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 24/02/2021 17:49 (SGT) Date of Accident 23/02/2021 19:25 (SGT) Exact Location of Accident Pasir Panjang Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBC3841E**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ACE LEASING Company Reg No 5XXXX060D **Email Address** aceleasing2@hotmail.com Mobile Phone No (Phone) +65-88928962 Alternative Phone No +65-88928962

VEHICLE PARTICULARS

Manufacturer Nissan Model Urvan Variant Exact purpose for which vehicle was being used at time of Employment accident 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 NTUC Type of Coverage ThirdPartyFireTheft Fleet Policy Policy Number 5118373680 Cover Note Number

DRIVER

Name of Driver TAN WEI CHING (CHEN WEIQUN) NRIC No SXXXX378E Date Of Birth 30/06/1981 Occupation Outdoor

Date Of Driving Pass 11/06/2002 Driving experience 18 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-99828962 Alt. Phone Number Email Address aceleasing2@hotmail.com Address BLK 14 UPPER BOON KENG ROAD #12-955 Address complement Postcode 380014 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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 Collided into Property 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? Nο DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Geylang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18008486999 Alt. Police Station Phone No (Fax) +65-68486799 Police Station Address 1 Cassia Link Singapore 397618 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20210224/2001 ATTACHMENT(S) Are accident photos available for attachment? Yes

No

Was there any video captured by Car Camera?

Was there any audio recorded?

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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
- 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 lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the
- 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) w ho 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
- (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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")

3841E

- (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.

UEN 53392060D Policyholder's Signature / Date &

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

Witnessed by Reporting Centre

austa

Personnel

Sketch Plan

Panjang & Pasir

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We declare the foregoing particulars are true in every respect.

