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.
- 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 19/10/2019 17:53 Date Of Accident 18/10/2019 19:25 Exact Location Of Accident TOA PAYOH LORONG 5 AT OPEN CARPARK Country/State of Loss SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number SKF2612J Insured/Policyholder Name Of Registered Owner TAY ALVIN NRIC No S8206405B Email Address TAYMINS2@HOTMAIL.COM Mobile Phone No (LOCAL) +65-91788045 Vehicle Particulars Manufacturer VOLKSWAGEN Model JETTA-1.4 TSI 1623Q5 (A) Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Type Of Coverage COMPREHENSIVE Fleet Policy NO Driver Name of Driver TAY ALVIN Name of Driver TAY ALVIN	aforesaid.	some to the dronwing of this report at the confide and to copies of the report being made available
Date Of Accident Exact Location Of Accident Country/State of Loss SINGAPORE DETAILS OF OWN VEHICLE Vehicle Registration Number SKF2612J Insured/Policyholder Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer Model Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken Insurance Company Name of Insurance Company Name of Insurance Company Policy Number Cover Note Number Driver		ACCIDENT STATEMENT
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Vehicle Registration Number SKF2612J Insured/Policyholder Name Of Registered Owner TAY ALVIN NRIC No S8206405B Email Address TAYMING2@HOTMAIL.COM Mobile Phone No (LOCAL) +65-91788045 Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer VOLKSWAGEN Model JETTA-1.4 TSI 1623Q5 (A) Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy or repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Driver	Exact Location Of Accident	TOA PAYOH LORONG 5 AT OPEN CARPARK
Name Of Registered Owner	Country/State of Loss	SINGAPORE
Insured/Policyholder Name Of Registered Owner NRIC No S8206405B Email Address TAYMING2@HOTMAIL.COM Mobile Phone No (LOCAL) +65-91788045 Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer Model Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage Fleet Policy NO MS/00628818 Cover Note Number Driver		DETAILS OF OWN VEHICLE
Name Of Registered Owner NRIC No S8206405B Email Address TAYMING2@HOTMAIL.COM (LOCAL) +65-91788045 Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer WolkSWAGEN Model JETTA-1.4 TSI 1623Q5 (A) Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO MS/00628818 Cover Note Number Driver	Vehicle Registration Number	SKF2612J
NRIC No Email Address TAYMING2@HOTMAIL.COM Mobile Phone No (LOCAL) +65-91788045 Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer VOLKSWAGEN Model Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken Insurance Company Name of Insurance Company Name of Insurance Company Piect Policy Policy No Policy Number Over Note Number Driver	Insured/Policyholder	
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Mobile Phone No (LOCAL) +65-91788045 Alternative Phone No OFFICE-91788045 Vehicle Particulars Manufacturer VOLKSWAGEN Model JETTA-1.4 TSI 1623Q5 (A) Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number Cover Note Number Driver	NRIC No	S8206405B
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Vehicle Particulars Manufacturer VOLKSWAGEN Model JETTA-1.4 TSI 1623Q5 (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 THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number MS/00628818 Cover Note Number Driver	Mobile Phone No	(LOCAL) +65-91788045
Manufacturer Model JETTA-1.4 TSI 1623Q5 (A) Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company Type Of Coverage Fleet Policy Policy Number MS/00628818 Cover Note Number Driver	Alternative Phone No	OFFICE-91788045
Model JETTA-1.4 TSI 1623Q5 (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? If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR Insurance Company Name of Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number MS/00628818 Cover Note Number Driver	Vehicle Particulars	
Exact Purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken Vehicle Category Insurance Company Name of Insurance Company Name of Insurance Company Type Of Coverage Fleet Policy Policy Number Driver PRIVATE USE NO NO NO MS/00628818 PRIVATE USE NO NO MS/00628818	Manufacturer	VOLKSWAGEN
time of accident Are you claiming under your own insurance policy for repair to your vehicle? If No, Please state action to be taken Vehicle Category Insurance Company Name of Insurance Company Type Of Coverage Fleet Policy Policy Number Cover Note Number Driver	Model	JETTA-1.4 TSI 1623Q5 (A)
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Vehicle Category Insurance Company Name of Insurance Company Type Of Coverage COMPREHENSIVE Fleet Policy Policy Number Cover Note Number Driver		NO
Insurance Company Name of Insurance Company Type Of Coverage COMPREHENSIVE Fleet Policy Policy Number MS/00628818 Cover Note Number Driver	If No, Please state action to be taken	THIRD PARTY
Name of Insurance Company Type Of Coverage COMPREHENSIVE Fleet Policy Policy Number Cover Note Number Driver	Vehicle Category	PRIVATE CAR
Type Of Coverage COMPREHENSIVE Fleet Policy NO Policy Number MS/00628818 Cover Note Number Driver	Insurance Company	
Fleet Policy Policy Number MS/00628818 Cover Note Number Driver	Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Policy Number MS/00628818 Cover Note Number Driver	Type Of Coverage	COMPREHENSIVE
Cover Note Number Driver	Fleet Policy	NO
Driver	Policy Number	MS/00628818
	Cover Note Number	
Name of Driver TAY ALVIN	Driver	
TATALVIII	Name of Driver	TAY ALVIN

