SC0N20CS0004 / Cycle & Carriage Fulco Motor Dealer Pte Ltd ENTRY DATE & TIME: 28/12/2020 17:41 (SGT) SUBMITTED BY: Mars Ler Yeong Cherng VERSION: 1 (28/12/2020 17:41 (SGT))

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.

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 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 28/12/2020 17:41 (SGT) Date of Accident 23/12/2020 20:10 (SGT) Exact Location of Accident Tampines Ave 8, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBK747Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **FULCO LEASING PTE LTD** Company Reg No 201021308G **Email Address** johnson.poon@fulcoleasing.com.sg Mobile Phone No (Phone) +65-98387928 Alternative Phone No (Office) +65-67436266

VEHICLE PARTICULARS

Manufacturer

Toyota Model Hiace 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 - Reporting only Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy Policy Number 999993928/100879884-00000 Cover Note Number

DRIVER

Name of Driver **DU XIQUAN** NRIC No S8789951I Date Of Birth 10/02/1987 Occupation Indoor

Date Of Driving Pass 07/05/2010 Driving experience 10 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-98136878 Alt. Phone Number Email Address XiQuan.Du@gmail.com Address BLK 517 PASIR RIS STREET 52 Address complement #03-49 SINGAPORE Postcode 510517 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Other Does Driver Own Other Vehicles? Nο 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 - Major/Minor Rd Weather Conditions **DRIZZLING** Road Surface Wet 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? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name ZHEN DIMEI Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS TRAVELLING ALONG TAMPINES AVENUE 8.WHILE I WAS SLOWLY MOVING FORWARD, SUDDENLY VEHICLE B(SKT871S) APPEARED ON MY RIGHT SIDE AND STOPPED, THE DRIVER WENT DOWN TO TOLD ME I HAD COLLIDED INTO HÌS CAR.I CANNOT RECALL THAT HAPPEN ANY COLLISION BETWEEN OUR CAR, MY VEHICLE HAD NO DAMAGE.I FILE THIS INSURANCE REPORT TO LET MY THIS RENTAL VEHICLE'S INSURANCE COMPANY TO HANDLE CASE BEHALF OF ME. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? Nο

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberSKT871SVehicle ManufacturerToyotaVehicle ModelEstimaVehicle Variant-Vehicle Colour-

Vehicle Category	Private car
Name of Driver	_
Contact Number	_
Address	_
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	

SKETCH PLAN

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- 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.
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- 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 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.
- 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' law yers/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/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

2/2020

Personnel

Witnessed by Reporting Centre

-6BK 747 Y

TSKT8715

2:29 PM

Sketch Plan

Time

SERVICE

I was	travelling	g alor	ng To	mpin	ies A	venue	8.	while	I was	slo	wly	mov	ing .	forward	Sudden
ehide B a	appear -	èn mu	right	t si	de ar	d sto	pped,	the	driver	went	dou	on to	o to	old me	I had
ollided into															
ny vehicle										to	let	my	this	rental	vehicle
msurance	Company) to	hand	le	9209	bel	alf	of me							
								_							
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Declaration

