SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 1. 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.
- 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

| | ACCIDENT STATEMENT |
|--|--|
| Date Of Report | 11/08/2020 11:54 |
| Date Of Accident | 09/08/2020 15:40 |
| Exact Location Of Accident | BLK 254 JURONG EAST STREET 24 OPEN CARPARK LOT 126 |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | GBE7857Z |
| Insured/Policyholder | |
| Name Of Registered Owner | NEW TASTE PTE LTD |
| Co Reg No | 201431298Z |
| Email Address | YONG89320@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-98596358 |
| Alternative Phone No | Office-68485233 |
| Vehicle Particulars | |
| Manufacturer | CITROEN |
| Model | BERLINGO L2-1.6 D BLUEHDI S&S ETG6 (M) |
| Exact Purpose for which vehicle was being used at time of accident | PARKED |
| 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 | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 2100458952-04 |
| Cover Note Number | |
| Driver | |
| Name of Driver | CAO YONG |
| NRIC No | S8973822I |
| Date Of Birth | 20/03/1989 |
| | |
| Occupation | INDOOR |

07/06/2010

10 YEARS AND 2 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-98596358

Fax Number

Contact Number HOME-62053778

EMail Address YONG89320@HOTMAIL.COM

BLK 56 TEBAN GARDENS ROAD Address

#31-465 SINGAPORE

Postcode 600056 YES

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident **COLLIDED INTO PARKED VEHICLE**

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name JURONG WEST NEIGHBOURHOOD POLICE CENTRE

ROAD: 700 CORPORATION ROAD, POSTCODE: 649818, COUNTRY:

Police Station Address **SINGAPORE**

Police Station Contact TEL NO: 1800-2689999 - FAX NO: 62672438

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

I WAS INSIDE MY VEHICLE HAVING MY LUNCH, MY VEHICLE WAS STATIONARY. SUDDENLY I FELT AN IMPACT AND REALISED TAXI SHB5322H GRAZE INTO MY LEFT HAND FRONT 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

SHB5322H

Vehicle Make/Model/Colour Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TOYOTA PRIUS

TAXI

CHIN SYN FAH JOSEPH

S1251780G

Sketch Plan

SKETCH PLAN

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.
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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 aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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)
 - 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:
 - 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

11 08 29

(ii) for complying with requirements under any regulations, laws or court orders.

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

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

| | A G8E 1857Z |
|---|---|
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| | R - SHB 5322H |
| 64 126 17 8 | B 3/10 352-11 |
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| RIBE CIRCUMSTANCES OF THE ACCIDENT | |
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| tationary, Suddenly I felt an | I FINT impact and realised |
| | |
| ar' fill flight flight the | My 100, b. 1 Charl DAVE! |
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| axi SHB\$\frac{1}{2}H\$ graze. into | my ceft hand stront portion |
| axi SHB\$1224 graze. into | my Ceft hand stront portion |

olicyholder's Signature

Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

GIARMC Stephin Form V3



CERTIFICATE OF INSURANCE

CITROEN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder : New Taste Pte Ltd

Vehicle No. : GBE7857Z

Period of Insurance

: 29 Mar 2020 To 28 Mar 2021

Policy No.

: 2100458952-04

Engine No. Chassis No.

: 10JBFR0023416 : VF77F9HF8FJ877625

Endorsement No. Issued Date

: 25 Mar 2020

ABOUT THE COVER

Make/Model

: CITROEN BERLINGO LWB 1.6L (ETG)

Engine Capacity/Tonnage : 0.8 Tonnage Driver Restriction

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2016 Insuring with COE/PARF : Yes

: NA Person or Classes of Persons Entitled to Drive*:

a) Any person who is diffing on the Policyholder's order or with their permission.
 b) This Policy will indemnify the Policyholder or any authorised driver only if heliane 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 2 years' driving experience.

Age Condition

: All Age Condition

Limitation as to use* :

1) Use in connection with the Policyholder's business.
2) Use for the carriage of passenger (other than for history review) in connection with the Policyholder's business.
3) Use for social, demestion or plassaure purposes. This Policy does not cover a) use for hire or reward, driving test, racing, pass-making, reliability trial or speed-testing; and b) use whilst drawing at twister eccept the towing of anyone disabled using a machanically propelled whilder, c) use for any purpose in connection with Notor Trade.

