

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	05/02/2020 10:53
Date Of Accident	14/12/2019 12:40
Exact Location Of Accident	JUNCTION OF MIDDLE ROAD TOWARDS SOPHIA ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX7713L
Insured/Policyholder	
Name Of Registered Owner	VINCAR LEASING AND RENTAL PTE LTD
Co Reg No	2XXXXX828K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91601833
Alternative Phone No	OFFICE-91601833

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-MJ000693-R01
Cover Note Number	

Driver

Name of Driver	CHEONG CHIANG CHOON ANDREW
NRIC No	SXXXX137Z
Date Of Birth	03/07/1969
Occupation	OUTDOOR
Date Of Driving Pass	22/01/1990
Driving Experience	29 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91601833
Fax Number	
Contact Number	OTHERS-91601833
Email Address	NOEMAIL

Address	BLK 191 BOON LAY DRIVE #11-164
Postcode	640191
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 - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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?	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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKN8148B
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

1. Please report correctly the facts of the accident to your insurer (the relevant person).
2. This form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be truthful and accurate as possible. A vehicle's insurance policy may be repudiated if the insured person or any authorized driver of the insured vehicle attempts to repudiate policy liability.
4. The above and accuracy of this form may not always be immediately apparent. However, it is a latent or the goal of this insurance company.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the G.A. Insurance Management Centre established by the General Insurance Association of Singapore (GIA) for assessing and that copies of this report will be made available upon application by interested parties.
7. By the signing of this report to the insurers, you hereby consent to the publishing of this report as the central and to copies of the report being made available to the relevant parties.

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 insurers who have insured vehicle(s) involved in this accident (all insurers) 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 purposes 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 doing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the making 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 claim collectively the "Purposes".
- (b) all insurers 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 the purpose of the above purposes; and
- (c) my Personal Information may/are disclosed by any of the insurers and/or GIA to their third party service providers (agents) including their lawyer/law firm, which may be used for the purpose of the above purposes;
- (d) my Personal Information will be collected, used, disclosed, transferred, stored, processed, handled and/or dealt with by the insurers and/or GIA and their third party service providers (agents) for the purpose of the above purposes;
- (e) my Personal Information will be collected, used, disclosed, transferred, stored, processed, handled and/or dealt with by the insurers and/or GIA and their third party service providers (agents) for the purpose of the above purposes;
- (f) my Personal Information will be collected, used, disclosed, transferred, stored, processed, handled and/or dealt with by the insurers and/or GIA and their third party service providers (agents) for the purpose of the above purposes;
- (g) my Personal Information will be collected, used, disclosed, transferred, stored, processed, handled and/or dealt with by the insurers and/or GIA and their third party service providers (agents) for the purpose of the above purposes;
- (h) my Personal Information will be collected, used, disclosed, transferred, stored, processed, handled and/or dealt with by the insurers and/or GIA and their third party service providers (agents) for the purpose of the above purposes;



[Signature]

[Signature]
05/02/2020
Fooki L...

SKETCH PLAN

Selegre Road



red ←



5 4 3 2 1

A SX 7113L
B SKN 8148 B

Junction of
Middle Road
towards
Sophia Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached

DECLARATION



[Handwritten signature]

05/02/2020
[Handwritten signature]

On 14.12.19 at about 12:40 hours at Junction of Middle Road towards Sophia Road.

I was travelling on the lane 4 and my front vehicle (B) suddenly jam brake
I could not brake in time and collided of the rear portion of the vehicle (B).

Vehicle (A) : SLX7713L

Vehicle (B) : SKN8148B

A handwritten signature in black ink, appearing to be 'V. J.', located to the right of the vehicle information.

SINGAPORE ACCIDENT STATEMENT

Accident Date: 14/12/19		Time: 12:40hrs (hh:mm) 24 hr format	
Location Junction of Middle Road towards Sophia Road			
Vehicle Number SLX 7713L			
Insured Name Vimar Leasing and Rental Pte Ltd			
NRIC/FIN 201414828K		Contact Number —	
Make Honda		Model Shuttle	
Are you claiming under your own insurance policy for repair to your vehicle?			
() Yes If No, Pls select: () Third Party (<input checked="" type="checkbox"/>) Reporting			
Insurance Company Tokio Marine			
Type of Policy () Comprehensive () Third Party Fire & Theft () TP Only			
Policy Number			
Name of Driver Cheong Chiang Choon Andrew () Same as Insured			
NRIC/FIN 56926137Z		Contact Number 9160 1833	
Date of Birth 02/07/1967			
Driving Pass Date 22/01/1990			
Occupation () Indoor (<input checked="" type="checkbox"/>) Outdoor			
Gender () Male () Female			
Email Address — No email — () NO EMAIL			
Address of Driver Blk 171 Boon Lay Drive #11-164, 56646191			
Was driver an employee of the Insured's Company? () Yes () No HIRER			
If No, Relationship of the Driver with the Insured			
() Owner () Spouse () Friend () Relative () Children () Sibling			
Does the Driver Own Any Other Vehicle? () Yes () No			
If Yes, Vehicle Registration Number of Driver's Own Vehicle			
Insurance Company of Driver's Own Vehicle			
Weather Conditions (<input checked="" type="checkbox"/>) Clear (<input checked="" type="checkbox"/>) Raining () Others			
Road Surface () Dry (<input checked="" type="checkbox"/>) Wet () Others			
Was any foreign vehicle involved in this accident? () Yes (<input checked="" type="checkbox"/>) No			
Was anybody injured in the accident? () Yes (<input checked="" type="checkbox"/>) No			
If yes, injured detail			
Was there any video captured by Car Camera? () Yes (<input checked="" type="checkbox"/>) No			
Was the Accident reported to the Police? () Yes (<input checked="" type="checkbox"/>) No If yes attach police report			
DETAILS OF 3 rd party Name / Nric Contact			
Veh B 54N 8148M			
Veh C			
Veh D			
Veh E			
Veh F			

Driver Only

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No. 192300014M) (GST Reg. No. MZ-000023-4)
 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046
 T (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E tmls@tokiomarine.com.sg W www.tokiomarine.com



TOKIO MARINE
 INSURANCE GROUP
 FORM MX111

A member of the
 Tokio Marine Group

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)

Policy No.: 19-MJ000693-R01 (Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SLX77131 **Chassis No.:** GP71121431
2. **Name of Policyholder** VINCAR LEASING AND RENTAL PTE LTD
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 21/05/2019
4. **Date of Expiry of Insurance** 20/05/2020
5. **Persons or Class of Persons entitled to drive***
 Any person who is driving on the Policyholder's order or with their permission.
 The hirer.
 Any other person who is driving on the hirer's order or with his/ 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 for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.
 Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for 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.

* 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: 2783DDA

Insurance Plan:	Comprehensive Approved Workshop Plan	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Own Damage Claims	SGD 2,000
	Excess-Third Party (Sec II)	SGD 2,000
	Windscreen Excess	SGD 100
Financial Interest:	MAYBANK SINGAPORE LIMITED	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Tay Pui Leng Katherine -

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