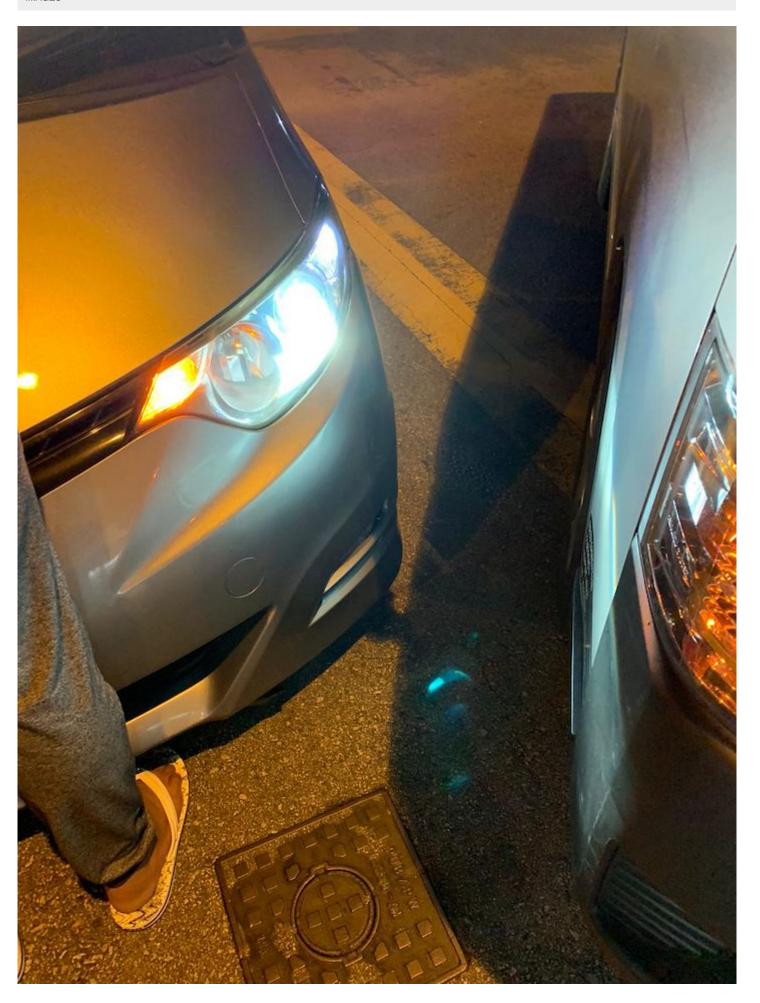
We declare the foregoing particulars are true in every respect.

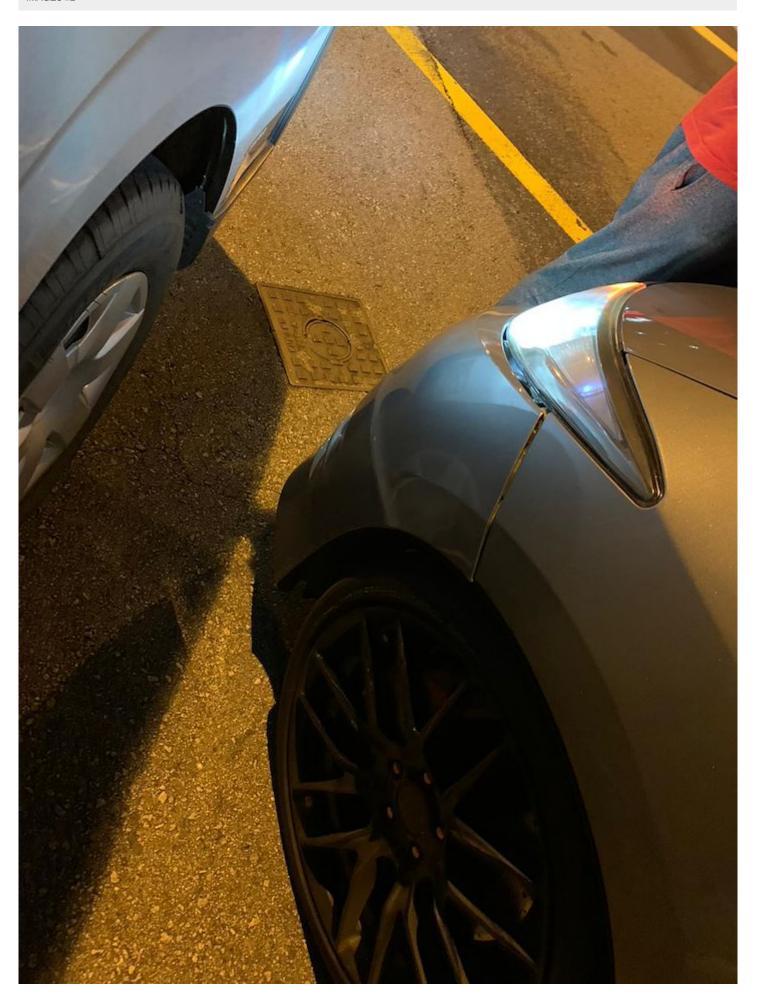
Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