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 25 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

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

1.Cycle & Carriage Authorised Service Centre (For accident reporting & mindscreen claim only). Add: 20 Leng Kee Rd Singapore 159056 64706000 2.Cycle & Carriage Authorised Service Centre (For accident reporting & mindscreen claim only). Add: 330 Util Rd 3 Singapore 408850 67461000 3.Cycle & Carriage Body & Paint Centre. Add: 209 Pandan Gordens Singapore 508339 66664501

For other Approved Reporting Centres/NG Authorised Repairers, please contact our 24-hour accident emergency holline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.ag or AIG SG Mobile App. Smithy search and download "AIG SG" from Illures or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: United Overseas Bank Limited

IAW hereby certify that the policy to which this Certificate of Insurance relates is tested in accordance with the provisions of the Motor Verticion (Third Party Risks and Compensation) Act (Cap. 189), Part M of the Road Transport Act, 1987 (Malaysia).

0500870050

CYCLE & CARRIAGE FULCO

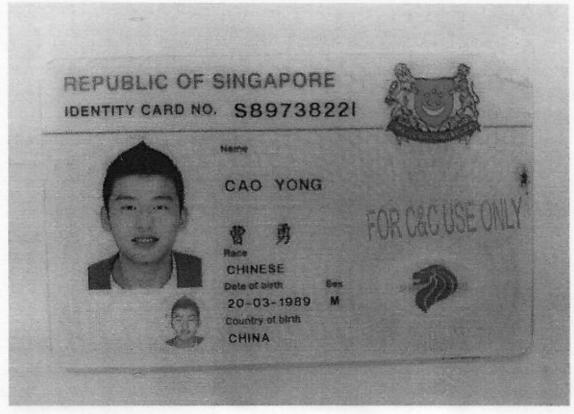
22 UBI ROAD 4 FULCO BUILDING

SINGAPORE 408617 ANSP-MOTOR Underwritten by AIG Asia Pacific Insurance Pte. Ltd. AIG Asia Pacific insurance Pte. Ltd.

This computer generated document does not require a signature.

AUSSCHOOL DAPP





Driving License

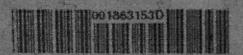




Como Number 589/36221

CAO YONG

Birt Date 20 Mar 1989 hate time 07 Jun 2010



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

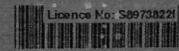
EFFECTIVE DATE

Class 3

Class 4

Motor Cars=< 3000kg with =<7 passengers, exclusive 07 Jun 2010 of the driver; and other motor vehicles =< 2500kg
*Motor vehicles which are constructed to carry 07 Jun 2010 load or passengers and the unladen weight > 2500kg
*Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

