collect Excess Coordination TP (NII): TP (N-in INC) = galast ING
9) N12: Ideo Mobile MANUAL TRANSPORT Tut. It Involve doted Per Charged Involce dated 1 2/2

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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.

Any false reporting may be referred to the Police for investigation.

- 5. 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 ladgement 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 state of the second	ACCIDENT STATEMENT
Date Of Report	20/08/2019 17:03
Date Of Accident	18/08/2019 15:00
Exact Location Of Accident	CHONG PANG CARPARK
Country/State of Loss	SINGAPORE
NO ASSESSMENT OF THE PARTY OF T	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GX83B
Insured/Policyholder	
Name Of Registered Owner	ECONO GREEN PTE LTD
Co Reg No	*
Email Address	SALE@ECONOGREEN.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-66352580
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350
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	NO
Policy Number	1800147566
Cover Note Number	
Driver	
Name of Driver	LEE KOK LEONG
NRIC No	S2766732E
Date Of Birth	27/02/1960
Occupation	OUTDOOR
Date Of Driving Pass	08/09/1982
Driving Experience	36 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83814401
Fax Number	Hammarina Anna Anna Anna Anna Anna Anna Anna A
Contact Number	

NOEMAIL

Address

APT BLK 2 MARSILING DRIVE #12-09 SINGAPORE

Postcode

730002

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

4

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)

2

involved in the accident

NO

Was any body injured in the Accident?

ATRICINA

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

REFER TO THE 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

SMG8219T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

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

- 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 <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.

C STATISTICS C

Policyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Regarting Centre Personnel's Signature

Name:

NRIC/EIN No .:

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 .:

ACCIDENT STATEMENT

ACCIDENT DATE: (8 08 19)(DD/MM	MYYL TIME! (5 O OLUUNIN
LOCATION: Chone pong carr	Devel:
1. DETAILS OF VEHICLE GIVEHICLE NUMBER: GV BB b)INSURANCE COMPANY: CONO 6 CIPOLICY NUMBER: 180 14756 d)POLICY TYPE: (COMPREHENSIVE / THIRD e)MAKE & MODEL: NISSAW 11/3 I)TYPE: (SALOON / COUPE / MPV / VAN / L g)VEHICLE CATEGORY: (PRIVATE / COMM h)PURPOSE OF USING AT ACCIDENT TIME: i) ARE YOU CLAIMING UNDER YOUP OWN IF NO, PLEASE STATE (THIRD PARTY CLAIM 2. INSURED / POLICY HOLDER	D PARTY / THIRD PARTY FIRE &THEFT) TO PARTY / THIRD PARTY FIRE &THEFT) TO PARTY / MOTORCYCLE, / OTHERS) MERCIAL / MOTORCYCLE)
DINRIC/FIN/PASSPORT:	CONTACT: 6635 2580
HO of passengs DRIVER DRIVER ALSO POLICE	Y HOLDER
(Including driver) CINAME: LET (COK: LEONLY DINRIC/FIN/PASSPORT: 52766732E CIADDRESS: BIK 2 MARCHING	(MALE / FEMALE) CONTACT: 9381 446 1
e) OCCUPATION: (1) 1000R (OUIDOOR)	DD/MM/YYYY)
WAS DRIVER AN EMPLOYER OF THE THE	URED'S COMPANY? OFSY NO
IF NO, RELATIONSHIP OF THE DRIVER V 5. G) WEATHER CONDITION; (CLEAR / RAINING D) ROAD SURFACE; (DRY / WET / OTHERS_	WITH INCURED.
6. WAS ANYBODY INJURED (YES /NO) 7. DIREPORTED TO POLICE (YES / NO) IF YES, PLEASE STATE WHICH POLICE STATIC	~
He of passinger a) VEHICLE NUMBER: SMG 8219 T	
() P. THIRO PARTY VEHICLE	CONTACT:
(No of passinger d) VEHICLE NUMBER:	MODEL:
(Including driver) f) DRIVER'S NAME: () NRIO/FIN/PASSPORT:	CONTACT::-
	on

email = Sales@econogreen.com.sg

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2766732E



LEE KOK LEONG

李

Race CHINESE

27-02-1960

MALAYSIA

For LKK/NAC Use Only





HIIIC № S2766732E

MALAYSIAN

15-03-2011

APT BLK 2 MARSILING DRIVE #12-09

SINGAPORE 730002

\$2766732E

17/10/2013

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles =< 200 cc 06 Sep 1902 Class 2A Motorcycles between 201 cc and 400 cc 06 Sep 1902 Class 3 Notor Cars=< 3000kg with =<7 passengers, exclusive 06 Sep 1902 of the driver; and other motor vehicles =< 2500kg

For LKK/NAC Use Only



NF 428A



CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder

: Econo Green Pte Ltd

Period of Insurance

: 11 Dec 2018 To 10 Dec 2019

Engine No.

: YD25040210B

Chassis No.

: JN1MC2E26Z0030754

Vehicle No.

: GX83B

Policy No.

: 1800147566

Endorsement No.

Issued Date

: 24 Dec 2018

ABOUT THE COVER

Make/Model

: NISSAN NV350 PANEL VAN

Engine Capacity/Tonnage : 1.5 Tonnage

Sum Insured : Market Value

First Year of Registration : 2018

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) Any person who is driving on the Policyholder's order or with their permission.
 b) This Policy will indemnify the Policyholder or any authorised driver only if harder meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or reexperienced Driver Excess" ("Y/DR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition

: All Age Condition

Limitation as to use*

1) Use in connection with the Policyholder's business

2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.

3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving fullon, driving test, racing, poce-making, reliability rist or speed-testing; and b) use whilst drawing a traiter except the towing of anyone disabled using a mechanically proposled vehicle.c) use for any purpose in connection with Motor Trade.

Loss Of Use (7 Days) Commercial Auto

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Aut (Cep. 183) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Demage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRES (FOR CLAIMS RELATED REPAIRS)

1.Tan Chong Motor Salos Add: 913 Bt Timah Road Singapore 589823 64694091 64694092 64694093

2.TC AutoClinic Add: No.1, Shith Lok Yang Road Singapore 628099 62622212

3 Tan Chong Motor Sales Add: 17 Lor 8 Top Payoh Singapore 319254 63570753 63570754

4 Autulution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666

5 TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038512 67038513

For other: Approved Reporting Centras/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Attenditively, you may refer to AIG website www.sig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Tunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: TAN CHONG CREDIT PTE LTD

I/We hereby certify that the policy to which this Cartificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1989 (Malaysia).

0500810422

TAN CHONG CREDIT PTE LTD-WTZ 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSP-MOTOR Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE