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
- 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 aforesaid.

ACCIDENT STATEMENT

Date of Submission 07/12/2020 12:51 (SGT) Date of Accident 04/12/2020 10:09 (SGT) Exact Location of Accident Singapore Additional Location Information **5 KAKI BUKIT ROAD 2** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private car

Vehicle Registration Number SKV3058T

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LI JIANSHENG NRIC No. S7360621G Email Address G90070896@GMAIL.COM Mobile Phone No (Phone) +65-90070896 Alternative Phone No +65-90070896

VEHICLE PARTICULARS

Manufacturer Volkswagen Model Tiguan Variant 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 - Claiming third party Vehicle Category

INSURANCE COMPANY

Name of Insurance Company Sompo Type of Coverage Comprehensive Fleet Policy Policy Number D20MTPV01014958 Cover Note Number

DRIVER

Name of Driver LI JIANSHENG NRIC No S7360621G Date Of Birth 28/10/1973 Occupation Indoor



Date Of Driving Pass 16/11/2009 Driving experience 11 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-90070896 Alt. Phone Number +65-90070896 Email Address G90070896@GMAIL.COM Address 33 PASIR RIS GROVE Address complement Postcode 518076 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver 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 the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? No Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No

WITNESS DETAILS

WITNESS 1

Name JOHN

Phone (Phone) +65-96312633

Fmail

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.
- 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)

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) 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 mo;
 - (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.

*

and a free arrange to by

COMPUSITOELSRO ENGINEERING PTE LTD 320 UB: ROAD 3

SINGAPORE 408649

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Policyholder's Signature Date & Time: M(2/22/20 Driver's Signature (If driver is not the policyholder) Date & Time:

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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

Policyholder's Signature Date & Time:

Application of the control of

Driver's Signature (If driver is not the policyholder) Date & Time: ONFORTDELIGHO ENGINEERING PIE LED

SEN LIGH ROAD II
SENSAPORE 408848

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:



Sompo Insurance Singapore Pte. Ltd.

50 Harillea Place, 70'S 09.766 Stigapore Lata Tower, Shipapore 248625 (et 6461 6555) Fax 6621 2302 "www.campo.com Co. Rep. No... 889824906 (1731 Fish, No... M20x503806

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) **ROAD TRANSPORT ACT 1987 (MALAYSIA)** ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No.

D20MTPV01014958

Insured

LIJIANSHENG

Motor Vehicle (Registration No.): SKV3058T

Coverage

: Comprehensive - ExcelDrive GOLD

Policy Commencement Date

: 06 NOVEMBER 2020 00:00

Policy Expiry Date

: 05 NOVEMBER 2021 23:59

Maximum Liability (Section I) : Market value at time of loss

Excess*

: \$400 - Section I

Voluntary Excess*

: N.A

Windscreen Excess*

: S\$100.00 for each and every applicable claim.

Persons or Classes of Persons entitled to drive*

- 1. The Insured.
- 2. Any other person who is driving on the Insured's order or with his permission.
- In the event of the death of the Insured,
 a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the ceath of the Insured; and
- b. any other person who has been given permission to crive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured,

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 criving the Motor Vehicle, And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

L mitations As To Use

Use only for social, domestic and pieasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thoroof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERT IFY that the policy to which this Conflicate relates is issued in accordance with (1), the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chepter 189) and Part IV of the Road Transport Act 1987 (Malaysia); and (2) the PoBcy terms, conditions and exceptions of the Private Car Policy ref MTP.29

Sompo Insurance Singapore Pte, Ltd.



Authorised Signatory

Date/Time of Issue: 03 NOVEMBER 2020 11:26

IMPORTANT NOTICE

Keep the Certificate in your Motor Vehicle;

Reep the Certificate in your Motor Vehicle; Under the Motor Vehicle in Your Motor Vehicle is (Risks and Compensation) Act (Chapter 189), it shall be unlewful for any person to use or cause to cermit any other person to use a Motor Vehicle without a valid policy of insurance under the Act. On the sale of the Motor Vehicle of if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance campany, if the Certificate of Insurance has been tost or destroyed, a statutory deciaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
This Policy will cease to be valid unce the Motor Vehicle has been sofe to snother person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name: 11P04308 & PROFESSIONAL INVESTMENT ADVISORY SERVICES PTE LTD CLCcde: 22A JJLDMLV2K1MD0KPA

^{*} Subject to GST wherever applicable























