

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 truthful and accurate as possible. Any wilful misrepresentation or withholding 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.

ACCIDENT STATEMENT

Date Of Report	17/09/2019 10:38
Date Of Accident	16/09/2019 07:45
Exact Location Of Accident	AYE TWDS ECP B4 CLEMENTI AVE 2 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP7008U
Insured/Policyholder	
Name Of Registered Owner	ARMOUR SECURITY & INVESTIGATIONS PTE LTD
Co Reg No	200519615K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63626256

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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 CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MS009686
Cover Note Number	

Driver

Name of Driver	TAY BOON SAN(ZHENG WENSHAN)
NRIC No	S7528338E
Date Of Birth	19/09/1975
Occupation	OUTDOOR
Date Of Driving Pass	13/04/1996
Driving Experience	23 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96934966
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 603 JURONG WEST ST 62 #10-193
Postcode	640603
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) involved in the accident	2
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : WEE WEI WEI GENDER: : FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SLP4882T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JAMES
NRIC/Passport Number	
Contact Number	84997210
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	TAY BOON SAN(ZHENG WENSHAN)
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SMP7008U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	WEE WEI WEI
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SMP7008U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

- (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:
 - (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.
- (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:
 - (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.

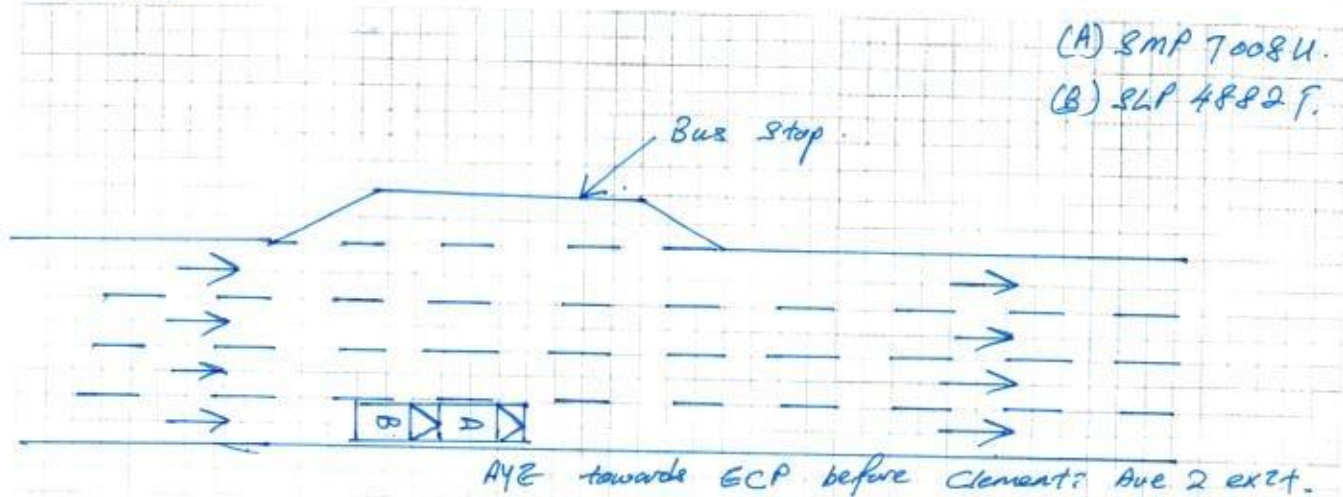


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



(A) SMP 7008 U.

(B) SLP 4882 F.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/09/19 at 0745hrs, I was travelling in my vehicle (SMP 7008 U) along AYE towards ECP before Clement Ave 2 exit on the extreme right lane. I slow down and stopped due to traffic jammed ahead. About 10 seconds later after stopping, a car (SLP 4882 F) from behind collided onto the rear portion of my vehicle.

DECLARATION

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

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.:

