THE PARTY OF THE P	ervices. portionis,	MURUDENHE	TV.
	leb description	Date & Timo Completed	Dons by
1101 HO: XIBA (17200) 0027/Y	SAS e-Illing		
Veh Nor CABE 68921	U-malf(bjole sur, Alexius)	-i	· .
001 19109 mb 04.4	1-Motor Claim Form	-	
W COLD	I-Motor W/O (Withter OD 21)	es, TP (brs)	any and any any
OD (IP) Reporting Only	I-Photo Uploaded	1	
973.1	Assessment/Survey Report		
TP Insurer:	Ass't Report by Pax / Hand	to Owner/Whan	
Protocrod Wisep / INC Assign Wisep / QW: (CONTRACTOR OF STREET	Part
Tr Engleding . Veh No. Vo	2101X MC	.)/Non-INC().	View No.
Owner / Driver: (102/1	Tel:	<u> </u>
Policy No: () Period:	:(Cover Type: (.).
Confirmed by ; (· Dater	Timer)
Insured/Driver Liability: (%) [Note		20%; P: 21-79%. P: 80-	100%]
	ranty: YES ()/NO ()	
13x0css: (\$ ') Londing: \$1,000 (
Saudial Malifold Color of the C	WHO SHARE SALES AND AND THE WARREST CONTROL OF THE	范型型的现在分类。 第125章	NOTE COMMENT
() Walle-In Customer : Customors Informal	the second of	P100-110-110-110-110-110-110-110-110-110	
() Total Lass Case : to c-mail Insurer V.		Siddy (15 tolor of topolion	
Drive-in ()/Towed-in (); Invoice: VI		Towing Co: (·
Deposition of the Control of the Con	ture one reconstruction and the two sections in	THE CO. C. ST. ST. ST. ST. ST. ST. ST. ST. ST. ST	NAME OF THE PERSON OF THE PERS
		们到UMBEDITIONS UPPOSED	SPECIONAL
) Apply for Transport Allowance ()/ Court	asy Car ()		
	සා		•
2) QC Check / Post Repair Inspection	(·)		· / ;
2) QC Check / Post Report Inspection 3) Upload Resurvey Photo (Repuir Cost > \$3000)	(·)		· · · · · · · · · · · · · · · · · · ·
1) QC Chook / Post Repair Inspection	(·)		· · · · · · · · · · · · · · · · · · ·
2) QC Cheek/Post Repair Inspection 3) Upload Resurvey Photo (Repair Cost> \$3000) Injury:	(·)		Mismanu.
(A) QC Cheek/Post Repair Inspection (A) Upload Resurvey Photo (Repair Cost > \$3000) (Injury:	(·)		September 1
t) QC Check / Post Repair Inspection Upload Resurvey Photo (Repair Cost > \$3000) Injury:	(·)		Social State of the State of th
() QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > \$3000] Injury:	(·)		
) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$3000) Injury:	(·)		Social Control
() QC Check / Post Repair Inspection) Upload Resurvey Photo [Repair Cost > \$3000] Injury:	(·)		
) QC Check / Post Repair Inspection) Upload Resurvey Photo (Repair Cost > \$3000) Injury:	(·)		
OC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$3000] Unjury :		Tupordug (530)	
A 2004 984	I) Alt Assident 3) DAI Fowler The Fowler Board	Impordut (2100); INC(1)	
A 2004 984	(·) () () () () () () () () () (
A 2004 984 Ver/Owner:	(·) () () () () () () () () () (Itelast) FIG Only (Ascilo Jan Film) Pool by Sorvey (\$100) Itelastic Street Itelas	Control of State of S
A 2004 984 Ver/Owner: The transfer of the content	1) Alti Assicat 2) DA Danyy 3) Tri Towing I 4) VI Vollow-I 5) YI I Vollow-I 7 Yor wind India 6) Tit I U-langu	Silvent State of Stat	200 (100 (100 (100 (100 (100 (100 (100 (
A 2004 984 Ver/Owner:	(·) () () () () () () () () () (Topording (330)8 Americant (3100); the (100); the (100)	Control of State Contro
A 2007 987 Training language proteins Ver/Owner: Training Portion:	1) Alt; Ansident 2) DA; Denwye 3) TV; Fowler 4; VVT; Vollou-T 3) VT; Palissen 7; NI; Iday DA; V) NI; VC Additional Control of the control of	(10) (15) (15) (15) (15) (15) (15) (15) (15	0000 1000 1000 1000 1000 1000 1000 100
A 2007 987 Ver/Owner: The transfer of the content	1) All, Assistant Strain Fred Land Strai	Car/TplAllowenue	0) (100 (100 (100 (100 (100 (100 (100 (1
A 2004 994 The content of the conte	(·) () () () () () () ()	Importing (\$100); INC(III) Importing (\$100); INC(III) Importing (\$100); INC(III) Importing (\$100); INC(IIII) Importing (\$100); INC(IIIII) Importing (\$100); INC(IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	200 (200 (200 (200 (200 (200 (200 (200
A 2004 984 A 2004 984 In finite and a second process of the seco	1) All I Academy of the Control of t	Importing (5100); INC(11) Importing (5100);	100 100 100 100 100 100 100 100 100 100
A 2004 984 A 2004 984 In finite and a second process of the seco	1) All I Academy of the Control of t	Importing (530); Importing (530); Importing (5100); Importing (510	100 255 255 255 255 255 255 255 255 255 2