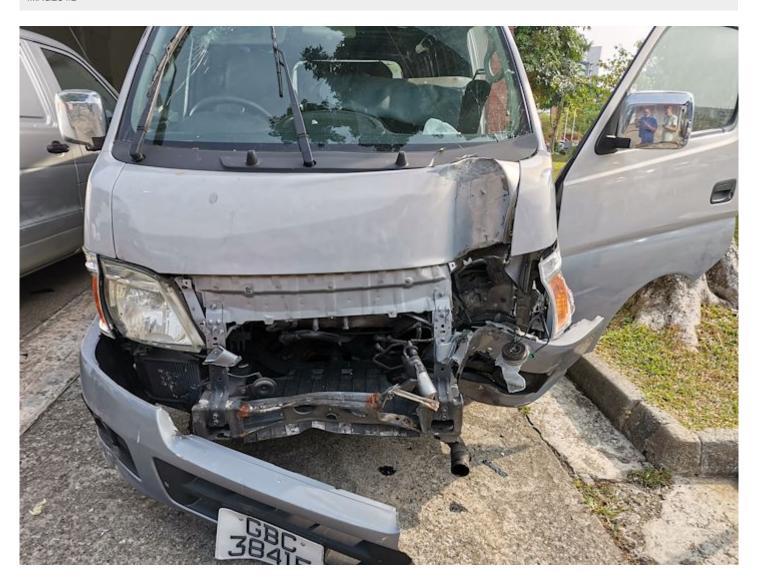
Policyholder's Signature / Date & Time

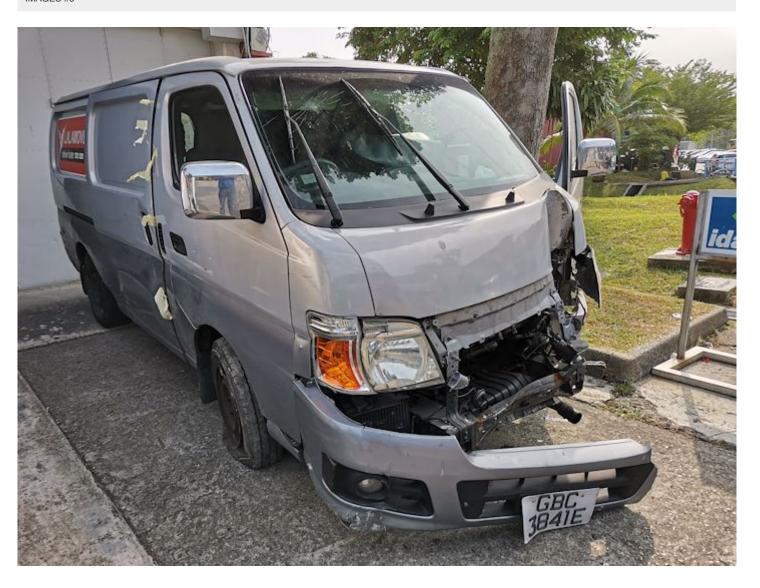
UEN 53392060D

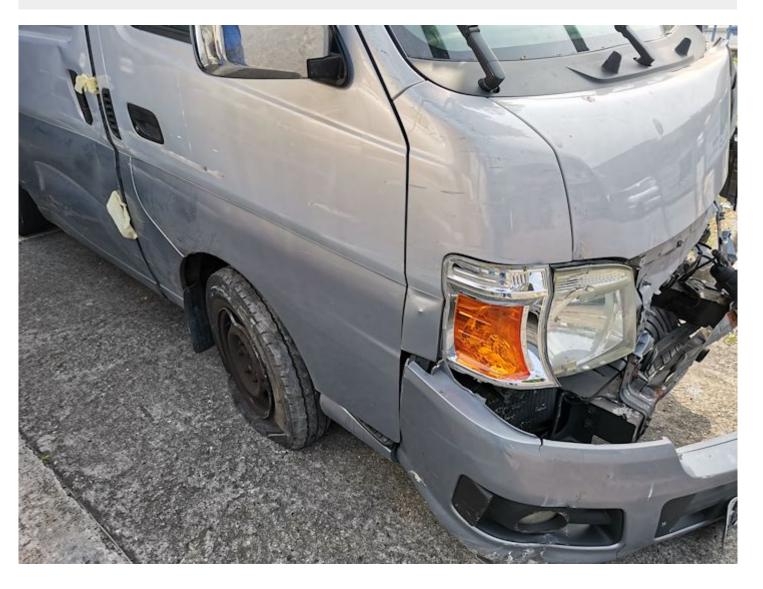
> Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel













