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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.
- 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.

aforesaid.	o hereby consent to the archiving of this report at the centre and to copies of the report being made available
计算的过去式和过去分词	ACCIDENT STATEMENT
Date Of Report	23/11/2020 12:18
Date Of Accident	19/11/2020 08:50
Exact Location Of Accident	FROM JURONG WEST TOWARDS LAKESIDE
Country/State of Loss	SINGAPORE
MARKET STATE OF THE STATE OF TH	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLQ4108R
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	AIRJUN23@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91755070
Alternative Phone No	OFFICE-91755070

Vehicle Particulars

Manufacturer

TOYOTA

Model

COROLLA ALTIS-1,6 (A)

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

THIRD PARTY

Vehicle Category

PRIVATE HIRE

Insurance Company

Name of Insurance Company

TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage

COMPREHENSIVE

Fleet Policy

YES

Policy Number

20-ML000257-R00

Cover Note Number

Driver

 Name of Driver
 AGARWAL ARJUN

 Passport No/FIN
 GXXXX178Q

 Date Of Birth
 01/09/1982

Occupation INDOOR
Date Of Driving Pass 05/04/2019

Driving Experience 1 YEAR AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91755070

Fax Number

Contact Number OTHERS-91755070

EMail Address AIRJUN23@GMAIL.COM

Address

BLK 52A LAKESIDE DRIVE

#05-11 CASPIAN

Postcode

648316

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

7

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

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

NO

ambulance?
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

PLEASE REFER TO SKETCH PLAN

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

SLD6341M

Vehicle Make/Model/Colour

HONDA

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

LIANG LAI SAN ANTHONY(LIAN LAISHUANG ANTHONY)

NRIC/Passport Number

SXXXX853B

Contact Number

Address

muutuss

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2 This Term must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow assurance companies to repudiate policy liability.
- 4. The visue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies
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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 Smeapons (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the longment 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.
- Consent under the Personal Data Protection Act (PDPA) in dentand, acknowledge, agree and consent that:
 - In this resures, not 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 (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident that he collectively referred to as the "Insurers"), the insurers (awyers/law firms, the Monetary Authority of Singapore and any relevant government agency, actively (such as the police), for the purpose(s) of
 - screening, familing and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims.
 - (ii) illvestigating the accident and/or my claims;
 - hill 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 cartain personal data about me to bring about delivery of the same as well as on the external cover of enveloping/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, now, 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 provides in entitle or furing their lawyers/fow firms), which may be sited outside of Singapore, for one or more of the above Purposes.
 - (ii) any Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and inanagement in present and all future claims.
 - (e) the informeson to collected under (d) above may be shared / dirclosed:
 - (ii) to all insurers and/or any other third parties that assist in estimating, investigating, controlling or inanaging feaut, regulators, law units centent and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

AM AWARED THAT MY INSURER MAY HAVE A <u>14 DAYS TIMMFRAME</u> FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY DWN POLICY I WILL CHECK MY POLICY FOR ANORE DETAILS.

The state of the s

Driver's Signature

(if allow is not the policyhelder).

Out & Time: November 19, 2020/ 6:16 PM

PERSONAL CHARTER PHYSICAL

Water

NOOC/FISH NA

SKETCH PLAN	5	Along Fulows WEST TOWARD LAKE SOK	-
Boortiny	-	> In 1 or British as a second processing to the	üde

B) SLQ 4108 R.

on seeing a a few pedestrians waiting to cross, i b	raked to avoid an	y inconvenie	ince to the pedestria	ns, however immediately as
my car almost came to a stop near the red light, a	blue Honds hit r	ne from behi	nd.	
ACCORDANCE OF THE PROPERTY OF	9-07	FILE		1
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NEW/AIN NO

Onyer's Signature

if driver is not the policyholder).

