SL0321540002 / Lai Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 04/05/2021 12:47 (SGT) SUBMITTED BY: LHMK -3 VERSION: 1 (04/05/2021 12:47 (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.

- 4. The issue and acceptance of this is form by instrained 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 04/05/2021 12:47 (SGT) Date of Accident 02/05/2021 10:20 (SGT) Exact Location of Accident Upper Thomson Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW2483B

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Goh Lai Seng NRIC No. S1682049J Email Address gohlaisengsherman@yahoo.com.sq Mobile Phone No (Phone) +65-97744986 Alternative Phone No +65-97744986

VEHICLE PARTICULARS

Manufacturer Toyota Model Sienta 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 Private car Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2070156070 Cover Note Number

DRIVER

Name of Driver Goh Lai Seng NRIC No. S1682049J

Date Of Birth 13/01/1965 Occupation Indoor Date Of Driving Pass 25/04/1983 Driving experience 38 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-97744986 Alt. Phone Number +65-97744986 Email Address gohlaisengsherman@yahoo.com.sg Address Blk 222 Lorong 8 Toa Payoh #17-715 Address complement Postcode 310222 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 Side Swipe 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? Yes 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? Nο 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? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** S

Vehicle Registration Number	SHA4011S
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	_
nsurance Company Name	_
lature Of Damage	_
Details of property damaged in accident	_
lo. 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.
- 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.
- 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.
- 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)

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

MSK Yooder's Signature / Date & Time

SMW \ 12483B Driver's Signature (${\bf f}$ driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

Angie Soh

54A 4011 S

escribe (ircumstances o	of the Accident						
	ON 2/5/2	1 , about	- 10.	20 am, Pignal ignt to hit his	, white	le dri	My along	,
uner	Thousen	Road .	1	Pignal	to I	ax7 S	48 401151	
A0 0	thousing lange	are from	N A	ant to	o Left	+ buy	t the fat	5
DOTYE	FIST	speed -	un of	hit	41	my 1	oft side	17
	retitle.	Piren	AL at	47-5 1	er- tax	7 41	5-to-have	Q
200					7012			-
6714	Perrange	•						
th ora	1.19 = 1	of Taju	~/ ·					
in a v	W 65 70	11 11/00	/ ` 					_
								_
								_
-								-
								_
								10
			-					_
						-		-
						-		_
								_
					-			-
								-
								_
HETE								_
								_
								_
								_
								_
			200					
90.5								
	Section 19		-WALESTON					
	-0019 000-F00-F00000		1000	TOTAL CONTRACTOR OF THE PARTY OF				-
	K. 138					- 1257/8-3		77
					- X12-			

Declaration

We declare the foregoing particulars are true in every respect.

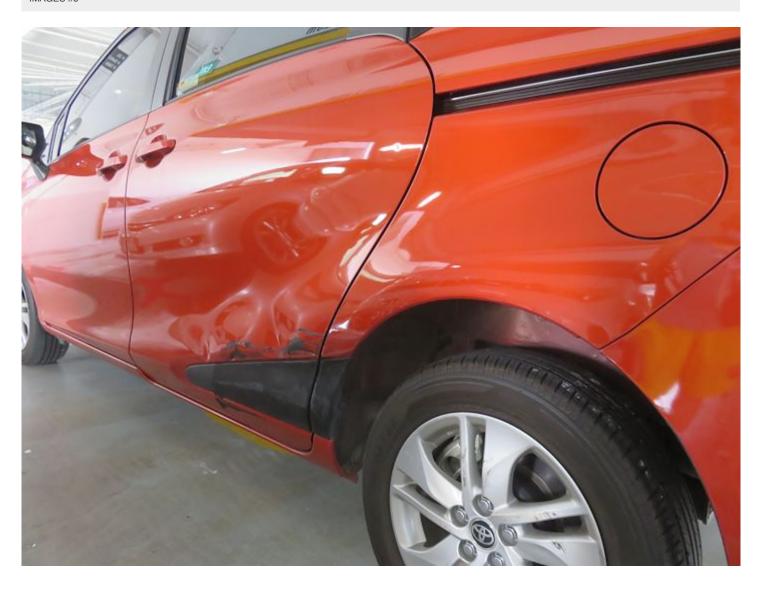
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

