BRYAN

NATIONAL Assessment Centre	Services were saven	29					
Date In: 16/03/20	Job description	. Date & Time Completed	Done l).).			
Ref No NM/A162000 4079/13	SAS e-filing						
Veh No. SET3328A	E-mail (within 8hrs, A1C 2hrs)						
D.O.A 14/03/20 12:05	i-Motor Claim Form						
OD (1P) Reporting Only	i-Motor W/O (Within: OD 2h	irs, TP 4hrs)					
CB . (17) Reporting Only	i-Photo Uploaded		·	* * *			
TP Insurer:	Assessment/Survey Report						
	Ass't Report by Fax / Hand	by Fax / Hand to Owner/Wksp					
Preferred Wksp / INC Assign Wksp / QW: (TAN LIM	Tel; Fax:		-			
	U3589P INC)/Non-INC()	£11.200.000				
Owner / Driver: (Tel:)				
Policy No: () Perio	d: ()	Cover Type: ()				
Confirmed by : (Date:	Time:)				
	te-Est. Status (WO): N: 0-2	20%; P: 21-79%. F: 80-100	%]				
	rranty: YES ()/NO ()					
Excess: (\$) Loading: \$1,000	()/\$2,000()						
1) Apply for Transport Allowance () / Cou 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$300 Injury: Date/Time Actions	() () 0] ()						
NA 2002 156 NA 2002 65	1) AR : Accide	eparation Checklist at Reporting (\$30); Assessment (\$100); INC (\$80)	Ant (\$)	'Amt (
Priver/Owner:	3) TF : Towing	Fee . \$40/\$4.					
ontact No:	5) FT : Follow-	Through Survey \$12 Through Survey (Resurvey) \$30					
amäged Portion:	6) TR: Re-insp 7) N1: Idae DA	### ### ### ### ### ### ### #### ######					
C Checked by (Engr-In-Charge):	On* *N5: Courter						
uditors! Comments :-	*N7: Post Re	*N7: Post Repair Inspection \$25					
at. 1:	TP (N11): T	P (Non INC) against INC \$20	2				
11, 2/3;	9) N12: Idno M Invoice dated	obile 30 Fee Charged		H AT			
	Involve dated	Fee Charged	7-15 80"				

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.
- 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.

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ACC	DENI	STA		III-IN	

Date Of Report 16/03/2020 18:20 Date Of Accident 14/03/2020 12:05

Exact Location Of Accident (CARPARK CLGM2) BEHIND GHIM MOH RD BLK 19B

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SKT3328A**

Insured/Policyholder

Name Of Registered Owner LIM LEE MENG NRIC No SXXXX427E **Email Address** NOEMAIL

Mobile Phone No (LOCAL) +65-96669801 Alternative Phone No. OTHERS-96669801

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model

Exact Purpose for which vehicle was being used at PRIVATE USE

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

Type Of Coverage COMPREHENSIVE

NO Fleet Policy

Policy Number 2100412389-04

Cover Note Number

Driver

Name of Driver LIM LEE MENG NRIC No SXXXX427E Date Of Birth 13/02/1956 INDOOR Occupation Date Of Driving Pass 08/12/1980

Driving Experience 39 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96669801

Fax Number

OTHERS-96669801 Contact Number

EMail Address NOEMAIL

Page 1 of 19

BLK 31 MOUNT SINAI RISE Address

#21-07

276953 Postcode

Was driver an employee of the Insured's Company NO If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

OWNER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident Weather Conditions SIDE SWIPE CLEAR

DRY

Other Information

Road Surface

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

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

PLS REFER TO THE ATTACHED 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

GU2589P

Vehicle Make/Model/Colour

NISSAN

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

MR NG

NRIC/Passport Number

Contact Number

93890788

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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:
 - 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: (b/03/2020 Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

16/03/20

Name:

NRIC/FIN No.:

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Policyholder's Signature
Date & Time: | 00 7070

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

Name:

NRIC/FIN No.:

LLM STATEMENT

The accident occurred on 14 March 2020, on or about 12.05pm at the car park area (i.e. car park number CLGM2) behind Ghim Moh Road HDB Block 19B.

The vehicles involved in the accident include: (i) my car, with car plate number SkT3328A; and (ii) a Nissan pickup, with vehicle plate number GU2589L (the "Nissan Pickup").

I had waited for a while in the car park before car park lot number 64 (the "Vacant Lot") became vacant. After checking that the surrounding area was free of any obstructions, I started reversing my car into the Vacant Lot.

As I was reversing, the Nissan Pickup suddenly reversed and appeared inches away from the left side of my car. Due to the sudden reversal of the Nissan Pickup, the right rear of the Nissan Pickup collided into the left side mirror of my car. At the point of the accident, my car was already entering the Vacant Lot.

The impact of the accident damaged the left side mirror assembly and knocked off the mirror cover.

In addition, one of the pictures taken at the scene of the accident seemed to indicate that the Nissan Pickup was in a position that was against the traffic flow.

The pictures of the accident which include: (i) the positions of my car and the Nissan Pickup; and (ii) the damaged left side mirror assembly, are attached to this accident statement for your review and assessment.