2:29 Pm

Witnessed by Reporting Centre Personnel







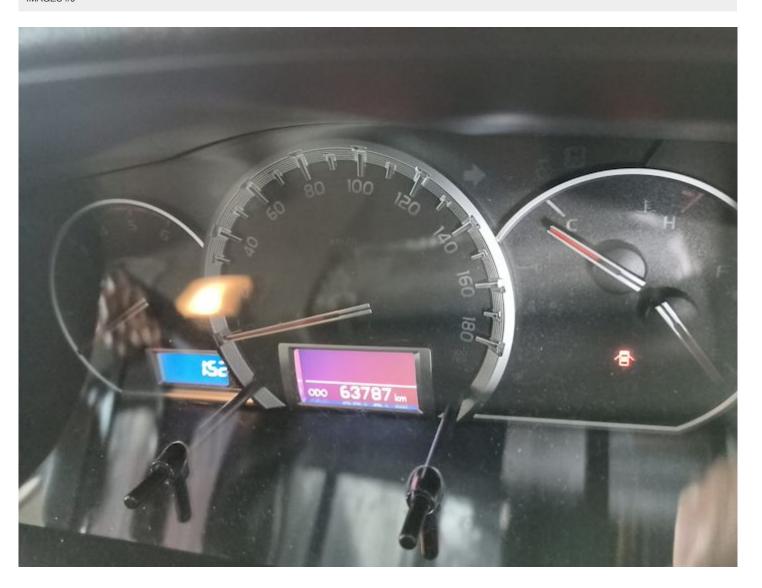


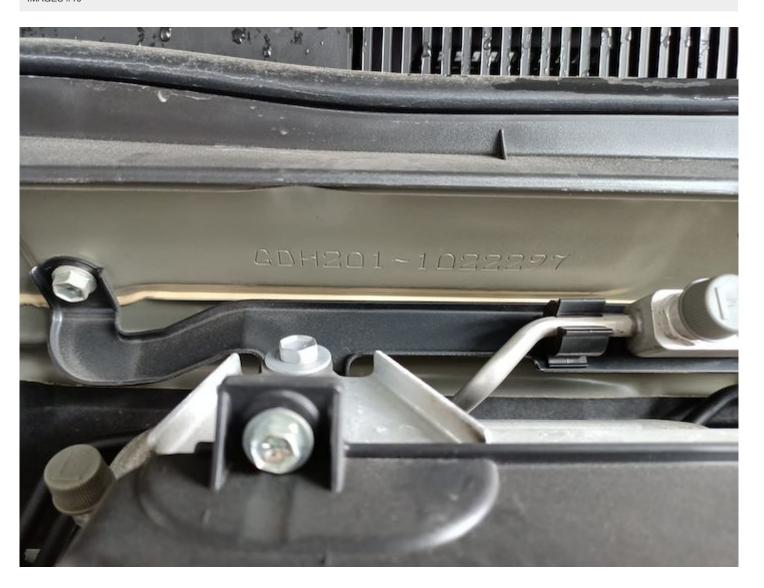














HOTLINE TEL: (65) 6419-3000

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)

M.Z.301

COMPREHENSIVE COMMERCIAL MOTOR

OWN DAMAGE EXCESS

\$\$1,800.00 (1)

CERTIFICATE NO. 999993928/100879884-00000

WINDSCREEN EXCESS

\$\$100.00

SUM INSURED S\$1.00 INSURING WITH COE/PARF

YES

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Fulco Leasing Pte Ltd

 EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 1 Jan 2020

4) DATE OF EXPIRY OF INSURANCE

31 Dec 2020

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE '

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

An additional Young and inexperienced Driver (YIDR) Excess of S\$3,000 (unless otherwise stated) applies to any drivers(named and unnamed) who is below age 23 or has less than 2 years driving experience.

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 Vehicle.

6) LIMITATION AS TO USE *

Use for the carriage of passengers or goods in connection with the insured's business.
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
The Policy does not cover:

1) Use for racing, pace-making, reliability trial or speed-testing.

1) Use for racing, pace-making, reliability trial or speed-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 to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

N/A * NAMED DRIVER

HIRE PURCHASE COMPANY DBS BANK LTD

*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, 1967 (Malaysia).

Issued At Singapore 29 Jan 2020

AIG ASIA PACIFIC INSURANCE PTE. LTD.

502805-000 LIEW OOI LIN MAY AIG BUILDING 78 SHENTON WAY #07-16 SINGAPORE 079120

Authorised Representative

ORIGINAL

SSPAHN

AIG Building, 78 Sherton Way #09-16 Singapore 079120

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