C Checked by (Engr-In-Charge): Anditors Comments :	*NG: Repair Co-ordination 'N7: Post Repair Inspection 'N8: DV / Collect Excess Coordination TP (N11): TP (Nan INC) against INC 9) N12: Idao Mobile Involve dated Fac Charges	510 \$23 55 \$20 30
Amilitors: Communisce	N7: Post Repair Inspection N8: DV / College Excess Coordination TP (N11): TP (N:n INC) against INC	\$23 \$35 \$20 \$20
	"N7. Post Kensir Inspection	33
2C Checked by (Engr-In-Charge):	*N6: Repair Co-ordination	
) Checked by (Guar-In-Charve):		FIN
	OD* NS: Courtosy Car / Tpt Allowanue	55
1	8) NTUC Additional Services:-	
Damaged Portion:	6) TR: Re-inspection 7) NI: Idea DA + SMRT Survey	2160 -
Contact No:	Por claiming atainst INC Only (Well 10 38) 200	\$75
Driver/Owner:	4) FT : Follow-Through Survey 5) FT : Follow-Through Survey (Resurvey)	\$30
	3) TP 1 Towing Fee	\$120
Chamanas Paragulors	1) AR : Acoldent Reporting (330); 2) DA : Damage Assessment (5100); INC (3	50)
MA 1907828	STANDARD BUT SERVICED BY THE CHOOSE SERVICE THE TEST OF THE PARTY OF T	30-20
NAV.		And (1) And (1)
idalization ziwenini za		REPECTON.
Injury:	SCHOOL THE REPORT OF THE PROPERTY OF THE PROPE	Design and the second
	1 2	
Upload Resurvey Photo [Repair Cost > \$3000] (•)	
2) QC Check / Post Repair Inspection (•)-	
1) Apply for Transfort Allowance ()/ Courtesy Car ()	
remarks and resident the second of the secon	Hally Market Block Director in the Sale	missimone, by
Drive-In ()/ Towed-In (); Invoice: YES ()	/ NO (); Towing Co: (· (HI THE PROPERTY OF THE PARTY OF
() Total Loss Case : to e-mail Insurer URGENTL	,	
() Walk-In Customer: Customer's information strictly		
Seminary Religious Research Seminary Control of the	的信息排放的加出。这种特殊的特殊的方式	1.04 F
Excess: (\$) Loading: \$1,000 ()/\$2,0	000()	<u> </u>
Year of Registration: (') Warranty: YES		
	s (WO): N: 0-20%; P: 21-79%. P: 80-1	7070]
Confirmed by : (Durer.	00%]
Policy No: () Period: () Cover Type: (
Owner / Driver: (Tcl:	
TP Particulars: Veh No: SLJ 1110 P.	NC()/Non-INC())
Professed Wksp / INC Assign Wksp / QW: (7 011	1
Ass't Report	rt by Fax / Hand to Owner/Wksiz	ex:)
2174.1	/Survey Report	
OD TP Reporting Only		
16/10//9	Y/O (Within: OD 2hrs, TP 4hrs)	
2F0 2125X	Talm Form	
MAT. 416.19.017.344194	thin duts, AIC 2hrs)	
Ref Ho 17 / 10 / 19 / 3:45 SAS c-Illin	19	
Date in 17 1/2 1/2 Job descripti	La ser Completed	Done by
NATIONAL Assessment Centre Services.		0.

i special same

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.
- 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.

atoresaid.	
THE RESERVE OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	17/10/2019 13:45
Date Of Accident	16/10/2019 08:40
Exact Location Of Accident	ALONG TERMASEK ACE TWDS TERMASEK BLVD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLU5157X
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83802233
Alternative Phone No	OFFICE-83802233
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL HYBRID
Exact Purpose for which vehicle was being used at time of accident	WORK
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD,
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994387
Cover Note Number	
Driver	
Name of Driver	TAN PING SENG
NRIC No	S1459161C

 Name of Driver
 TAN PING SENG

 NRIC No
 \$1459161C

 Date Of Birth
 03/10/1961

 Occupation
 OUTDOOR

 Date Of Driving Pass
 03/11/2014

Driving Experience 4 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92702850

Fax Number Contact Number

EMail Address NOEMAIL

Address

BLK 136 BUKIT BATOK WEST AVE 6 #08-507

Postcode

650136

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

Type Of Accident

COLLISION - CHANGE/CROSS LANE

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?

NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES

Number of Passengers (Including Driver)

NO 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 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

SLJ1110P

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

- 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:

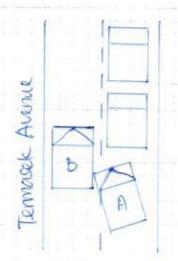
Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Vehicle A: SLU5157X Vehicle B: StJ1110P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Said timo Was driving vehicle A Termasek Alenue alona ermaget two The traffic on my lanes. wanted to filter my vehicle to lane 2, before Heroc my vehicle and to give way stopped which gradenia vehicle driving new scratched onto my vehide damaged on my Dumper vehide damaged on the rear right tender aarnish No body was irriured.

DECLARATION

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

Policyholder's signature Date & Firme:

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

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

Vehicle No.	SLU5157X Model/Make Handa Vezel Hybrid
Date of Accident	16/10/2019
Time of Accident	0840 HRS
Location of Accident	Along Termosek Avenue toods Termosek Blud
Exact purpose use during acci	
Name of Owner	Twincar Leasing Pte Ltd
Telephone No.	H/P: 8380 2233 Home: Office:
NRIC	201533046C
Address	2 Kaki Bakit Avenue 2 #01-17 8(417921
Claim type	OD THIRD PARTY REPORTING ONLY
Insurance Company	AIG
Type of Coverage	Comprehensive Third Party Third Party / Fire /Theft
Policy No.	999994387
Name of Driver	As Above If No, Tan Ping Seng
NRIC	S1459161C Any Passengers: -
Date of birth	3/10/1961
Occupation	Outdoor / Indoor
Driving License Pass Date	3/11/2014
Gender	Male / Female
Contact No.	H/P:92702850 Home: Office:
Address	BLK 136 Bukit Bortok West Avenue 6 #08-507 5(650136
Driver have any own vehicle	No, If yes, Reg No.
	Employee, If no, state Hirer
Relationship Weather condition	Clear Raining Other
Road Surface	
Any Injuries Name And Contact No.	No, If Yes, Who?
Name And Contact No.	
	No, If Yes, Where?
Police Report	
Vehicle B No.	
Name of Driver	Ferrale Contact No.: Any Passengers:
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No.	Witness Contact :
Witness Name	
Accident Portion	Front left portran
Camera Recorder	Yes / No
Email Address	
PARTICULAR WORKSHOP	N-51 Automotive Dte Ltd
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	Zi Ting
FAX NO	6741 0510
WORKSHOP EMAIL APDRESS	sales @ n51. com. sg



POLICY NO.

CERTIFICATE OF INSURANCE

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)

M.Z.400

(The below excess is subject to GST)

COMPREHENSIVE COMMERCIAL MOTOR POLICY EXCESS S\$2000.00 (Sect | & II) CERTIFICATE NO. SLU5157X WINDSCREEN EXCESS \$\$100.00

SUM INSURED YES INSURING WITH COE/PARF YES

1) VEHICLE REGISTRATION NO. SLU5157X

999994387

2) NAME OF INSURED Twincar Leasing Pte Ltd 3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE

FOR THE PURPOSES OF THE ACT 19 October 2018 4) DATE OF EXPIRY OF INSURANCE 18 October 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*

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

5\$2,000.00 Section I & \$\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore.

Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).

Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services.

An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

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
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for fultion, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

it is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.

> LOSS OF USE Not Included HIRE PURCHASE COMPANY MAYBANK

*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.

17 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 (Majaysia).

Issued in Singapore 17 Oct 2018

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPOEC

ORIGINAL