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## SINGAPORE ACCIDENT STATEMENT

#### 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 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.
- 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.

| atoresaid.   |                                      |
|--|--------------------------------------|
| 用的性理。但是  | ACCIDENT STATEMENT                   |
| Date Of Report   | 24/11/2020 15:31                     |
| Date Of Accident   | 24/11/2020 07:45                     |
| Exact Location Of Accident   | ALONG JALAN BUROH                    |
| Country/State of Loss  | SINGAPORE                            |
| Design of the part | ETAILS OF OWN VEHICLE                |
| Vehicle Registration Number  | SJG9367C                             |
| Insured/Policyholder   |                                      |
| Name Of Registered Owner   | ASIA CARZ LEASING PTE LTD            |
| Co Reg No  | 2XXXXX152D                           |
| Email Address  | HUATARR@GMAIL.COM                    |
| Mobile Phone No  | (LOCAL) +65-97568280                 |
| Alternative Phone No   | OFFICE-97568280                      |
| Vehicle Particulars  |                                      |
| Manufacturer   | HONDA                                |
| Model  | FIT-1.3 G (A)                        |
| Exact Purpose for which vehicle was being used at time of accident   | WORKING PURPOSES                     |
| 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   | COMMERCIAL VEHICLE                   |
| Insurance Company  |                                      |
| Name of Insurance Company  | TOKIO MARINE INSURANCE SINGAPORE LTD |
| Type Of Coverage   | THIRD PARTY                          |
| Fleet Policy   | NO                                   |
| Policy Number  | 20-ML000531-R00                      |
| Cover Note Number  |                                      |
| Driver   |                                      |
| Name of Driver   | TAY KAH FATT                         |
| NRIC No  | SXXXX606E                            |

 Name of Driver
 TAY KAH FATT

 NRIC No
 SXXXX606E

 Date Of Birth
 30/03/1964

 Occupation
 OUTDOOR

 Date Of Driving Pass
 19/11/1993

Driving Experience 27 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97568280

Fax Number

Contact Number OTHERS\_07569390

Address

BLK 666A YISHUN AVENUE 4

#03-177

Postcode

761666

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

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)

2

involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

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)

2

Passenger 1

NAME:

: PASSANGER

GENDER:

: FEMALE

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?

YES

Remarks/ Reasons:

WITH OWNER

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

XE3950C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

WANG GUANGRONG

NRIC/Passport Number

GXXXX811R

Contact Number

Address

Postcode

Nature Of Damage

No. Of Passenger (Including Driver)

## 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.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding 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. 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.
- 7. 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 :
  - (i) 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/mall 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:

Co. Reg. No 2016061520

(If driver beat the policyholder)

Cate & Time:

Name:

NRIC/FIN No.:

| SKETCH PLAN                              | aloug                                   | JALAN                             | BUROH  |
|--|---|-----------------------------------|--|
|  |   |                                   |  |
|  |   | 44111                             |  |
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| On the ?                                 | 24 Jul 2000                             | around a                          | TYSHIS along JALAN BUROH,  |
|  | 311111111111111111111111111111111111111 | Chorney C                         | 143 W & WENG CHEN PARCH )  |
| I was driving                            | is on the                               | staded ro                         | pad and suddenly I felt or   |
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|  |   |                                   | INSURER:   |
|  |   |                                   | VEHICLE:   |
|  |   |                                   | DOA:   |
|  |   |                                   | CLAIM TYPE:  |
|  |   |                                   | WORKSHOP:  |
| DECLARATION                              |   |                                   |  |
| /Weahalfeathe foregoing                  | particulars are true in                 | every respect.                    |  |
| (S (Co. Reg. No.) 71                     |   | Que                               |  |
| SE SE MAR                                | · · · · · · · · · · · · · · · · · · ·   | Oll                               | 24/11/2020   |
| Policyholder's Signature<br>Date & Time: | Driver's Si<br>(If driver i             | ignature \ is not the policyholde | Reporting Centre Personnel's Signature   |
| WALNESS SERVER AND FORM, VS              | Date & Ti                               |                                   | NRIC/FIN No.: /COSA/ /// //  |

| ACCID  | ENT STATEMENT  |                             |                 | 10.00 70.00 20       |      |
|--|--|-----------------------------|-----------------|----------------------|------|
| Date of accident: 24111 2020   | Time:  | 0745 hrs                    | E25             |                      |      |
| cation of accident; JALAN BUICON   |  |                             | 7               |                      |      |
| Detail   | s of Own Vehicle   | Visit is the                |                 |                      |      |
| Vehicle Number: \$3619367C   |  | T/                          | Nake/Model:_    | HONDA AT             |      |
| Insurer: TOKIO MARINE  |  | Passenger                   | (incl. Driver): | D - I FEWI           | Mult |
| Policy No: 70-ML000531   |  |                             | Policy Type:    | C) TPFT/ TPO         |      |
| Policyholder   |  |                             |                 |                      |      |
| Name: ASIA CARZ LEAS   | ING PTE 170  | 1                           | NRIC/FIN no.:   | JOH 06 1521          | )    |
| Contact no.: 62624666  |  |                             |                 | 8:                   |      |
| Driver   |  |                             |                 | / 11 h 1/-/-         |      |
| Name: TAY KAH FATT.  |  |                             |                 | S1627606E            |      |
| Contact no.: 97568280  |  | i.                          |                 | 30-03-1964           |      |
| Email: huatarne gmail.com  |  | en<br>Re                    |                 | BEINHE HIKEB         |      |
| Address: BIK 666A YISHUN AUE   | 47103-177  | (761666)                    | )               |                      | 1    |
| Driving pass date: 20 04 2011  | Rela   | tionship with               | Policyholder:   | HIREC                |      |
| General Information  |  |                             | 0               |                      |      |
| Weather conditions: Clear/ Raining   |  | Road surface:               | -               |                      |      |
| Police report: Yes (No)  |  | Video Footage:              |                 |                      |      |
| Prosection Letter: Yes No  |  | gainst whom:                |                 |                      |      |
| Injuries: Yes/ No If Yes, pro-   | vide injuries detail   | 51+                         |                 | Conveyed to hospital |      |
| Name   |  | Veh No.                     | Seatbelt (Y/N)  | (AV.N)               |      |
|  |  |                             |                 |                      |      |
|  |  |                             |                 |                      |      |
|  |  | l                           |                 |                      |      |
| Det  | ails of Third part   | V.                          |                 |                      |      |
| Vehicle  | 8  |                             | Vehicle C       | -                    |      |
| Vehicle no.: XE 3950C  |  |                             |                 | 3                    |      |
| Driver name: WALLY GUING   | romu   |                             |                 | 10                   |      |
| NATC/ FIN no .: G8474811   | 2  |                             |                 |                      |      |
| Contact no:  |  |                             |                 |                      |      |
| Insurance Co:  | ii.  |                             |                 |                      |      |
| Remarks:   |  |                             |                 |                      |      |
| (Made/Modei, Passenger,<br>property Info & etc)  |  | -27                         |                 |                      |      |
| # \$45 表明言 \$2 \$1 \$2 \$2 \$4 (C) \$2 \$2 \$2   | etallot Wildess  |                             | <b>沙河东南</b>     |                      |      |
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| Name:  |  |                             |                 |                      |      |
| Contact no.:   |  |                             |                 |                      |      |
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| Claim Type: Own Damage/Third Party   | / Reporting Only   | drive                       | er Y            | -A-                  |      |
| Workshop:  |  | Signatur                    | er GIV          | 7                    |      |

## Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCellum Street #09-01 Toklo Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0885 E: tmls@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marino 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-ML000531-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SJG9367C

Chassis No.: GE61072792

2. Name of Policyholder

ASIA CARZ LEASING PTE LTD

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

04/10/2020

4. Date of Expiry of Insurance

03/10/2021

5. Persons or Class of Persons entitled to drive\*

The Policyholder

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 exactment 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 cancelled 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 covert-

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 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 except for private hire services
- 4) Use for hire or reward except for (3) and rental by the Policyholder.
- \* 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.

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 conditions of the insurance.

### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance 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 statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 3060DDA

Insurance Plan: Policy Excess: Third Party Cover Only

Excess-Third Party (Sect II) SGD 4,000

Financial Interest:

ASIA CARZ HOLDING PTE LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Yeo Chor Joo Irene - Mot

Printed 18/11/2020

## > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner | Particulars |
|---------------|-------------|
|---------------|-------------|

Owner ID Type: Owner ID:

Vehicle Details

Vehicle No.:

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make:

Vehicle Model:

Primary Colour:

Manufacturing Year:

Engine No.:

Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date: First Registration Date:

Transfer Count:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Explry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years):

PQP Paid:

COE Rebate Amount:

Total Rebate Amount:

Message

Company 152D

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SJG9367C

Yes

24 Nov 2020 HONDA

FIT 1.3GA

Black

2008

L13A4082122

GE61072792

73.0 kW (97 bhp)

\$11,795.00

22 Jul 2008

22 Jul 2008

4

\$11,795.00

Forfeited

- or the company

\$0.00

21 Jul 2023

A - Car (1600cc & below)

5

\$18,583,00

\$9,872.00

\$9,872.00

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 24 Nov 2020

OK