MCHM20031600 / Cheng Hoe Motor Pte Ltd - Yishun ENTRY DATE & TIME: 12/03/2020 14:18 SUBMITTED BY: DORLYN LI YAZHU

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number
Contact Number
EMail Address

Gender

- 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.

	archiving and that copies of this report will, for a fee, be made ava 7. By the lodgement of this report to the insurers, you hereby cons aforesaid.	ilable upon application by interested parties. ent to the archiving of this report at the centre and to copies of the report being made available
		ACCIDENT STATEMENT
	Date Of Report	12/03/2020 14:18
	Date Of Accident	12/03/2020 08:25
	Exact Location Of Accident	ECP
	Country/State of Loss	SINGAPORE
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	SMP8960M
	Insured/Policyholder	
	Name Of Registered Owner	SWIFT GREEN LIMOUSINE
	Co Reg No	5XXXX186X
	Email Address	NOEMAIL
	Mobile Phone No	
	Alternative Phone No	OFFICE-93632230
	Vehicle Particulars	
	Manufacturer	MERCEDES-BENZ
	Model	E250-1.8 CGI (A)
	Exact Purpose for which vehicle was being used at time of accident	PTE USE
	Are you claiming under your own insurance policy for repair to your vehicle?	YES
	If No, Please state action to be taken	
	Vehicle Category	PRIVATE CAR
	Insurance Company	
	Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
	Type Of Coverage	COMPREHENSIVE
	Fleet Policy	NO
	Policy Number	DMHCSNW00000441900
	Cover Note Number	12/12/2019 - 11/12/2020
	Driver	
	Name of Driver	SHAFRUDIN BIN ROWDEN
	NRIC No	SXXXX573H
	Date Of Birth	11/03/1955
	Occupation	OUTDOOR
	Date Of Driving Pass	20/06/1983

36 YEARS AND 8 MONTHS

(LOCAL) +65-92203673

MALE

NOEMAIL

BLK 220 CHOA CHU KANG CENTRAL #02-272 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident FIRE, EXPLOSION OR LIGHTNING

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

1

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

1

NO

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

NO

SKETCH PLAN

VEHICLE NO.: SMP8960M INSURER : Ching DATE & TIME: 2/03/2020 @ 067

IMPORTANT NOTICE

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- 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 aforesald.
- 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 Cantre Personnel's Signature

Name: DVV 4 CAV

4/03/202

SKETCH PLAN		
A		A: SMP8960M
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DESCRIBE CIRCUMSTANC	ES OF THE ACCIDENT	https://www.slam.gov.com.com
I was driving a number on my car time of kn on a extreme le my car and a subsequently as	ar, as such i step on mew was the engine post ft lane. Unknown car asked me to get out or out from the bonnet, le to make phone and sess my car before the way vehicle to my in	driver Stopped his car inthint of f my car asap as there was i town got out of my car and to SCDP. Approx-lowing later, put out the fire on my car;
under your own control of the property of the	our insurer may have 14days Time Formprehensive policy. Please check we rticulars are true in every respect. Driver's Signature (If driver is not the policyholder) Date & Time: Claim Own Policy () Claim Third Pa	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Identification Card





ACRA1

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY LICE

INFORMATION RESOURCES

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Business Profile (Business) of SWIFT GREEN LIMOUSINE (53248186X)