Name of Driver TAY ALVIN
NRIC No S8206405B
Date Of Birth 22/02/1982
Occupation INDOOR
Date Of Driving Pass 23/11/2007

Driving Experience 11 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91788045

Fax Number

Contact Number OFFICE-91788045

EMail Address TAYMING2@HOTMAIL.COM

Address BLK 213C PUNGGOL WALK #13-779

Postcode 823213

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?

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) 0

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

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC1584P

Vehicle Make/Model/Colour HYUNDAI / SONATA NF 2.0

Details Of Properties

Vehicle Category TAXI

Name of Driver STEVEN LOW

NRIC/Passport Number

Contact Number 97627079

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 18

SKETCH PLAN

IMPORTANT NOTICE

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- 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:
 - (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: Lave PAG

NRIC/FIN No.:

SKETCH PLAN		NA CVE 2612 7.
Corpo	ink loss.	BASKF 2612 J. BASKF 2612 J.
		B & 24C 1584 F.
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DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT	
My Volvicle Was	s partial at the open compart	c of Too Payoh Lorong t
	ne video hatage , he was reve	
According to th	he video footage , he was reve	endind and hus and
		7
Right Front.	1	9
Right Front.		7
Right Front.		
ECLARATION		
ECLARATION	ticulars are true in every respect.	
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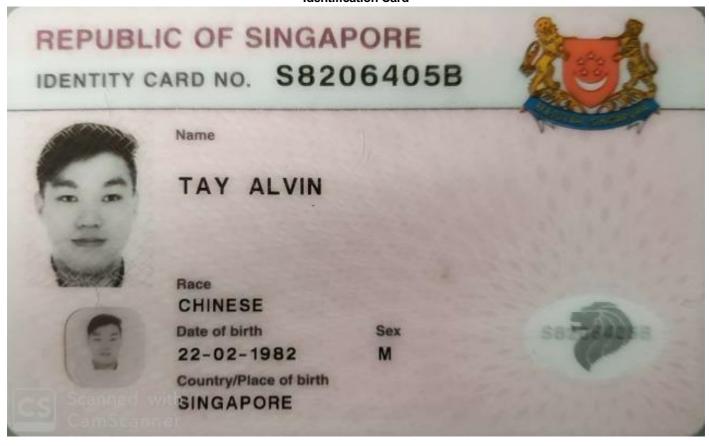