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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.
- 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	21/09/2020 14:25		
Date Of Accident	19/09/2020 04:40		
Exact Location Of Accident	BLK 79 REDHILL LANE MARKET PARKING LOT		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	GBF6893U		

The second secon	
Insured/Policyholder	
Name Of Registered Owner	HONG SOON FISHERY PTE LTD
Co. Description	The state of the s

Co Reg No 2XXXXXX63-M Email Address NOEMAIL

Mobile Phone No. (LOCAL) +65-97593168 Alternative Phone No. OFFICE-97593168

Vehicle Particulars

Manufacturer TOYOTA Model DYNA

Exact Purpose for which vehicle was being used at LORRY WAS PARKED time of accident

Are you claiming under your own insurance policy

for repair to your vehicle? If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

NO

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMCVSNA00007442001

Cover Note Number

Driver

Name of Driver WANG XINCHENG Passport No/FIN GXXXX270W Date Of Birth 29/10/1987 Occupation OUTDOOR Date Of Driving Pass 12/11/2014

Driving Experience 5 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97593168

Fax Number

Contact Number OTHERS-97593168

EMail Address NOEMAIL Address Postcode Was driver an employee of the Insured's Company YES 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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Weather Conditions

2

0

NO

YP2102X

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

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 ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

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)

COMMERCIAL VEHICLE

YEU MENG KOK

SXXXX045C

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

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:
 - 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:

SHER

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

		AND STATE OF THE		
	000	taches		
	Kes		102	
	1	Au. how		
	A	Julie		
1				

DECLARATION

Date & Time:

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

2

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

NRIC/FIN No.:

RE: ACCIDENT INVOLVING GBF6893U & YP2102X ALONG BLK 79 RED HILL LANE MARKET PARKING LOT AT 19 SEP 2020 / 0440HRS

MY VEHICLE, GBF6893U (VEHICLE A) WAS PARKED AT THE PARKING LOT OF RED HILL LANE MARKET WHEN YEU MENG KOK OF NRIC S1168045C (HP: 96477736) DRIVING VEHICLE B (YP2102X) TRIED TO REVERSE INTO THE LOT BESIDES ME AND HIT INTO MY VEHICLE DURING HIS SECOND ATTEMPT TO REVERSE IN. THE INCIDENT WAS CAPTURED BY CCTV AND WE HAVE GOTTEN ADMISSION OF LIABILITY ALONG WITH HIS PARTICULARS.

The above statement is accurate and true to the best of my knowledge.

201207463M





GBF6893U

YP2102X



LOADING/UNLOADING BAY

0) GBF 6893 W.

an/ siles/xx

B) YP 2102X

Regards,

FOR HONG SOON FISHERY PTE LTD DRIVEN BY: WANG XINCHENG

LICENSE NUMBER: G2462270W

ACCIDENT STATEMENT

ACCIDENT DATE: 19 09 20 (DD/MM/YYY), TIME: (04:40) (HHMM).