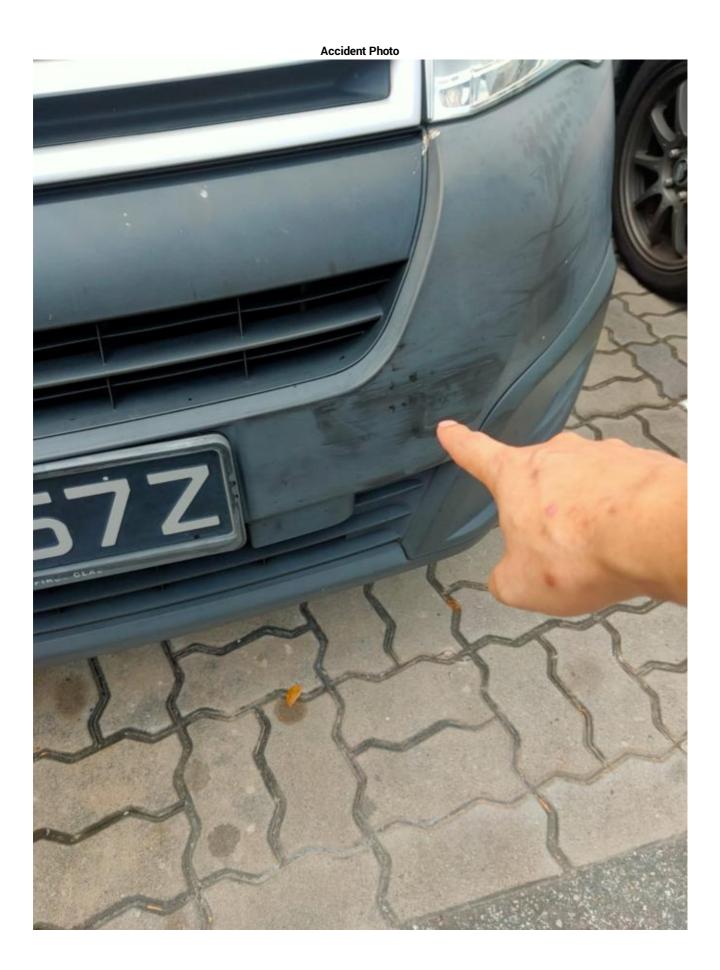
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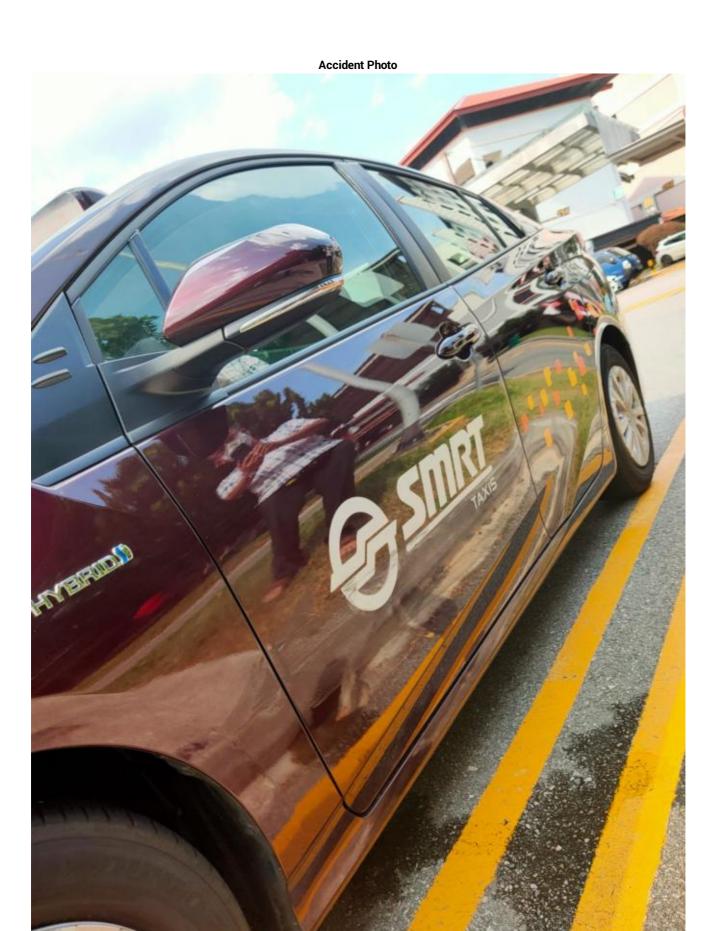