Vehicle No.	SMP 7008 U.	Model / Make	Toyota Axio
Date of Accident	16/09/19		
Time of Accident	0745 HRS		
Location of Accident	AYE towards ECP before Clements Ave 2 exit.		
Exact purpose use during accident	Company Car		
Name of Owner	Armour Security & Investigations Pte Ltd.		
Telephone No.	H/P :	Home :	Office : 6362 6256
NRIC	200516915K		
Address	23, Woodlands Industrial Park E1 #05-01, Admiralty Industrial Park		
Claim type	OD	<u>THIRD PARTY</u>	REPORTING ONLY (S) 757741
Insurance Company	TOKIO MARINE		
Type of Coverage	<u>Comprehensive</u>	Third Party	Third Party / Fire / Theft
Policy No.	MS009686		
Name of Driver	As Above If No, Tay Boon San		
NRIC	S7528338 E	Any Passengers :	01 (F)
Date of birth	19/09/1975		
Occupation	<u>Outdoor</u>	/	Indoor
Driving License Pass Date	13/04/1996		
Gender	<u>Male</u>	/	Female
Contact No.	H/P : 9693 4966	Home :	Office :
Address	BLK 603 Jwing West St 62 #10-193 (S) 640603		
Driver have any own vehicle	<u>No</u>	If yes, Reg No.	
Relationship	<u>Employee</u>	If no, state	
Weather condition	<u>Clear</u>	Raining Other	
Road Surface	<u>Dry</u>	Wet Other	
Any Injuries	No	If Yes, Who?	
Name And Contact No.	Tay Boon San (H/P: 9693 4966)		
Name And Contact No.	Wee Wei Wei (H/P: 9477 3779)		
Police Report	No	If Yes, Where?	
Vehicle B No.	SLP 4882 T	Any Passengers :	01 (F)
Name of Driver	James	Contact No. :	8499 7210
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name	N.A	Witness Contact :	N.A
Accident Portion	Rear Portion		
Camera Recorder	Yes / <u>No</u>		
Email Address	jordan.tay@gmail.com		
PARTICULAR WORKSHOP	N-51		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Zi Ting		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MX4

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)

Policy No.: MS009686 (Private Car)

- | | | |
|--|---|----------------------------|
| 1. Index Mark and Registration Number of Vehicle | SMP7008U | Chassis No.: NZE1416107760 |
| 2. Name of Policyholder | ARMOUR SECURITY & INVESTIGATIONS PTE LTD | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 16/08/2019 (00:00:00) | |
| 4. Date of Expiry of Insurance | 15/08/2020 | |
| 5. Persons or Class 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 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 2712DDA

Insurance Plan:	Comprehensive Approved Workshop Plan			Account No.
Limit for total loss or theft:	Prevailing Market Value			
Policy Excess:	Own Damage Claims	SGD 800.00	(Original Excess : SGD 800.00)	
	Additional Excess for Unnamed Driver(s)	SGD 500.00		
	Additional Excess for Young or Inexperience Driver(s)	SGD 3,500.00		
	WindScreen Excess	SGD 100.00		
Financial Interest:	TOKYO CENTURY LEASING (S) PTE LTD			

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No.:	200516915K
Owner ID Type:	Company
Owner Name:	ARMOUR SECURITY & INVESTIGATIONS PTE. LTD.
Registered Address:	23 WOODLANDS INDUSTRIAL PARK E1 #05-01 ADMIRALTY INDUSTRIAL PARK SINGAPORE 757741
Mailing Address:	-
Birth Date:	-

Vehicle Particulars

Vehicle No.:	SMP7008U
Previous Vehicle No.:	SKU4638T
Effective Date of Ownership:	20 Aug 2019
Original Regn Date:	04 Jun 2009
Registration Date:	04 Jun 2009
Year of Manufacture:	2008
Vehicle Type:	Passenger (Co) Company Car (Single Rate)
Vehicle Scheme:	-
Vehicle Attachment 1:	No Attachment
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA AXIO 1.5X A
Primary Colour:	Silver
Secondary Colour:	-
Passenger Capacity:	4
Chassis No.:	NZE1416107760
Engine No.:	1N2D302238
Engine Capacity / Power Rating:	1496 cc / -
Maximum Power Output:	81.0 kW (108 bhp)
Propellant:	Petrol
Max Unladen Weight:	1130 kg
Maximum Laden Weight:	1405 kg
Open Market Value:	\$15,552.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
Minimum PARF Benefit:	-
No. of Transfers:	2
IU Label No.:	1123081753
COE No.:	2009060107000922Z
COE Expiry Date:	31 May 2024
COE Category:	E - Open Category
COE Registration Category:	A - Car (1600cc & below)
Quota Premium (QP) / Prevailing Quota Premium:	\$10,046.00 / -
PQP Paid:	\$13,943.00
QP (Regn Cat):	\$9,889.00
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$10,046.00
Additional Registration Fee Rate:	100.00 %
Actual ARF Paid:	\$15,552.00
Vehicle Lifespan Expiry Date:	No Lifespan
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message:	The vehicle will be de-registered upon expiry of its 5-year COE on 31 May 2024. No further renewal will be allowed.

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