SA1G213U0002 / ASM Automotive Services Pte Ltd ENTRY DATE & TIME: 30/03/2021 18:48 (SGT) SUBMITTED BY: Jaclyn Lai VERSION: 1 (30/03/2021 18:48 (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 30/03/2021 18:48 (SGT) Date of Accident 26/03/2021 21:45 (SGT) Exact Location of Accident Singapore Additional Location Information Central Square Loading & Unloading Bay Exit Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Daf

Vehicle Registration Number XD7126U

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **COLEX ENVIRONMENTAL PTE LTD** Company Reg No 201133348M **Email Address** jennychow@colex.com.sq Mobile Phone No (Phone) +65-62687711 Alternative Phone No (Office) +65-62687711

VEHICLE PARTICULARS

Manufacturer

Model Cf75 Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 9186

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd Type of Coverage ThirdPartyFireTheft Fleet Policy Policy Number D-21096931MFVS/7 Cover Note Number

DRIVER

Name of Driver Low Tong Hai NRIC No S7935346I

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	25/10/1979 Outdoor 27/06/2002 18 YEARS AND 9 MONTHS Male (Phone) +65-62687711 - jennychow@colex.com.sg Apt Blk 633 Jurong West Street 65 - 640633 No Employee No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 No - Yes 2 No
PASSENGER 1	
Name Gender	Unknown Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
On 26.03.2021 around 21:45hrs, I exit from Central Square loading shopping centre. When entering into the yellow box, the front car (shit onto his rear. No injury, that's all.	g & unloading bay. In front of me was a car also exit from the SLN9785T) stopped due to the traffic light. I cannot stop in time and
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer	SLN9785T -

Vehicle Variant

Vehicle Model

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

IMPORTANT NOTICE

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- 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.
- 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 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' 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.

Policyholder's Signature Date & Time: Oriver's Signature (if driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

COLEX ENVIRONMENTAL PTE LTD

SKETCH PLAN		
	SUN 9-185T	
	X07126 U	
	XOTIZEU	
DESCRIBE CIRCUMSTANCE		
on 26/3/	21 around 2145 hrs. I exit from	
Central	Egnore 100dy a unloody bay. If me was a car also earn Centre. when entery 11to 40h I can stop du to traffer 15 wh Usep of the and lite onto 1th cajund! That AM!	
infront 6	of me was a car also earn	from
The Thype	, centre. When entery 11to you	100 60
the From	of can stop du to traffe how	<i>t</i> .
1 carnet	User of And and life on to 1st	rear
11 baby	rained! That AM!	
The Car	NO 15 SLN 9785T	
(m)(n)		
		-110
DECLARATION		
/We declare the foregoing part	culars are true in every sespect.	
	1/11	
Policyholder's Signature Date & Time:	Driver's Signature Reporting Centre Personnel's Sign (If driver is not the policyholder) Name:	ature

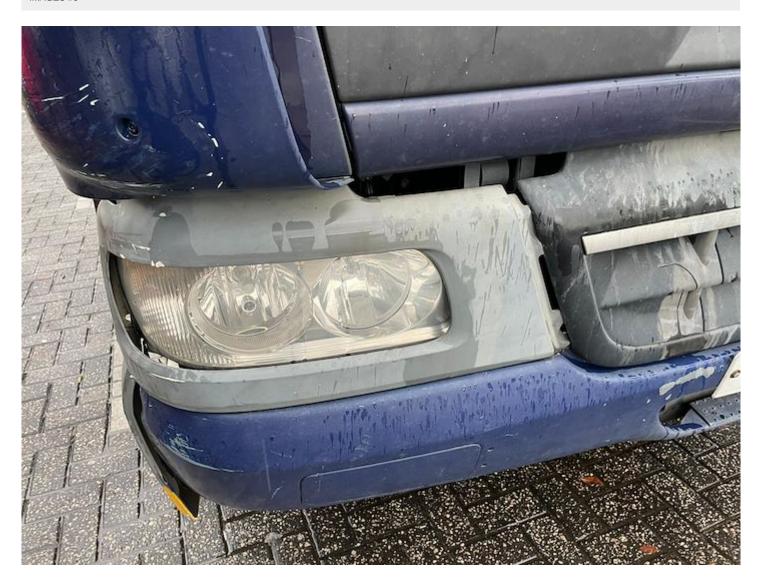
COLEX ENVIRONMENTAL PTE LTD





















MS First Capital Insurance Limited Co. Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy.

: FLEET - HEAVY COMMERCIAL VEHICLE

Type of Cover.

: Third Party Fire and Theft

Certificate No.

: D-21096931MFVS/7

Vehicle No / Chassis No

: XD7126U / XLRAT75PC0E979496

Name of Insured

: COLEX ENVIRONMENTAL PTE LTD

Period Of Insurance

: 01.01.2021 To 31.12.2021

Insured Estimated Value

: Market Value At Time Of Loss

Financial Institution

: N.A.

SECTION I - SGD15,000.00 ANY ONE CLAIM OR SERIES OF CLAIMS ARISING OUT OF ONE ACCIDENT SECTION II - SGD9,000.00 ANY ONE CLAIM OR SERIES OF CLAIMS ARISING OUT OF ONE ACCIDENT SECTION I & II SEPARATELY SECTION 1 & II SEPARATELY
ADDITIONAL EXCESS OF SGD1,000.00 TO EACH CLAIM OR SERIES OF CLAIM(S) ARISING OUT OF
SINGLE ACCIDENT FROM THE USE OF THE EQUIPMENT
ADDITIONAL SGD2,500.00 SECTION I & II SEPARATELY IS IMPOSED ON THOSE DRIVERS WHO ARE
BELOW 23 YEARS OLD AND/OR WHO HAVE LESS THAN 3 YEARS OF DRIVING EXPERIENCE

Authorised Driver*

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

Any person who is driving on the Insured'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 enactment or regulation in that behalf from driving the Motor Vehicle.

Limitations as to use

Use in connection with the Insured's business.

Whilst the Motor Vehicle is being so used the carriage of passengers is permitted.

The Policy does not cover

Use for racing, pace-making, reliability trial or speed-testing.
 Use for the carriage of passengers for hire or reward

- (3) Use whilst drawing a traller except the towing of any one disabled mechanically propelled vehicle.
- *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, 1987 (Malaysia)

> MS First Capital Insurance Limited (Approved Insurers)

> > LIL.

STELLAL/B0031/MZ801

Issued at Singapore on 24.12.2020

Authorised Signature

A Member of MISWAD INSURANCE GROUP