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001 >108 809 14:30	I-Motor Claim Form		
OD A ! Reporting Only	I-Motor W/O (Withle: OD 2	hrs, TP 4brs)	
Of The Harding Only	I-Photo Uploaded	1	<u> </u>
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Pax / Hans	to Owner/Wksn	
Professed Wksp / INC Assign Wksp / QW: (Yol:	Faxt)
TP Particulars: Veh Not	4393Z . INC	(,)/Non-INC().	
Owner / Driver: (Tel:)
Policy No: () Perio	d: (Cover Type: ()
Confirmed by : (· Dates .	Tlmer)
Insured/Driver Liability: (%) [No	te-Est Status (WO): N: 0	-20%; P: 21-79%. P: 80	0-100%]
Year of Registration: () Wa	errunty: YES ()/NO (· · · · · · · · · · · · · · · · · · ·	
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2) QC Check / Post Repair Inspection	(·)	- 	
3) Upload Resurvey Photo [Repair Cost> \$300	00] ()		
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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.
- 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.

- 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 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

	ACCIDENT STATEMENT
Date Of Report	23/08/2019 16:51
Date Of Accident	22/08/2019 14:30
Exact Location Of Accident	CTE TOWARDS CITY BEFORE CAIRNHILL EXIT
Country/State of Loss	SINGAPORE
DI CONTRACTOR DE LA CON	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH4393Z
Insured/Policyholder	
Name Of Registered Owner	THE POSTAL CONNECT
Co Reg No	53034317A
Email Address	JOYCE@THEPOSTALCONNECT.COM
Mobile Phone No	(LOCAL) +65-84991151
Alternative Phone No	OFFICE-84991151
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350-2.5 D PANEL VAN (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800060740
Cover Note Number	
Driver	
Name of Driver	NG SOON HUAT (HUANG SHUNFA)
NRIC No	S8308418I
Date Of Birth	29/03/1983
Occupation	OUTDOOR
Date Of Driving Pass	02/06/2005
Driving Experience	14 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84991151
Fax Number	
	The second secon

OFFICE-84991151

JOYCE@THEPOSTALCONNECT.COM

Address

610 LORONG 3 GEYLANG

Postcode

389006

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

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? 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?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLJ8919C

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)

Page 2 of 13

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.

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

(If driver is not the policyholder)

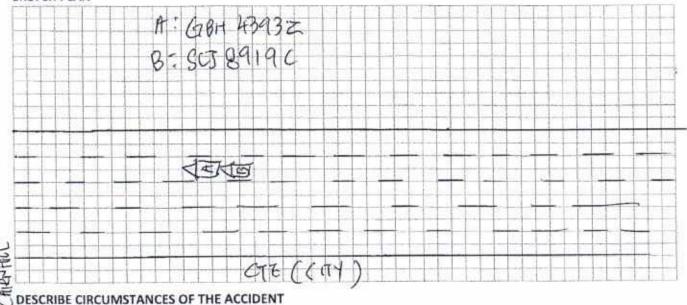
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN



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DECLARATION

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

Policyholder Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

	IME: 14 30 (hh:mm) 24 hrs Format
LOCATION (TE C'UTY) BEFORE CAIRN	HILL GXIT
VEHICLE NUMBER GBH 4393 2	
INSURED NAME THE POSTAL CONNEC	
NRIC/FIN 53034371A	CONTACT:
MAKE NISSAN MODEL N	V350 Parel Van 2.5 5MT BDR
Are you claiming under your own insurance policy for rep	
() Yes, If No, Pls Select : (\(\) Third Party () Reporting Only
INSURANCE COMPANY 1/6	
	THIRD PARTY () TPFT
POLICY NUMBER :	
NAME DRIVER: NG SOUN HUAT	() SAME AS INSURED
NRIC/FIN S83 08418]	CONTACT: 0499 [15]
DATE OF BIRTH: 29 -03 - 1983	
DRIVING PASS DATE: 02.06-2005	
OCCUPATION: () INDOOR () OUTD	
GENDER: (/) MALE () FEMA	
EMAIL ADDRESS: TOYCE @ THE POSTALCOM	
ADDRESS OF DRIVER: 610 , LORONG	3 GETLANG , 5389006
	57 St
Number Of Passenger Include Driver: 12	
0	
Was driver an employee of the Insured's Company? (✓) YES () NO
If No, Relationship Of The Driver With The Insured	
() Owner () Spouse () Friend () Relative	
Does The Driver Own Any Other Vehicle? : () YES	(V) NO
If Yes, Vehicle Registration Number Of Driver's Own V	ehicle:
Insurance Company Of Driver's Own Vehicle	2 Wilesian Condition III Amazor Ellino
Weather Conditions: () Clear () Raining	() Drizzling () Others
Road Surface : (V) Dry () Wet (() Others
Was Any Foreign Vehicle Involved In This Accident?	The state of the s
the state of the s	YES (V) NO
If YES, Injured details :	
Convey By Ambulance: () YES (√) NO	-
Was There Any Video Capture By Car Camera? (/) YES () NO
Was There Accident Reported To The Police? (YES (/) NO If Yes Attach Police Report
Police Report Number (if any)	
Details Of 3rd Party Name / NRIC	No.of Paxs (incl'driver) Contact
Veh B SLJ 8919 C	()/ Not Sure ()
Veh C	()/ Not Sure ()
Veh D	()/Not Sure ()
Veh E	()/Not Sure ()
Veh F	()/Not Sure ()
Veh G	()/Not Sure ()