NP 428A





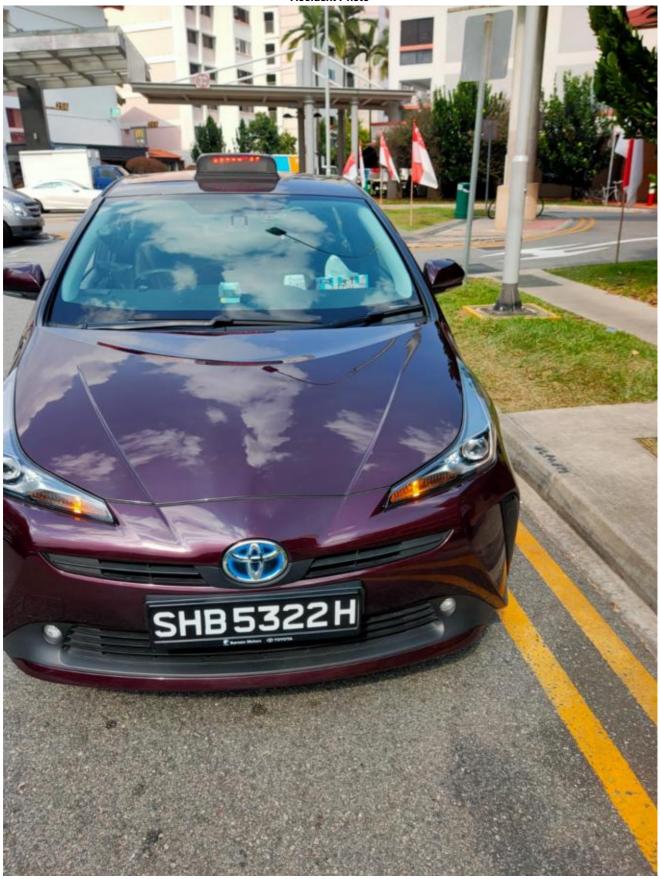


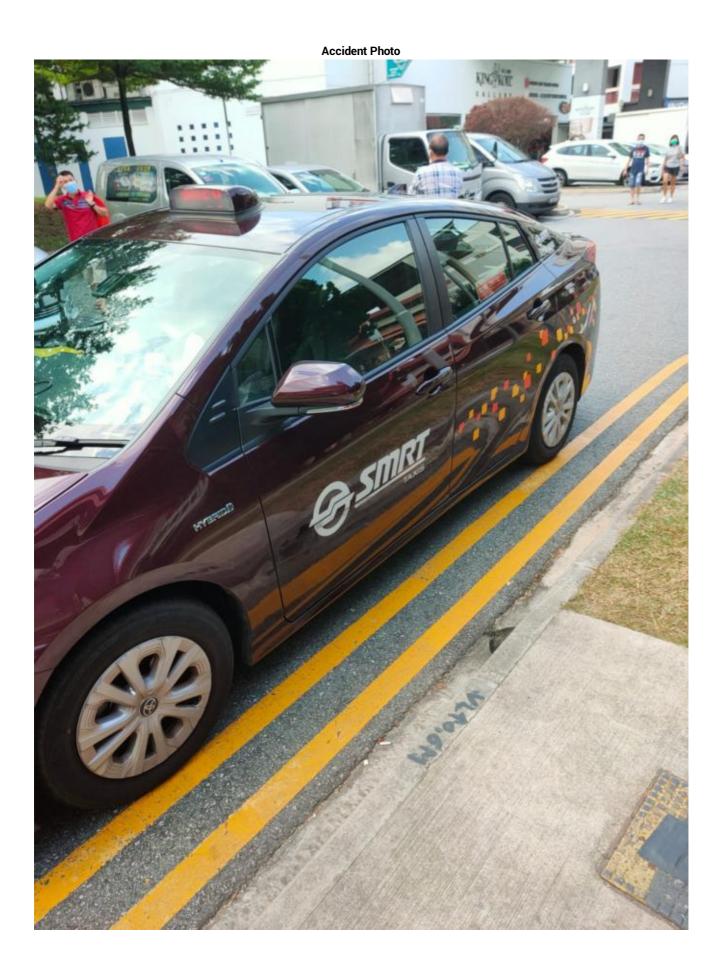




























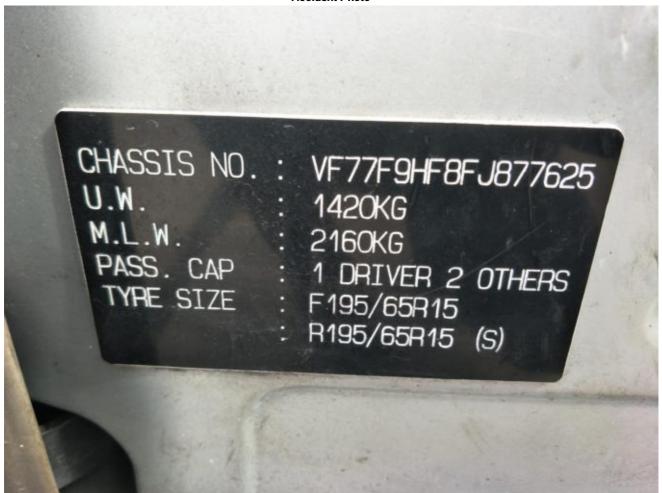












Annex D

Jurong West NPC 700 Corporation Road Singapore 649818 Tel: 62689999 Fax: 62672438



Traffic Police Department Charge Office 10 Ubi Avenue 3 Singapore 408865 Tel: 65470000

Traffic Police Annex D

NOTICE OF REPORTING

Informant Name

: Cao Yong : S8973822I

Identity Card No Sex / Age / Race

: Male/31yrs/Chinese

Address

: Apt Blk 56 Teban Gardens Road #31-465

Occupation Telephone No : Van Driver : 98596358

This is to confirm that the above informant, has reported to the Police a non-injury traffic accident which occurred at Carpark of Blk 254 Jurong East Steet 24 on 9/8/2020 at 1540hrs involving the following vehicles: GBE7857Z and SHB5322H.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

| Issuing Officer | : | Sgt Nuraqilah | |
|------------------|---|--------------------|--|
| Date / Time | : | 09/08/2020@2330hrs | |
| Station Diary No | : | 106 | |
| Police Post | : | Jurong West NPC | |

| Signature of Informant | : | 4: |
|------------------------------|---|----|
| , | | |
| Signature of Issuing Officer | : | DL |