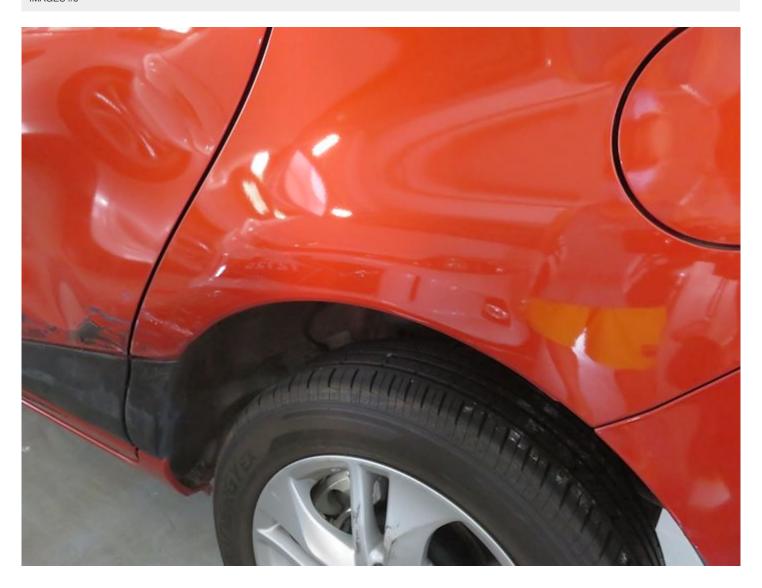
Angie Soh

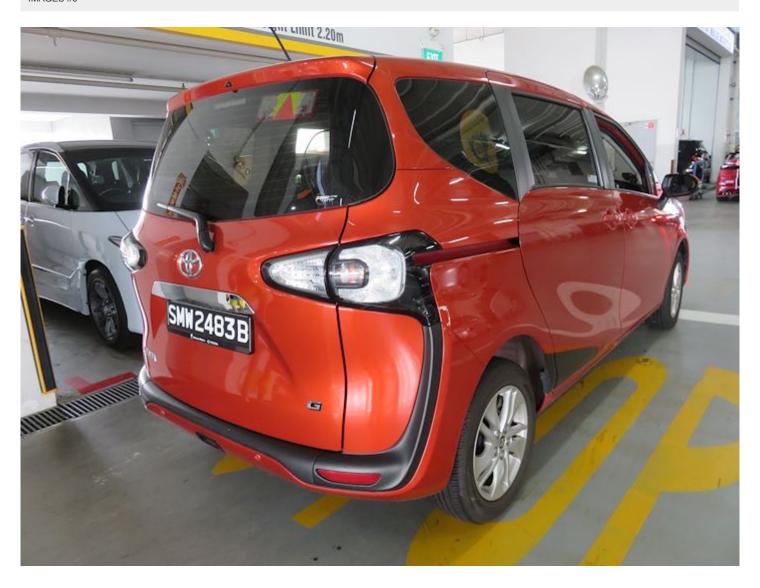


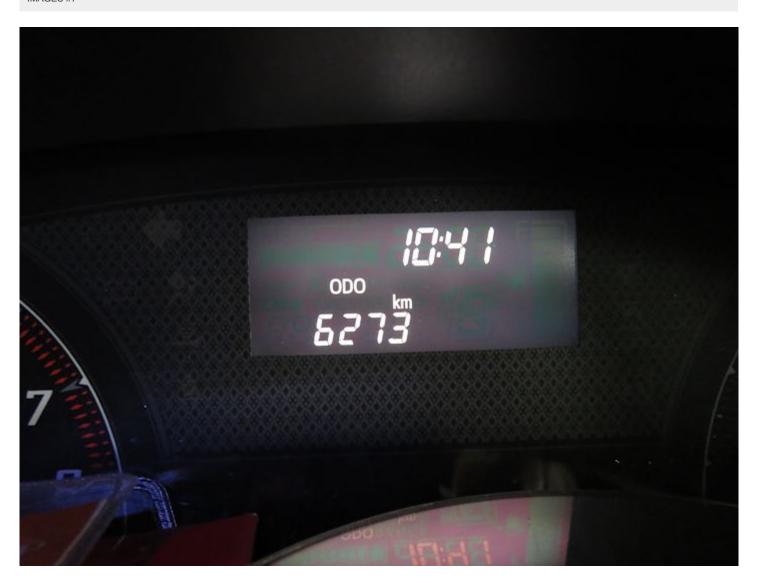


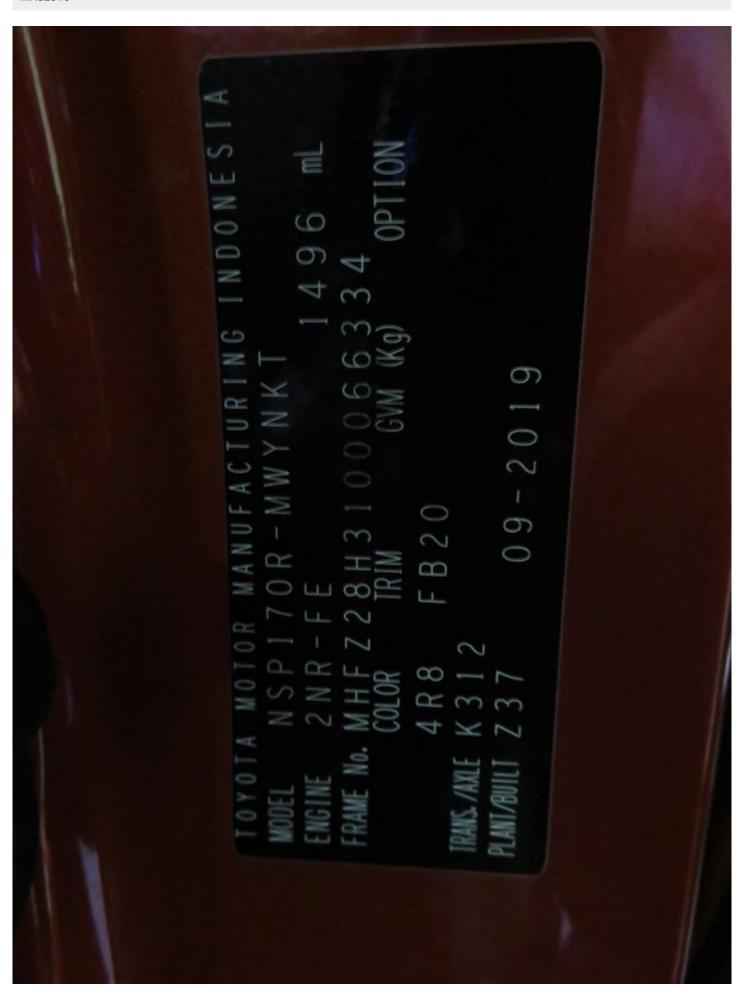
















CERTIFICATE OF INSURANCE

Vehicle No.

: SMW2483B

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : GOH LAI SENG

Period of Insurance : 11 Nov 2020 To 10 Nov 2021 Engine No. : 2NRX480931 : 2070156070 Policy No. Endorsement No. : 000000000367193 Engine No. : MHFZ28H3100066334 Issued Date : 17 Nov 2020 Chassis No.

ABOUT THE COVER

: TOYOTA SIENTA 1.5

First Year of Registration : 2020 Engine Capacity/Tonnage : 1,496.00 CC Sum Insured : Market Value Insuring with COE/PARF : Yes Off Peak Car : No Driver Restriction : NA

Person or Classes of Persons Entitled to Drive*:

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with his/her permission. This Policy will indemnify the Policyholder or any authorised driver only if helshe meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' diving experience.

: Unlimited Mileage Mileage Condition Age Condition : All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, diving tuston, diving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any triade or business or use for any purpose in connection with Motor Triade.

Loss of Use 1500cc - 1600cc

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1 Fire - 50 Own Damage - \$600 Theft - 50 Flood Cover - \$600

Section 2 Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

GOH LAI SENG - \$600 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1.Toyota Bodycare Centre (For accident repair & accident reporting). Add. 2 Pandan Crescent Singapore 128482 Tet: 6831 1188. 2.Toyota Bodycare Centre (For accident repair & accident reporting). Add. 17 Ubi Road 4 Singapore 408611 Tet: 6831 1688.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG website www.eig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Toyota Financial Services Singapore Pte Ltd

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

INCHCAPE AUTO TOYOTA - BSTU060

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

33 LENG KEE ROAD

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #09-16 AIG Building 5079120 | T:+65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

Accident report SL0321540002

Page 15 of 15

0504667271

SINGAPORE 159102