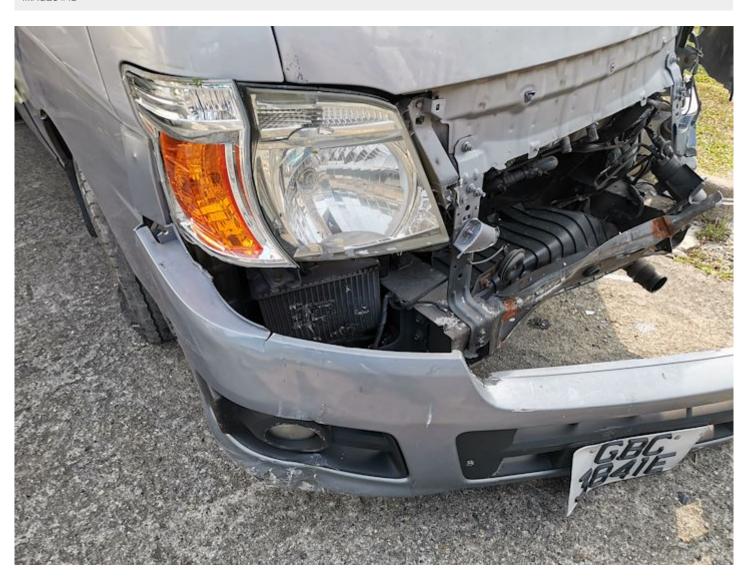


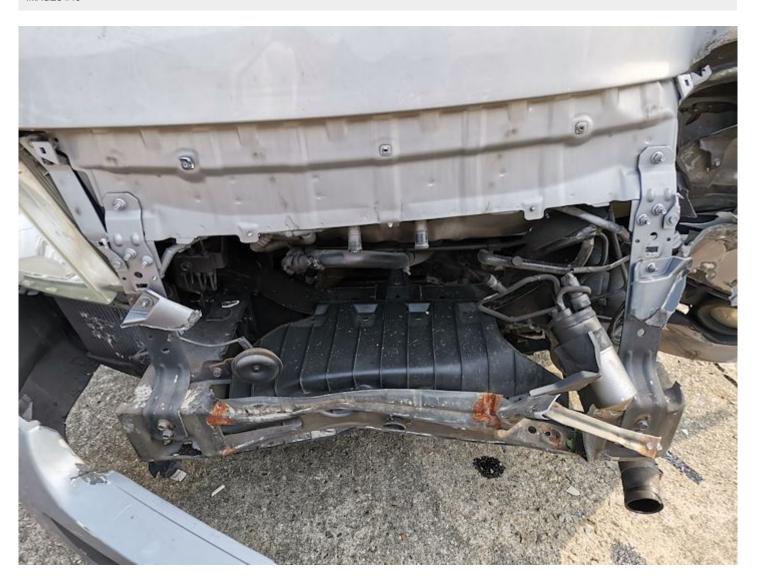


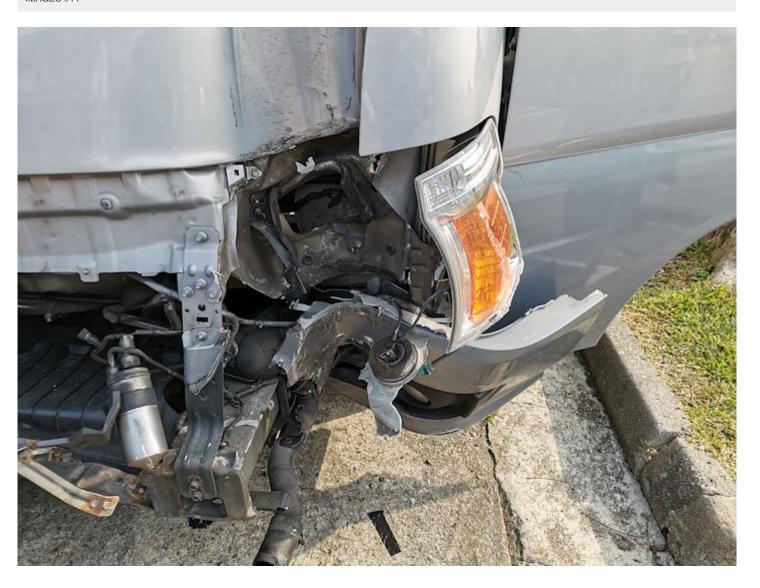


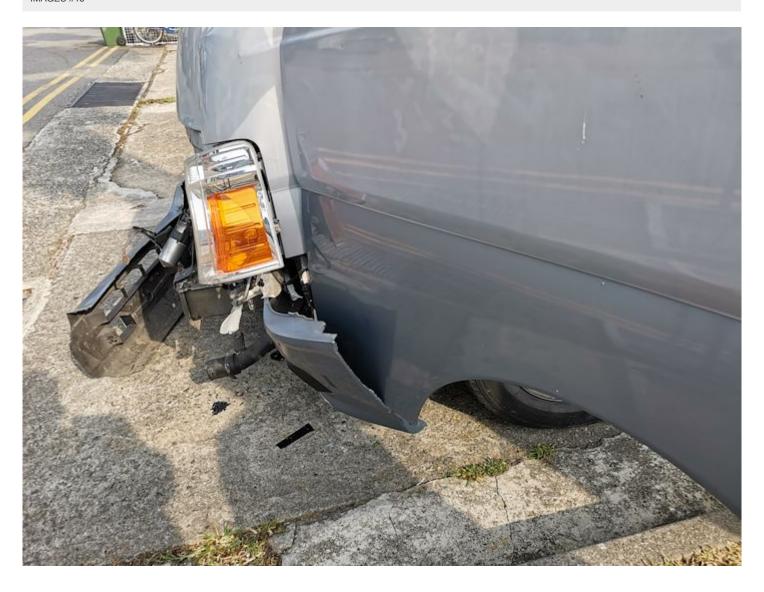


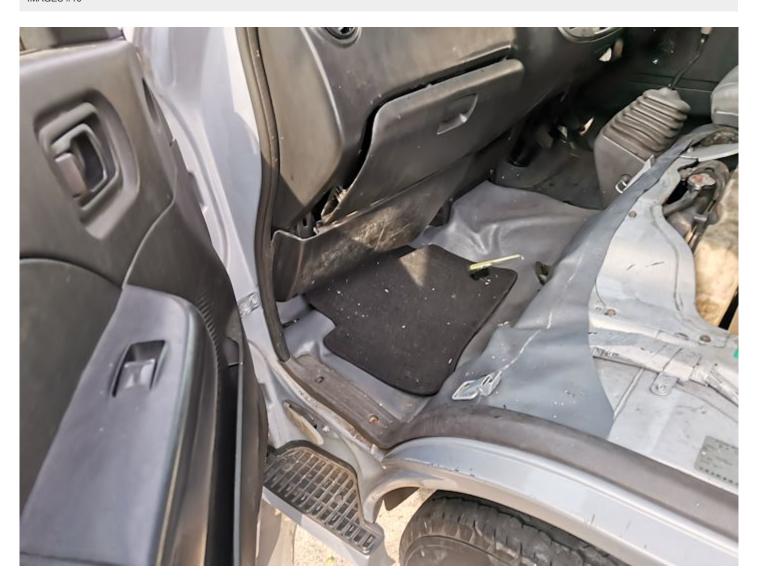


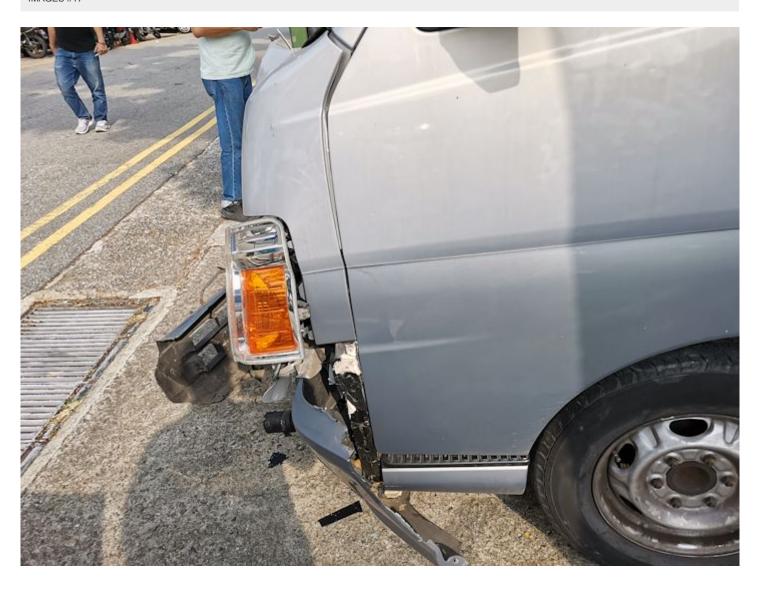


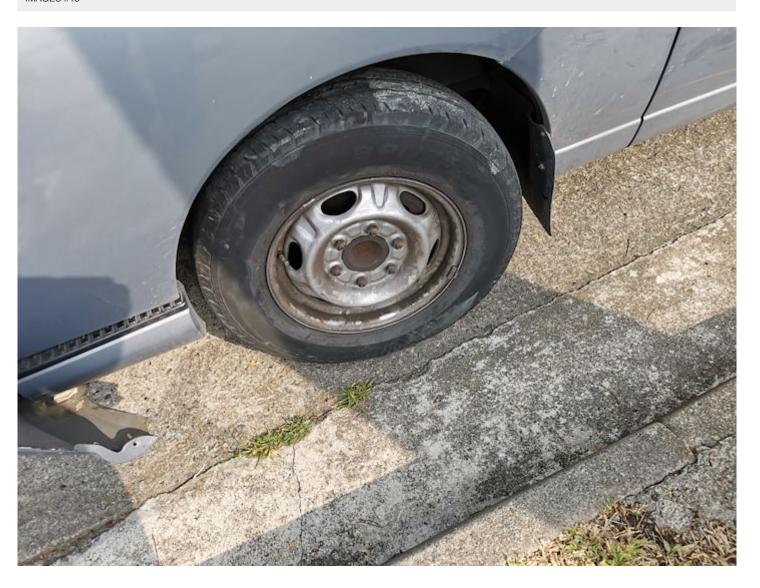




