

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
 2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
 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 9 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 Date of Accident Exact Location of Accident Additional Location Information	12/06/2021 12:44 (SGT) 08/06/2021 16:55 (SGT) Singapore Seng Poh Road
Courtry/State of Loss	Seng Pon Road Singapore

Date of Accident	08/06/2021 16:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Seng Poh Road
Courtry/State of Loss	Singapore
DETAILS O	F OWN VEHICLE
Vehicle Registration Number	SKF5930X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KOH KANG HAN IVAN
NRIC No	S8015982Z
Email Address	james@excelsl.com.sg
Mobile Phone No	(Phone) +65-96811452
Alternative Phone No	+65-96811452
VEHICLE PARTICULARS	
Manufacturer	Mercedes
Model	C180
Variant	-
Exact purpose for which vehicle was being used at time of	
accicent	Private use
Are you claiming under your own insurance policy for repair to	No Otto attack
your vehicle? Vehicle Category	No - Claiming third party
Transmission	Private car
CC	Auto 1600
	1000
INSURANCE COMPANY	
Name of Insurance Company	NTLIC Income Incurrence Co. according to 1
Type of Coverage	NTUC Income Insurance Co-operative Ltd Comprehensive
Fleet Policy	No
Policy Number	5117603125
Cover Note Number	drivo CLASSIC (E.W + T.A)
Danver	

DRIVER

Name of Driver		KOH AH TEE
NRIC No	manna and a sanda	S1171400E

Date Of Birth	24/06/1956
Occupation	Indoor
Date Of Driving Pass	29/07/1975
Driving experience	45 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91701359
Alt. Phone Number	-
Email Address	james@excelsl.com.sg
Address	6 KIM KEAT ROAD #04-02
Address complement	-
Postcode	328847
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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
	ыу
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	- Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	1
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?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SKS2717Y
Vehicle Manufacturer	Mercedes
Vehicle Model	A200
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Unknown Female
Contact Number	(Phone) +65-81261223
Address	•
Address complement	-

Postcode	-
Insurance Company Name	_
Nature Of Damage	_
Deta Is of property damaged in accident	_
No. Of Passenger (Including Driver)	_

INCOME MOTOR	SERVICE CENTRE
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Report No: MT D.O.A: 08/06/2021 Time: 16:55 hrs

Report Date & Start Time:	12:06:2021 / 12:38
Vehicle No. SKF5930X	Remortion Tone

SKETCH PLAN

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- 1. Please report correctly the details of the accident to speed up the claims process.
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- 8y 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)

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' 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.

12/06/21 / 12:38

Policyholder's Signature / Date & Time

Chi

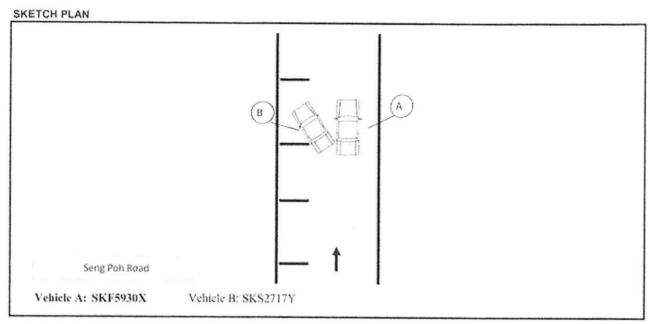
Driver's Signature (If driver is not the policyholder) / Date & Time

12/06/21 / 12:3

Alan Tang (S098825) Customer Care Executive Motor Service Centre

Executive Centre

Witnessed by Reporting Centre Peronnel



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling straight forward. Suddenly, vehicle B reversed out from the carpark lot, on the left side of the road. This resulted in
the right rear area of vehicle B to side swipe into the left side of my vehicle A.
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Declaration

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

12/06/21 / 12:38

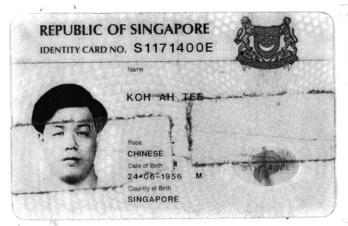
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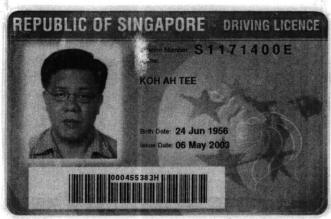
12/06/21 / 12:38

Alan Tang (S098825) Customer Care Executive Motor Service Centre

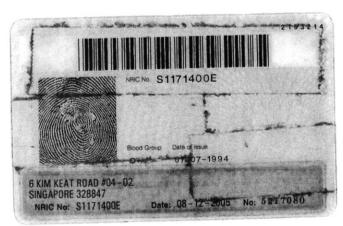
KY

Witnessed by Reporting Centre Personnel

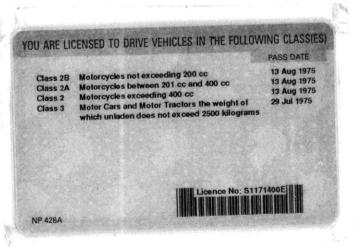














Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5117603125

Cover : drivo CLASSIC : SKF5930X

1. Index mark and Registration Number of Vehicle Chassis Number

: WDD2040452A717178

2. Name of Policyholder

: KOH KANG HAN, IVAN (XU JIANGHAN, IVAN)

3. Effective Date of Insurance

: 18 Jun 2020

4. Expiry Date of Insurance

: 17 Jun 2021

5. Persons 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.

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. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1) N/A EXCESS (SECTION 2) : N/A WINDSCREEN EXCESS : \$\$100 ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE YES NCD PROTECTION : YES (FREE) TRANSPORT ALLOWANCE : YES **EXCESS WAIVER** : YES

PRIMARY DRIVER : KOH KANG HAN IVAN NAMED DRIVER (1) : N/A

NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A SUM INSURED MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Date of Issue

: META AGENCY PTE. LTD. (00000573430)

: 27 May 2020 18:02 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SKS2717Y

Date of Accident

08/06/2021

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Reset

% RESULT & RECEIPT

TP Insurer Enquiry	
Insurance	AIG Asia Pacific Insurance Pte
Period of Insurance	20/07/2020 - 01/10/2021
Requested By	CG Pei Kee (Chew Goon Motor)
Requested Date	16/06/2021 14:08

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	982Z
Vehicle No.:	SKF5930X
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Jun 2021
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	C 180 KOMPRESSOR
Primary Colour:	Silver
Manufacturing Year:	2012
Engine No.:	27191031355328
Chassis No.:	WDD2040452A717178
Maximum Power Output:	115.0 kW (154 bhp)
Open Market Value:	\$30,319.00
Original Registration Date:	18 Jun 2012
First Registration Date:	18 Jun 2012
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$30,319.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jun 2022
PARF Rebate Amount: Intended COE Rebate Details	\$16,675.00
COE Expiry Date:	17 Jun 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$64,201.00
COE Rebate Amount:	\$6,437.00
Total Rebate Amount:	\$23,112.00

The information contained herein is correct as at 16 Jun 2021