LOCATION: BIK 79 RED HILL LANE MARKET PARKING LOT

1. DETAILS OF VEHICLE alvehicle Number: G8P 686	134
DINSURANCE COMPANY: CHIL	
CIPOLICY NUMBER: DMCVS	NA0000 7892001
d)POLICY TYPE: (COMPREHENSIVE /	THIRD PARTY / THIRD PARTY FIRE &THEFT
OMAKE & MODEL: 1010 1A	VINI
TITYPE: (SALOON / COUPE / MPV /VA	AN ALORRY MOTORCYCLE / OTHERS)
9) VEHICLE CATEGORY: (PRIVATE / C	OMMERCIAL / MOTORCYCLEI
INJPURPOSE OF USING AT ACCIDENT	TIME: COMMERCIAL
IJARE YOU CLAIMING UNDER YOUR	DWN INSURANCE (YES MO)
IF NO. PLEASE STATE (THIRD PARTY O	LAIM TREPORTING ONLY)
2. INSURED / POLICY HOLDER ANAME: HONG SOON F.1	
bjnric/fin/passport: 20120146	Contract Contract
c) ADDRESS:	CONTACT:
- CANDERCOS	
* CONTINUE TO 3.d IF DRIVER ALSO PO	OLICY HOLDER
Ho of passanges. DRIVER	ODCI NOLDER
(Including driver) DINAME: HONG WANG XING	CHENG (MALE LEEMALE)
(0) b)NRIC/FIN/PASSPORT: G2462	
c)ADDRESS:	
	de la companya de la
*d)DATE OF BIRTH:	(DD/MM/YYYY)
e)OCCUPATION: (INDOOR / OUTDOO	OR)
FIDATE OF DRIVING PASS	
4. WAS DRIVER AN EMPLOYEE OF THE IF NO, RELATIONSHIP OF THE DRIV	ED WITH INCURED CMPANY? (YES INO)
5. a) WEATHER CONDITION; (CLEAR / RAI	NING POTHERS PARKED
DIROAD SURFACE: (DRY / WET / OTHER	25
6. WAS ANYBODY INJURED (YES / NO)	
7. a) REPORTED TO POUCE (YES (NO)	
IF YES, PLEASE STATE WHICH POLICES	TATION: N. 77
to of passenger a) VEHICLE NUMBER: YP2102	<u> </u>
HTT HTT HEAT TO THE TO THE SHEET STANDENHALL HEAT HEAT HEAT HEAT HEAT HEAT HEAT HEAT	MODEL:
Including driver) b) DRIVER'S NAME: () C) NRIC/FIN/PASSPORT:	
9. THIRD PARTY VEHICLE	CONTACT:
	MODEL:
of PRSTANGE BIVER'S NAME	MODEL .
Including driver f NRIC/FIN/PASSPORT:	CONTACT::
~	

email = info@weng fatt. sq.









中国太平保险 (新加坡) 有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

SN

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)

ANDSS5A

Cov. Type:C

CERTIFICATE No.

DMCVSNA00007442001

Engine No.: 1KD2868343

Cha. No.:JTFAT35Y70K207234

1. Index Mark and Registration

Number of Vahicle

GBF8893U

2. Name of Policy Holder

HONG SOON FISHERY PTE. LTD.

Effective data of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

17/02/2020

Excess Sect 1.

\$\$500.00

EX ON WINDSCREEN .

Date of Expiry of Insurance

16/02/2021

Persons or Classes of Persons entitled to drive* Any person who is driving on the Policyholder's order or with 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

6. Limitations as to use:*

(1) Use in connection with the Policyholder's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
(3) Use for social, domestic or pleasure purposes.

The Policy does not cover

Use for hire or reward or racing, pace-making, reliability trial or speed testing.
 Use whitst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: HL BANK AS HP OWNER

* 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

ACER INSURANCE AGENCY

21 Woodlands Close

Ho Li Hwa Irene #08-44 Primz Bizhub **Authorised Officer**

Singapore 737854

Tel: 6777 8323 Fax: 6776 8323

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 着3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

6222 1033

www.sg.cntaiping.com