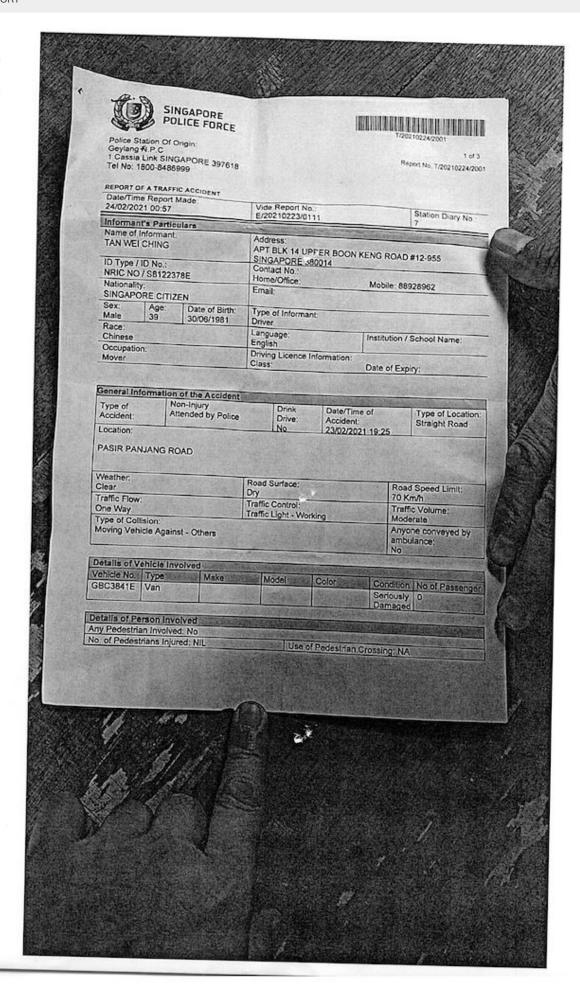














Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999



T/20210224/2001

Report No. T/20210224/2001

CONTINUATION OF REPORT

Driver	CONTROL OF THE PARTY OF THE PAR	ESPHANISH	STATE OF THE PARTY	50000000	SELECTION OF THE PERSON	OSCIONAL DE LA COMPANSION DE LA COMPANSI
Name	me TAN WEI CHING			ID No.		S8122378E
Related Vehicle NIL				Contact No.		88928962
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Dis			NIL	DESCRIPTION OF THE PARTY OF THE
No. of Days grant	ted Medical Leave	NIL	Degree o			ACTION OF THE RESIDENCE OF THE PARTY OF THE

Brief Details.