4458883



NRIC No. S83084181

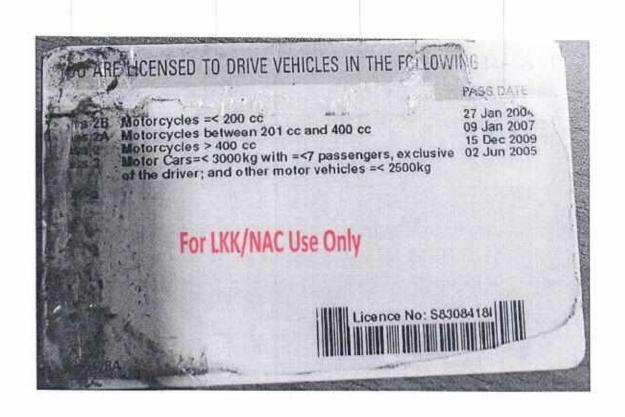
For LKK/NAC Use Only

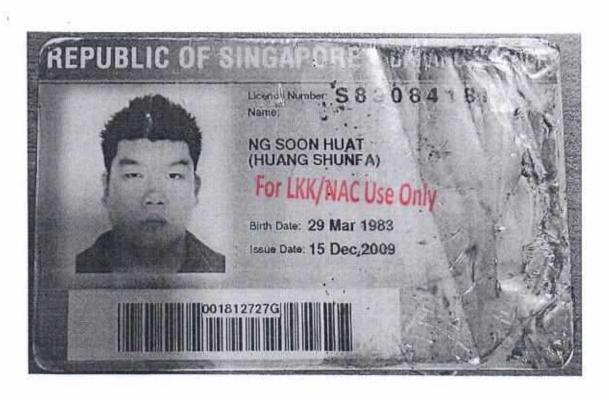
Date of Issue 08-09-2009

Address

610 LORONG 3 GEYLANG SINGAPORE 389006









CERTIFICATE OF INSURANCE

NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder

: The Postal Connect

Period of Insurance

: 24 May 2018 To 23 May 2020

Engine No.

: YD25422624A

Chassis No.

: JN1MC2E26Z0008589

Vehicle No.

: GBH4393Z

Policy No.

: 1800060740

Endorsement No. Issued Date

: 12 Jun 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

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 drivor only if be/she meets the specified age condition.

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

Age Condition

: All Age Condition

I imitation as to use*

ie in connection with the Policyholder's business

..., use for the carriage of passenger (other than for time 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 failton, driving test, recing, pace-making, milability trial or speed-testing; and b) one whilst drawing a failer except the towing of anyone disabled using a moutanically propoled vehicle.c) use for any purpose in connection with Motor Triade.

Limitalions removed inoperative by Section 8 of the Motor Vehicles (Third-Party Flaks and Compensation) Act (Cep. 189) and Section 95 of the Road Transport Act, 1967 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Thaft - \$0 Flood Cover - \$0

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS

Tan Chong Motor Sales: Add: 913 Bt Tirnsh Road Singapors 58(623 64694091 64694092 64504093

2.TC AutoClinic Add: No.1, Slith Lok Yang Road Singapore 638099 62622212

3.Tan Chorg Motor Sales Add: 17 Lord Toe Payoh Singspore 319254 63570753 63570754 4 Autolution Industrial Add: 19 Ubi Road 4 Singapore 406623 64905056

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

For other Approved Reporting Centroe/AIG Authorised Repairers, please contact our 24-hour accident emergency hottine at +65 6338 5200. Alternatively, you may refer to AIG website www.eig.com.eig or AIG SG Mobile App. Simply search and download "AIG SG" from ITunes 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 Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehiclas(Third Party Risks and Compensation) Act (Cep. 169). Part I/V of 5 the Road Transport Act, 1887 (Malaysia) and Motor Vehicles (Third Party Risks). 2990

0500810350

TAN CHONG CREDIT PTE LTD-LPH 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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Business
Owner ID: 371A

Vehicle Details

Vehicle No.: GBH4393Z

Vehicle to be Exported: No

Intended Deregistration Date: 31 Aug 2019

Vehicle Make: NISSAN

Vehicle Model: NV350 PANEL VAN 2.5 5MT 5DR

Primary Colour: Grey
Manufacturing Year: 2017

Engine No.: YD25422624A

Chassis No.: JN1MC2E26Z0008589

Maximum Power Output: -

Open Market Value: \$25,062.00

Original Registration Date: 24 May 2018

First Registration Date: 24 May 2018

Transfer Count: 0

Actual ARF Paid: \$1,254.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 23 May 2028

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

QP Paid: \$35,001.00 COE Rebate Amount: \$30,550.00

Total Rebate Amount: \$30,550.00

The information contained herein is correct as at 23 Aug 2019