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

1)) PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No: MNA 120033398
	Name(as shown in NRIC): LIM LEE MENG NRIC/FIN/Passport No : SXXXX 407E
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address : BLK 31 MOUNT SINAI RISE Singapore()
	Contact (Tel) :Mobile No.: 9666980/
	Email Address :
	Date of Accident : 14/03/20Time of Accident :
	Place of Accident : (CARPARK CLGMS) BEHIND GHIM MOH RD BLK
	Insurance Company:
)	ADDITIONALINFORMATION / AMENDMENTS:
11 180	I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: - HAVEN T FINISH KEY IN ACCIDENT CIR CUMSTA
(1)	EN GERSES
-	1. 6c
10	ZA/
10	Sym 17/03/20
	Policyholder / Driver's Signature Date: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Date:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 6. This report will be forwarded by the insurers to the GIA Records Management Centre of
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ACCIDENT STATEMENT

Date of Report

Date of Accident 14/03/2020

Exact Location of Accident

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKT3328 A

Insured/ Policyholder

Name of Registered Owner Lim Lee Meng

FIN/ Passport Number S1178427E

Vehicle Particulars

Vehicle Make Mercedes Bent E200 2.0 CGI Sedan

Type of Vehicle Salooh

Exact Purpose for which vehicle was being used Private Use

at the time of accident

Are you claiming under your own insurance Yes/No

policy for repair to your vehicle?

Vehicle Category

Insurance Company

Name of Insurance Company American International Group

Type of Policy Comprehensive

Fleet Policy No

Policy Number 2 100412389 - 04

Motor CI

Driver

Name of Driver LIM Lee Meng

FIN/ Passport Number SII 78427E

Date of Birth 13 | 02 | 1956

Occupation Director

Year of Driving Experience 40 years

Gender

Maley Female

Address Block 31 Mount Singi Rise # 21-07 singapore 276953

Email Address leemeng @ leemeng capital.com

Was driver an employee of the Insured's

Company?

If no, Relationship of the Driver with the Insured

Insured

Vehicle Registration Number of Driver's Own Vehicle (If applicable) Insurance Company of Driver's Own Vehicle (if applicable)	
General Information of the Accident	
Type of Collision Reversing Weather Conditions Good Road Surface Dry	
Other Information	
Was any body injured in the Accident? Was any other material or property damage?	Yes/No Yes/No
Details of Injured Persons	\circ
Name Address Approximate Age Injuries Sustained If vehicle Occupants, state in which vehicle? Were seat belts worn? Was injured conveyed to hospital by ambulance?	
Details of Police Action	Takka katangan pagawan katangan katangan katangan lain
Was the Accident reported to the Police? • Mo If yes, please state which Police Station Was notice of intended Prosecution given? If yes, against whom?	
Circumstance of Accident	
Vehicle Registration Number GN 2589P Details of Properties Rear partien Vehicle Make/ Model/ Colour Nissan Name of Driver Mr Ng NRIC/ Passport Number Contact Number 9389 0788. Email Address Insurance Company Name Nature of Damage — Details of Witness Name Um Ghu Jun Phone Number Email Address	R VEHICLE(S)/ PROPERTIES



CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : Lim Lee Meng

Vehicle No.

: SKT3328A

Period of Insurance

: 18 May 2019 To 17 May 2020

Policy No. Endorsement No. : 2100412389-04

Engine No. Chassis No. : 27492030301269 WDD2120342B091618

Issued Date

: 12 Apr 2019

ABOUT THE COVER

: MERCEDES BENZ E200 2.0 CGI SEDAN

Engine Capacity/Tonnage : 1,991.00 CC

Sum Insured : Market Value

First Year of Registration : 2015

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder
 b) Any other person who is driving on the Policyholder's order or with his/her permission.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than years' driving experience

Age Condition

: All Age Condition

Limitation as to use*

Use only for social, demostic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under those headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Lim Lee Meng - \$800 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Cycle & Carriage Eunos Service Center (For accident reporting only) Add: 330 Ubi Road 3 Singapore 408650 62061818
 Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other. Approved Reporting Centres/AlG Authorised Repairers, please contact our 24-hour accident emergency hottino at +65 6338 6200. Alternatively, you may refer to AlG website www.alg.com.ag or AlG SG Mobile App. Simply search and download "AlG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MayBank

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 169), Part IV of Stiff Render of Cap. 169), Part IV of Stiff Render of Cap. 169 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia) 1002117474

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CYCLE & CARRIAGE - ATAY 239 ALEXANDRA ROAD

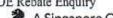
SINGAPORE 159930 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

78 Shenton Way #07-16 AIG Building \$079120 | T;+65 6419 3000 | www.sig.sg

AIG Asia Pacific Insurance Pta. Ltd.



A Singapore Government Agency Website

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

The information contained herein is correct as at 16 Mar 2020

Singapore NRIC Owner ID Type: Owner ID: 427E Vehicle No.: **SKT3328A** Vehicle to be Exported: Yes Intended Deregistration Date: 19 Mar 2020 Vehicle Make: MERCEDES BENZ Vehicle Model: E200 SEDAN (R17) Primary Colour: Manufacturing Year: 2014 Engine No.: 27492030301269 Chassis No.: WDD2120342B091618 Maximum Power Output: 135.0 kW (181 bhp) Open Market Value: \$42,793.00 Original Registration Date: 18 May 2015 18 May 2015 First Registration Date: Transfer Count: 0 Actual ARF Paid: \$46,911.00 PARF Eligibility: Yes PARF Eligibility Expiry Date: 17 May 2025 PARF Rebate Amount: \$35,183.00 COE Expiry Date: 17 May 2025 COE Category: B - Car above 1600cc or 97kW (130bhp) COE Period(Years): 10 \$78,001.00 QP Paid: COE Rebate Amount: \$40,245.00 \$75,428.00 Total Rebate Amount:

OK