Date: 15/12/2019

Name of Business	THE RESIDENCE OF THE PROPERTY OF THE PARTY O
Former Name(s) if any	SWIFT GREEN LIMOUSINE
Date of Change of Name	
Registration No.	53248186X
Registration Date	31/10/2013
Commencement Date	31/10/2013
Status of Business	Live
Status Date	27/10/2018
Renewal Date	10/10/2019
Expiry Date -	31/10/2022
Renewal via GIRO	NO NO
Constitution of Business	Sole-Proprietor
Principal Place of Business	220 CHOA CHU KANG CENTRAL AGC-272 SINGAPORE (1880/230)
Date of Change of Address	
discipal Activities	BOOK AND THE PARTY OF THE PARTY
ctivities (I)	PASSENGER LAND TRANSPORT N.E.C. (EQ PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (46219)
escription	PASSENGER LAND TRANSPORT NECIES PRIVATE CAR FOR HIRE WITH OPERATOR
ctivities (II)	VALUE ADDED LOGISTICS PROVIDERS (\$2291)
escription	VALUE ADDED LOGISTICS PROVIDERS
articulars of Authorised Represents	
Wite State State State Division	Strice of ty. Address Address Date of

Authentication No.: B19694874H

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ACRA2

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)



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Business Profile (Business) of SWIFT GREEN LIMOUSINE (53248186X)

		Nationalty/Place of mostporation/Origin	Address	Address Source	U Die den
TARREST NO.	No.			1500	Parton:
ROHANA BINTE TAMIN	515005281	SINGAPORE	220 CHOA CHU KANG CENTRAL	al .	
NOTIFIED DINIC TAND	313063764	CITIZEN	#02-272	ACRA	31/10/2013

to society to the state of the construction of	Address	Address	Cale of Entry	2000000
	fransorman un	halicrathy Place of Address fransocation Organ	Francoi o un Control con Control	Proposition un Epiny Epine

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

- 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 accessing page, ag.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

: ACRA191215168298 : 15/12/2019

DATE

This is computer generated. Hence no signature required.



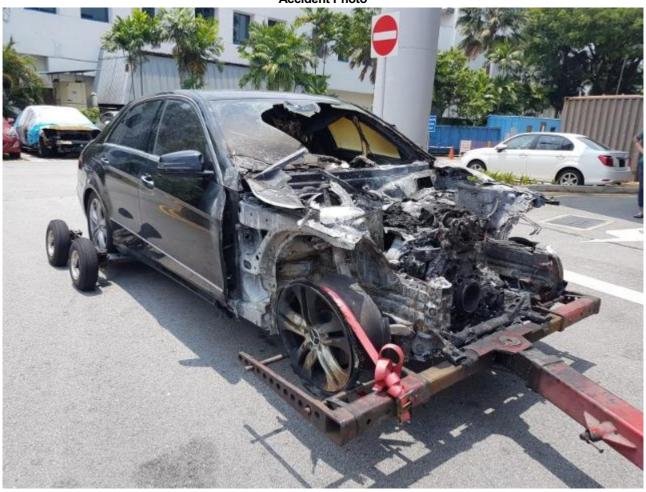
Authentication No.: 819694874H

Page 2 of 2

Driving License







Accident Photo



Accident Photo





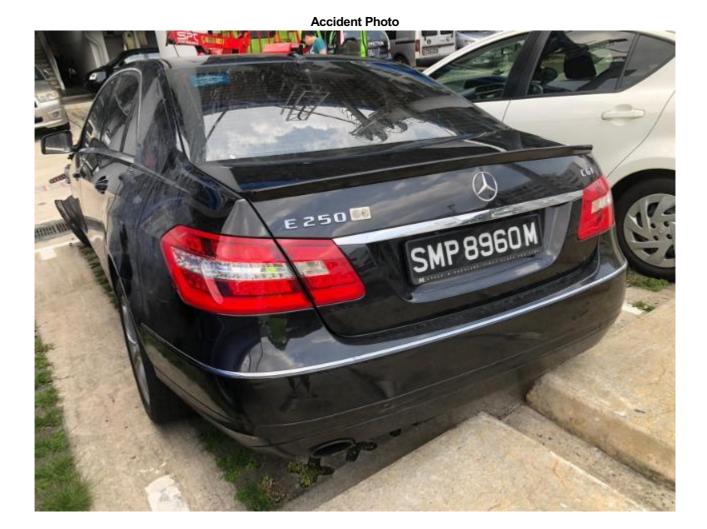






Accident Photo





SCENE PHOTO