Date & Tarso November 19, 2020/ 6:16 PM

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DATE OF ACCIDENT		TIME OF ACCIDENT	8:50 AM		
COUNTRY/STATE OF LOSS	☐SINGAPORE ☐MALAYSIA (☐JOHOR ☐PAHANG ☐KELANTAN ☐ OTHERS) ☐THAILAND				
ACCIDENT LOCATION	at the pedestrian cresting red light on Boonlay Way between Jurong West and Lake				
VEHICLE NUMBER	SLQ4108R				
Company of the story		ON OF INSURED	·福山、李山山 ·		
NAME OF REGISTERED OWNER		42 (10)			
COMPANY ROC/NRIC OF OWNER					
EMAIL		* TELEPHONE / FAX			
VEHICLE MODEL /MAKE .		137710	6		
ARE YOU CLAIMING?	DOWN POLIC	Y THIRD PARTY DRECOR	D PURPOSE ONLY (IF CLAIR	М	
		OTHER WORKSHOP, PLS STATE WO			
	1		1		
INSURANCE COMPANY		TATE			
TYPE OF COVERAGE	COMPREHE	NSIVE THIRD PARTY FIRE	& THEFT THIRD PARTY		
POLICY NUMBER					
A STREET OF THE PARTY OF THE PA	INFORMATI	ON OF DRIVER	Mark School School	MES	
NAME OF DRIVER	A	RJUN AGARWAL			
NRIC OF DRIVER	G3427178	α			
DATE OF BIRTH	Septembe	er 1, 1982			
OCCUPATION .	☐ INDOOR ☐	OUTDOOR ()	
DATE OF DRIVING PASS		GENDER	MALE FEMALE		
MOBILE NUMBER	91785070	OFFICE NUMBER			
ADDRESS	Bik 52A, Lakeside Drive, 05-41 Caspian, Singapore 648316				
EMAIL ADDRESS	airjun23@gm	all.com			
RELATIONSHIP OF DRIVER WITH INSURED					
DO YOU OWN OTHER VEHICLE?	□YES □NO	VEH NO.?	INSU. CO?		
三、任命自己,至3.5%和加强联合的基础的	INFORMATIO	N OF ACCIDENT			
WEATHER CONDITIONS	☑CLEAR □R	AINING DOTHERS:	The state of the s	====	
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THE PERSON NEW AND ASSESSED.	OTHER IN	FORMATION	AND THE RESERVE		
ANYINJURY	☑NO □YES	INJURED CONVEYED BY AMBULANCE	□YES □ NO)	
ANY FOREIGN VEHICLE INVOLVED?	☑NO □YES	(FØREIGN VEHICLE NUMBE	R:)		
IS ACCIDENT CAPTURED BY VIDEO	□NO □ YES	(please provide link/video if	YES)		
ACCIDENT REPORT AT WHICH POLICE STATION? * ATTACH POLICE REPORT*	□NO □YES	WAS NOTICE OF INTENDED PROSECUTION GIVEN?			
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	□NO □YES *	NO OF VEHICLES INVOLVED IN 4°CIDENT	tor.		
NO. OF PASSENGERS IN CAR (INCLUDING DRIVER)	1	NAME / GENDER OF PASSENGE M D F. NAME / GENDER OF PASSENGE			
NAME / GENDER OF PASSENGERS:	DETAILS OF	DM DF	:03:	(OOMIN)	
AND DESCRIPTION OF THE PARTY OF	the latest designation of the latest designa	THIRD PARTY (1)	HOVIOC		
VEHICLE NUMBER	520 634	m	HONDO .		
NAME OF DRIVER				_	
NRIC OF DRIVER		*		_	
ADDRESS OF DRIVER	-				
CONTACT NUMBER		6	*		
OTHER INFO				Survey.	
" AT THE PERSON OF THE PERSON	DETAILS OF	THIRD PARTY (2)			
VEHICLE NUMBER	10	5	= -15		
NAME OF DRIVER					
NRIC OF DRIVER	-				
ADDRESS OF DRIVER					

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No: 192308014M) (GST Reg No: M2-6000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T (65) 6221 6111 F: (65) \$221 4355 / (65) 6224 0895 E. tmis@tokiomarine.com.s.j W. www.tokiomarine.com

Attriember of the Tot to tzarino Group



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)

Policy No.: 20-ML000257-R00 (Private Motor Car)

 Index Mark and Registration Number of Vehicle

SLQ4108R

Chassis No.: MR053REH104560574

2. Name of Policyholder

GOLDBELL CAR RENTAL PTE LTD

 Effective date of the Commencement of Insurance for the purposes of the Act

30/04/2020

4. Date of Expiry of Insurance

31/03/2021

5. Persons or Class of Persons entitled to drive -

Any person who is driving on the Policyholder's order or with the Policyholder's permission.

Provided that the Person driving is permitted in accordance with the ficensing 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been concelled at the time of the accident loss or damage.

6. Limitations as to use*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 1) Use for meing, pace-making, reliability trial or speca-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- 3) Use for the carriage of passengers for hire or reward by any person whom the vehicle is hired.
- 4) Use for hire of reward except for rental services by the Policyholder only.

and Section 95 of the Road Transpart Act, 1987 (Malaysia), are not to be included under these headings.

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

Please refer to the Policy Schedule for full details, terms and continous of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the instrance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a stautory declaration to that effect. Failure to comply with this daily is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 3092DDZ

Insurance Plan:

heft: Pres

Comprehensive Approved Workshop Plan

Limit for total loss or theft: Policy Excess:

Prevailing Market Value Excess - All Claims

Windscreen Excess

SGD 100

Tokio Marine Insurance Singapore Ltd.

Authorised Signature