On 23.2.2021 at about 1925hrs, I was driving a rental vehicle registration number GBC3841E along Pasir Panjang towards West Coast Road. At that point of time, I was a bit sleepy and subsequently fall a sleep when I was driving. The next thing, I woke up and notice that I had mounted the kerb and knocked the Black coloured LTA camera. After which, I came down from my vehicle and one of the grab driver came towards me and check on my condition. The said person called for ambulance. Few minutes later ambulance arrived at scene. I told the paramedic that I am fine. After that I left and proceed to the nearest toilet. Subsequently, I went back to my vehicle and Traffic police was at scene. Later on the car rental company also arrived and he called for the towing. I wish to state that the damaged of the vehicle front bumper dented, left and right side of the vehicle dented and front left tyre punctured.

vide report: E/20210223/0111

7	Police Station Of Origin: Geylang N.P.C 1 Cassia Link SINGAPORE 397618 Tel No: 1800-8486999	CONTINUATION OF REPORT	3 of 3 Report No. T/20210224/200
	Sketch Plan		
	Informant is not able to provide sketch pla	an	
1	MPORTANT: Please attach a copy of ver-	•	
i t	MPORTANT: Please attach a copy of your he certificate with you now, please fax a co	vehicle's Insurance Certificate to	this report. If you don't ha
		-t	number as reference.
-	Signature Of Officer Recording The Report	ry as a stating the report	number as reference.
-	Signature Of Officer Recording The Report G / Sgt 3 NOORUL NADIAH BINTE HAIRON	-t	number as reference.
	Signature Of Officer Recording The Report G / Sgt 3 NOORUL NADIAH BINTE HAIRON HANWAR	-t	number as reference.
-	Signature Of Officer Recording The Report G / Sgt 3 NOORUL NADIAH BINTE HAIRON HANWAR Signature Of Interpreter:	Signature Of Information Date/Time:	number as reference.
-	Signature Of Officer Recording The Report G / Sgt 3 NOORUL NADIAH BINTE HAIRON HANWAR	Signature Of Information	number as reference.
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ACE LEASING - AGREEMENT Hirer Name: (as in 10) Tau Wei Ching	dd/mm/yyyy : hh / mm Start Date End Date
NRICPASSPORT NO SECONDEE Address BIK 14 #12-955 UPPER but	Date of Birth 3016 (GR) New/Swop Non Keng Pood
AGE: 39 Occupation a la mark dri Driving Experience /8 Driving Licens License Type International Contact Number 8882 8962	2002 In 1/th
IMPORTANT 1. The Hirer and the authorized driver must be ove holding valid driving licenses and have a minim experience. Failure to observe stipulation may a Hirer/ the authorized Driver 2. The vehicle in question refers to the stipulated valid service charge of \$5 on top of a fuel surcharge is the vehicle at the appropriate fuel level 4. No refund for early return of vehicle. The hirer late return at the rate shown per hour per day. A charged as a full day rental. 5. Use of the vehicle for illegal purpose (For instant or trafficking, smuggling is strictly prohibited. 6. Vehicle strictly for Singapore use only and may written consent of ACE LEASING. The hirer is the appropriate insurance top up in the case of not a traffic violations, fines and penalties imposed or respect of or in connection with it's use or opera traffic violations, fines and penalties imposed or respect of or in connection with it's use or opera insurance premiums, non-waiver excess and connection in regard to the vehicle or the use or the chare to be paid immediately in the event of an anot to provide a replacement vehicle if an accided will be repaired at ACE LEADING authorized was multiplied by the number of days ACE LEASING can also be claimed at the rate amultiplied by the number of days ACE LEASING.	r 23 years of age and under 65 years and be- um of 2 years regular and qualified driving return all damages costs to be Borne by the chicle rented to the hirer by ACE LEASING. creturned with fuel level likewise. A capayable by the hirer should he fail to return shall be liable for additional charges for any ny returns after our operation hours will be use in connection with theft, drug peddling not be driven out of Singapore without prior liable for a penalty of \$200 in additional to on-disclosure or Malaysia usage. Il damages or losses howsoever caused, all the vehicle for whatsoever reason in tion. Il claims, damages, losses, increased at expense (including legal costs on a full bught against, suffered or incurred by any operation of the vehicle. Full excess amount coident. ACE LEASING reserve the right int occurred. Any damage to the vehicle by of the Hilbert delivered.
Hirer Signature	
GBC	3841E VAN (M) DIESEL
NIUF	WAN OD DIESEL