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Owner/Driver: (N Security Control of the Control of	Tel:)	
Policy No: () Per	riod: () Cover Type: ()
Confirmed by : (Date:	Time:)	10.000
Insured/Driver Liability: (%) [1	Note-Est. Status (WO): N: (0-20%; P: 21-79%. P;	80-100%]	
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Invoice dated

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 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 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

A TANK DESIGNATION OF THE PERSON OF THE PERS	ACCIDENT STATEMENT
Date Of Report	20/07/2020 16:22
Date Of Accident	18/07/2020 18:00
Exact Location Of Accident	SLIP RD TO SENGKANG WEST RD FROM CTE(SLE)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ3824Z
Insured/Policyholder	
Name Of Registered Owner	CAR CHOICE SG
Co Reg No	5XXXX737J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94888111
Vehicle Particulars	

venicie Particulars	
Manufacturer	ТОУОТА
Model	AXIO
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage THIRD PARTY Fleet Policy NO Policy Number 5116131504

Cover Note Number

Driver Name of Driver CHAN YI JIE BENJAMIN(ZENG YIJIE BENJAMIN)

NRIC No SXXXX503E Date Of Birth 15/11/1983 Occupation INDOOR Date Of Driving Pass 20/03/2008

Driving Experience 12 YEARS AND 3 MONTHS

Gender

Mobile Number (LOCAL) +65-90727121

Fax Number Contact Number

EMail Address NOEMAIL

BLK 335 SERANGOON AVE 3 Address

#05-323

Postcode 550335

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

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

General Information of the Accident

Type Of Accident SIDE SWIPE 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

YES

NO

YES

Was any body injured in the Accident? YES Was any injured conveyed to hospital by YES

ambulance?

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20200719/7010

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

FBB6109Y Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 20

Name UNKNOWN Approximate Age Injuries Sustain SLIGHT Injured person in which vehicle? FBB6109Y Were seat belts worn? Was this injured conveyed to hospital by ambulance? Address Postcode

SKETCH PLAN

MPORTANT NOTICE

- 1. Please report gogrectly the details of the additiont to spend up the claims process
- 2. This Form must be completed by the Policyholder and/or the Authorise's Oriver.
- Information provided must be as truthful and occurate as possible. Any uniful misrepresentation or with ploing of material
 facts may allow insurance companies to repudiete policy liability.
- 4. The liquid acceptance of this Form by incurance companies is not an admission of policy liability on the part of the insurance companies.
- 1. Any faise 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 Insurence
 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 cartra and to explice of the report being made available aforesaid.
- S. Consent under the Personal Data Protection Act (PDPA)

I understand, asknowledge, agree and annient 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 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 purpose(s) of :
 - (ii) processing, handling and/or dealing with my dains including the sattlement of the dains and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my cloims:
 - (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(x) who have insured vehicle(s) involved in this accident and the insurers' lawyers/raw fixing may/are permitted to collect, uso, discloss and/or process my Personal information for one eximple of the above Rusposes; and
- (c) my Personal Intermitting may can be distlosed by any of the insurers and/or GIA to their third party sorvice providers or agants (including their lawyers) aw firms), which may be shed outside of Singepare, for one or more of the above Auriporte.
- (ii) By Personal Information will also be collected and used to compile claims history for the purpose of front despending Investigation and management in present and all future calms.
- (c) the information so collected under (d) above may be entred / disclosude
 - (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.

Folloynoteer Vsia Data & Times

53319737

Frs Signaturu

(if driver is not the palicyholder)

Date & Time:

Repart Fig Control Personnel's Elghatum

Name.

