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

aforesaid.	tent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	21/10/2019 17:23
Date Of Accident	20/10/2019 05:00
Exact Location Of Accident	CTE (SLE)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMK2280H
Insured/Policyholder	
Name Of Registered Owner	DYNASTY LIFT TRUCKS SERVICES PTE LTD
Co Reg No	200615265Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97920200
Alternative Phone No	OFFICE-97920200
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA6 4-DOOR SEDAN 2.0L SP.6EAT
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5109644318
Cover Note Number	
Driver	
	.,,

Name of Driver KELVIN LIM LENG TEE

NRIC No S7413368A

Date Of Birth 29/04/1974

Occupation OUTDOOR

Date Of Driving Pass 30/08/1995

Driving Experience 24 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97920200

Fax Number

Contact Number OFFICE-97920200

EMail Address NOEMAIL

Address 632 UPPER THOMSON ROAD

#09-80 787133

W 1: 1 (II) NO NO

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 COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface DRY

Other Information

Postcode

Was any foreign vehicle involved in this accident? NO

NO 2

Number of vehicles (including own vehicle) involved in the accident

ie)

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

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

ON STATED DATE AND TIME, I WAS TRAVELLING STRAIGHT ALONG THE STATED VENUE. SUDDENLY I FELT AN IMPACT OF MY VEHICLE AND REALIZED THAT VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

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 SMK2952C

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)

2

Passenger 1

NAME: GENDER:

DETAILS OF INJURED PERSON 1

Name KELVIN LIM LENG TEE

Approximate Age

Postcode

Injuries Sustain **BODY** Injured person in which vehicle? SMK2280H

Were seat belts worn? YES

Was this injured conveyed to hospital by NO

ambulance?

Address

Page 3 of 19

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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:
 - (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

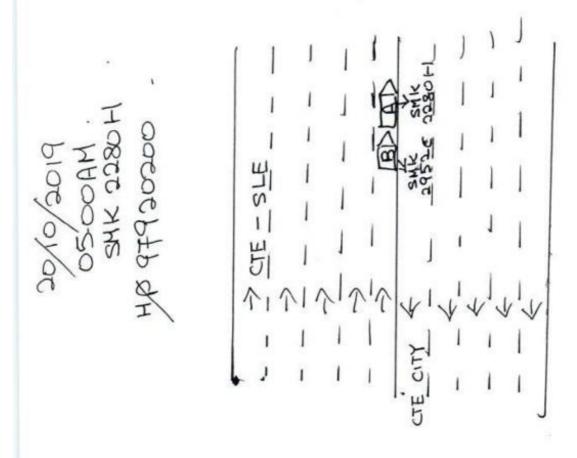
Name:

NRIC/FIN No.

Accident Sketch Plan

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ate & Time: (If driver's not the policyholder) Name:	Policyholder's Signature	Driver's Senature Reporting Centre Personal's Senature
Date & Time: NRIC/FIN No.:	Date & Time:	(If driver is not the policyholder) Name:

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ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)

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Business Profile (Company) of DYNASTY LIFT TRUCKS SERVICES PTE. LTD. (200615265Z)

Date: 13/05/2019

The Following Are The Brief Particulars of:

Registration No.

2006152652

Company Name.

DYNASTY LIFT TRUCKS SERVICES PTE, LTD.

Former Name if any

Incorporation Date.

13/10/2006

Company Type

EXEMPT PRIVATE COMPANY LIMITED BY SHARES

Status

Live Company

Status Date

13/10/2006

Principal Activities

Activities (I)

WHOLESALE TRADE OF A VARIETY OF GOODS WITHOUT A DOMINANT PRODUCT

(46900)

Description

Activities (II)

RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (77101)

Description

INCLUDING LORRIES, TRUCKS & FORKLIFT

Capital

Issued Share Capital

Number of Shares *

Currency

Share Type

(AMOUNT)

660000

660000

SINGAPORE, DOLLARS

ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital

Number of Shares

Share Type

(AMOUNT)

660000

SINGAPORE, DOLLARS

ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares

Currency

Authentication No.: X19319912U

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ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)

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Business Profile (Company) of DYNASTY LIFT TRUCKS SERVICES PTE. LTD. (200615265Z)

Date: 13/05/2019

Registered Office Address

92 TAGORE LANE

SINDO INDUSTRIAL ESTATE SINGAPORE (787534)

Date of Address

01/02/2007

Date of Last AGM

29/03/2019

Date of Last AR

24/04/2019

FYE As At Date of Last AR

30/09/2018

Audit Firms

NAME

Charges

Charge No.

Date Registered

Currency

Officers/Authorised Representative(s)

sincers/Additionised Representative(s)		SERVICE CO.		
Name	ID	Nationality	Source of	
Address		Position Held	Address	Date of Appointment
LIM LENG TEE 632 UPPER THOMSON ROAD #09-80 MEADOWS @ PEIRCE SINGAPORE (787133)	S7413368A	SINGAPORE CITIZEN Director	OSCARS	13/10/2006
CHAI ENG YEOW 102 GANGSA ROAD #07-25 SINGAPORE (670102)	\$6915502B	SINGAPORE CITIZEN Director	ACRA	11/10/2014
SOH KIAN HWA 259C COMPASSVALE ROAD #14-633 SINGAPORE (543259)	\$80094941	SINGAPORE CITIZEN Secretary	ACRA	25/09/2018
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Authentication No.: X19319912U

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Business Profile (Company) of DYNASTY LIFT TRUCKS SERVICES PTE. LTD. (200615265Z)

Date: 13/05/2019

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Shar	en	Ole	don	21

and the second				
	ID	Nationality/Place of	Source of	Address Changed
		incorporation/Origin	Address	
CHAI ENG YEOW	S6915502B	SINGAPORE CITIZEN	ACRA	10/09/2012
102 GANGSA ROAD #07-25 SINGAPORE (670102)				10/00/2012
Ordinary(Number)	Currency	66000		
330000	SINGAPORE.			
LIM LENG TEE	S7413368A	SINGAPORE CITIZEN	OSCARS	08/03/2016
#09-80 MEADOWS @ PEIRCE				
Ordinary(Number)	Currency	Control of the Contro		
330000	SINGAPORE, D	NORMODERS IN THE		
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Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

Note:

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

Authentication No.: X19319912U

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Business Profile (Company) of DYNASTY LIFT TRUCKS SERVICES PTE. LTD. (200615265Z)

Date: 13/05/2019

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

ACRA190513109356

DATE

: 13/05/2019

This is computer generated. Hence no signature required.



Authentication No.: X19319912U

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