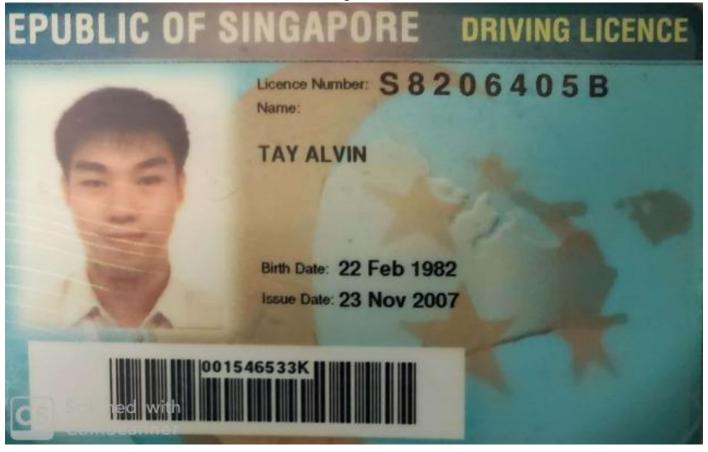
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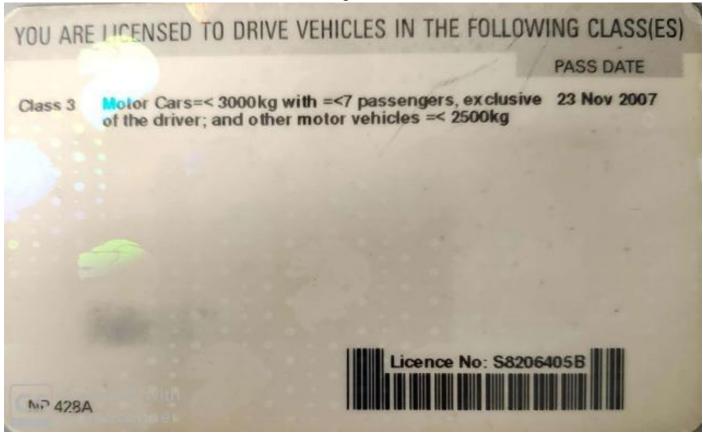
Identification Card



Driving License



Driving License





Contact us at

CERTIFICATE OF INSURANCE

Hotor Vahicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Hotor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with its and should be read together with your Pokes Schedule and your Pokes Details. Bo let us know if any of the details shown here need to be amended or updated.

Certificate No.

Type of Coverage

1) Vehicle Registration No. Chinasia No.

2) Name of Policy Holder

3) Effective Date of Commencement of Insurance for the Purpose of the Act.

4) Date of Expiry of Insurance

MS/DOEDSHIE

Comprehensive Cover

50(2612) WVWZZZ15ZCM115645

Tay, Altern

11/03/2019-00:00

1 10/05/2020 23:59

5) Persons or Classes of Persons Entitled to Drive

(8) A named person who is driving on the Policyholder's permission

Provides that the person driving has a valid driving liberce to drive in Singapore and 6 not under suspendion or Singular Flowing from driving

6) Limitations as to use"

Use unity for provide purposes, in accordance with the declared car usage stated on your Pokry Schedule. The bolicy does not cover use for him or reward, faition, driving test, racing, pace-making, reliability black, speed tests, the comage of goods for payment or for any purpose in connection with the motor trade business:

unitations (endand inspending by Section 6 of the Act and Section 5) of the Road Transport Res. 1957 (Melavala), are not to be included under this heading.

Sum Insured Market Walve

Own Damage Excess: 34 1,500,00 (before any applicable GST). Windscreen Excess SE TOO SO (before any applicable GST) Choice of workshop DirectAsia approved workshoots

Main driver Day, Awar

Important Note: This pricy is on named driver leads. Any unrestrict drivers will not be covered.

Finance company / Hire Purchase

I/We hereby centry that the Policy to which that Certificate relates is assed in accordance with the provisions of the Mousi variable (Third Porty Reks and Compensation) Act (Chapter 189) and the Road Third Porty Reks and Compensation) Act (Chapter 189) and the Road Third Porty Reks and Compensation).

Inspections:

2.1/04/2015

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Orief Underwriting Officer

Direct Asia Insurance (Singapore) Pte Ltd. 20 Ansion Road #06-U1 Twenty Missin Streament 079913 www.Ginet/fold.com