NRIC/FIN NA

SKETCH PLAN TPE (PIE) Towards uppy notatives the polytope (A) - SJJ3824Z (B) - FBB 6109Y DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Refer to police report attached Report No.: T/20200719/7010 Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information. DECLARATION I/Wa declare the fi golng particulars are true in every respect. CHOIC 53319737J on

er's Signature

Date & Time:

(if driver is not the policyholder)

Name:

MRIC/EN No.:

Policyholder's

Date & Time:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20200719/7010

REPORT OF A TRAFFIC ACCIDENT

	ne Report i 020 16:20	Made:	Vide Report No.: E/20200718/0157	Station Diary No.:	
Informa	nt's Partic	ulars			
Name of Informant: CHAN YI JIE BENJAMIN			Address: APT BLK 335 SERANGOON SINGAPORE 550335	AVENUE 3 #05-323	
ID Type / ID No.: NRIC NO / S8337503E		03E	Contact No.: Home/Office:	Mobile: 90727121	
National SINGAP	ity: ORE CITIZ	EN	Email: bencyj.bc@gmail.com		
Sex: Age: Date of Birth: 15/11/1983			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Hawker/Stall holder (prepared food or		(prepared food or	Driving Licence Information: Class:	Date of Expiry:	

General Infor	mation of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/07/2020 18:00	Type of Location Straight Road	
Veather:	NG ROAD	Road Surface:		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control: Not Controlled		50 Km/h Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Dire				Anyone conveyed by ambulance:	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
FBB6109Y	Motorcycle					0
SJJ3824Z	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20200719/7010

CONTINUATION OF REPORT

Driver					Acres 1	
Name	CHAN YI JIE BENJ	AMIN		ID No		S8337503E
Related Vehicle	SJJ3824Z (Car)		Conta	ct No.	90727121	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	=	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of			

Brief Details.

On the stated date and time, I was driving my vehicle SJJ3824Z along slip road into TPE(PIE) from CTE(SLE). I was on the second lane from the left and wanted to filter left to go into Sengkang West Road exit. I checked my left side mirror and blind spot before I proceeded to move gradually to the extreme left lane. Suddenly, a Vehicle FBB6109Y appeared on my side at high speed and collided into the rear left portion of my vehicle, causing damages to my vehicle. Thereafter, the rider of FBB6109Y was conveyed via ambulance to the hospital for his injuries.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20200719/7010

CONTINUATION OF REPORT

Sketch	Plan
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Authentication Stamp

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.			
Signature Of Interpreter: Not applicable	Date/Time: 19/07/2020 16:20			
Officer In Charge Of Case; TP / TPHQ / MOHAMMED FEROZ BIN HUSSIEN Contact No.: 65476206	Classification Of Case:			

	Date of Accident	: 18 07 2020 Accident Time: 1800 (24-HR-Format)				
	Accident Place	: Slip Road to Sengkang West Road from CTE (
	Vehicle Reg. No. (Car Plate No.)	: SJJ3824Z				
	Vehicle Make/Model	: Toyota / Axio				
	Insurance Company	: NTUC Policy No. 511613150+				
	Owner or Company Name /IC No.	: Car Choice SG / 533197375				
	Owner or Company Contact No.	: 94833 Owner's HpCompany Tel				
	DRIVER'S Name / IC No.	: Chan Yi Jie Benjamin / 583375036				
	DRIVER'S Date Of Birth	: 15/11/1983 DRIVER'S License Pass Date				
	Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: Heec				
	DRIVER'S Address	: Blk 335 Serangoon Ave. 3 #05-323 5(550335)				
	DRIVER'S Contact No./ Alt No.	:1) 9072 7121 2)				
	DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)				
	Email Address	:				
	Weather & Road Surface	CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET				
	Reporting Type	Reporting Only Claim Other Party \ Claim Own Insurance				
	Number of Passengers (Including Driver):					
	Was there any video Captured by car camera: YES \NO Exact purpose for which vehicle was being used at the time of accident Private use \ Work purpose					
	Other Party Driver's Particular (if any)					
	Vehicle Reg. No: FBB6109	Vehicle Reg. No:				
	Vehicle Make\Model:	Vehicle Make\Model:				
Name Driver:		Name Driver:				
	IC No. Driver:	IC No. Driver:				
	Driver's Contact & Add:	Driver's Contact & Add:				



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5116131504

Cover : Third Party

1. Index mark and Registration Number of Vehicle

: SJJ3824Z

Chassis Number

: NZE1416096944

2. Name of Policyholder

: CAR CHOICE SG

3. Effective Date of Insurance

4. Expiry Date of Insurance

: 13 Feb 2020

: 09 Mar 2021

5. Persons 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.

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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A	-
EXCESS (SECTION 2)	: S\$1,500	
ADDITIONAL EXCESS	: N/A	
UNNAMED DRIVER EXCESS	: N/A	
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO	
INSURE WITH COE	: N/A	
NCD PROTECTION	: NO	
PRIMARY DRIVER	: N/A	
NAMED DRIVER (1)	: N/A	
NAMED DRIVER (2)	: N/A	
HIRE PURCHASE COMPANY	: N/A	
SUM INSURED	: N/A	

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

: I INSURANCE AGENCY (00000572538)

Date of Issue

: 13 Feb 2020 15:23 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive



CAR CHOICE SG

3 Ang Mo Kio St 62 #01-12 Link @ AMK Singapore 569139 HP: 8838 8111

Email: info@carchoicesg.com

						and the same of th			
NAME:	Clu	an V: 590	Benjamin				NRIC:	58332	1503E
CONTACT:	-	90727121	37/37/38/39/19/19/19/19/19/19/19/19/19/19/19/19/19						IDENCE)
ADDRESS:	BIK	355 Sevana	" 307 TE278					50335	
hereby declar	e that I	will take over this stated	vehicle for the state	d perio	od and shall abid	e to the terms and	d condition	s as listed below	
Vehicle Registra		Model	Colour		From	Time		Till .	Time
557389	142	Toyota Axio		04	03 2020	1430	50	03 2021	1430

- 1. The above vehicle is insured for use on Singapore roads only. As such using of this vehicle outside Singapore territory is strictly prohibited. Whilst the vehicle is in your possession and is driven in or outside of Singapore if applicable, you will be held fully responsible for any, but not limited to, vehicular accident, damages, loss, fire or theft caused to this vehicle.
- 2. The use of this vehicle during the period from the date of taking over until the termination date of this agreement will be under the full responsibility of the driver.
- 3. Only the driver above named/authorized may use the vehicle. In any circumstances another driver apart from the named/authorized driver found using the vehicle, the owner will have the right to repossess the vehicle stated above and the driver will be held fully responsible for any, but not limited to, vehicular accident, damages, loss, fire or theft caused to this vehicle.
- 4. Should the vehicle be involve in any traffic offence during the period, you agreed to be liable for any issues with the vehicle that arise while under your care and agree to pay all fines and any other amount government or semi-government authorities shall levy or impose.
- 5. Upon claiming the vehicle's insurance which the driver stated above shall be liable to pay an excess of \$ 5,000/- Nett to the owner.
- 6. The driver need to return vehicle's fuel at the same level when he/she collect at the level of __% otherwise, an payment of \$ 15.00/-Nett will be charge to the driver for every 10% of fuel used.
- 7.At any point of time if the vehicle Breaksdown due to flat battery, tire puncture, empty petrol tank loss of keys, keys locked in car or any other breakdown not due to vehicle maintainence or wear and tear a nominal fee of \$\$50/-shall be collected not including cost of repair
- 8. The maintenance of the vehicle will be borne by the owner. Driver must keep note of vehicle engine temperture, any overheating due to Driver's negligence, repair and any mise cost shall be bourned by the Driver. If there is any problem due to wear and tear or vehicle breakdown, the driver is to report to the owner immediately and seek for advise/permission before proceeding to fix the issue.
- 9.If the vehicle stated meet with an accident,the driver is to inform the owner immediately. No repairs are to be done without the owner's approval. If the driver is caught repairing the vehicle at any workshop unanthorized by the owner reserve the right to repossess the vehicle with a \$\$3000/-compensation.
- 10. Any damage which includes physical damage or any other general damages to the vehicle, payment of repair cost has to be made immediately unless any other alternative arrangements is made.
- 11. Vehicle are handed over clean and it should be returned clean, if vehicle is returned dirty a nominal charge of \$ 10/- shall be immediately unless any other alternative arrangements is made.
- 12. Car Choice Pte Ltd will not be responsible for loss of or damage to personal belongings and the contents therein (including any valuables, even if we have been advised) during storage or during the disposal process however caused and you hereby release car choice Pte Ltd from any liability in respect thereof.
- 13. You are liable for any damage howsoever caused to the rented vehicle or to the Owner caused by you or any persons in your party (whether or not driving the vehicle) during your rented period. Car Choice Pte Ltd reserves the right to retain your credit card and/or debit card details and charge or debit such amounts as it shall in its sole discretion deem fit on the said card(s) to compensate or make good the loss, damage, costs or expenses incurred or suffered as a result thereof. Car Chioce Pte Ltd. further reserves the right to commence legal proceedings against you without notice.
- 14.No speeding, Reckless Driving. Racing or Any Illegal Activities shall be barried out during the use of this vehicle. The owner reserve the right to repossess the vehicle with a additional \$\$1500.00/- compensation and any other cost inccurred (if any).
- 15...Should there be any breaches to any of the above clauses, the owner reserves the right to repossess the vehicle without any refund with a compensation of \$\$2000.00/- imposed.

Agreed & acknowledged the above stated by: Recipient of the vehicle (Driver	
Signature: Mar	Nric 58339 503 E
I have read and fully understood the content of this agree	ement. I will not dispute to the claims made against me for may incident occuring

during the stated period and thus this agreement.

7/20/2020 Claim Handling(accident reporting Claim Task 001 OD-MX) Claim Handling Accident MT/1097380 Policy No. 5116131504 Vehicle No. 53136242 GST Registration No. Certificate No. Policyholder Name CAR CHOICE SG Product Code Cover Type Third Parts Contact No.(Mobile) Contact No.(Office) Contact No.(Home) Empii Address Special Remark KFK No Yes TCA No Yes eCode Reason NCD Entitlement(%) NCD Protection Private Hire No: Accident Details Report Date Accident Report Within 24 hrs Accident Type Date of Accident 18/07/2020 Time of Accident hh:mm Country of Accident Singapore Reporting Centre Orange Force ICM No. Accident Location SUP RD TO SENGKANG WEST RD FROM CTE(SLE) Total Excess Applicable Excess Type Windscreen Excess OD Standard Excess TP Standard Excess YIED OD Excess YIED TP Excess Driver is Covered? 0.00 Additional Excess Total OD Excess Applicable Total TP Excess Applicable **Benefits** GST Registered Information GST Registered GST Registration Date GST Registration No. GST Status Verified Modification History Policyholder Mailing Address Address 1 3 ANG MG KID STREET 62 Address 2 #01-12 LINKIBANK Address 4 Address Type Singapore address Post Code 509139 Unit No. Related Policy Number 9116735413 OI Driver Info Oriver Name Unnamed Driver Driver Type Unnamed Oriver Unnamed driver Name CHAN YELDE BENJAMINGZENG Y Driver NRIC 58337503E Driver DOB 15/11/798 Register Date of Driver License Driver Age 26 Driving Experience Contact No.(Mobile) 90727121 Contact No.(Office) Contact No.(Home) Address 1 BCK 335 Address 2 SERANGOON AVENUE 3 Address 3 SINGAPOR Address 4 Address Type Singapore address 550335 Unit No. ×05-323 Does he own a Singapore Registered car? Yes No Driver Vehicle No. Driver Insurer Company Declaration Breathalyser or Blood Test Reading? Any injury? Yes No Modification History Claim 001 OD-MX New Insured Name Claim Type * OD-MX CAR CHOICE SG Contact No. (Home) Contact No.(Mobile) Email Address SJJ3824Z Claim Description S333824Z / FBB6109Y ON 18 Jul 2020 Preference Preferred Workshop, Nam Option Preferred Workshop Bonwet No. Yes Finalisation Yes GIA Received Preferred Workshop, Name unknown Date Registered 20/07/2020 17:15 ROSLINDA Print AK letter Save Submit Attachment

MT/1097360 001 Last Doc. Received 20/07/2020 01:00 ■ Yes ○ No. Path . Urgency * v NO Choose File No file chosen Choose File No file chosen Clear Please Select v NO v NO Choose File No file chosen Clear Please Select

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