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 24/06/2021 14:25 (SGT) Date of Accident 23/06/2021 14:55 (SGT) Exact Location of Accident 20 Orchard Rd, Singapore 238830 Additional Location Information Before Handy Road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SLJ3584S

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN SWEE SENG NRIC No. S1313877Z Email Address tansweeseng58@gmail.com Mobile Phone No (Phone) +65-96753825 Alternative Phone No +65-96753825

VEHICLE PARTICULARS

Manufacturer

Model **HRV** Variant Exact purpose for which vehicle was being used at time of Private hire accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 21-MM000315-R00 Cover Note Number

DRIVER

Name of Driver TAN SWEE SENG NRIC No. S1313877Z

Date Of Birth 16/04/1958 Occupation Outdoor Date Of Driving Pass 20/05/1981 Driving experience 40 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-96753825 Alt. Phone Number +65-96753825 Email Address tansweeseng58@gmail.com Address Blk 189A Rivervale Drive Address complement #15-1018 Postcode 5411189 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 Collision - Head to Rear 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? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name Shahajhan Hussain Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name **Tanglin Division Headquaters** Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT As per attached sketch plan & police report, E/20210623/7022 (Tanglin Division HQ) ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

SME9018K

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model	_
Vehicle 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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Address	Tan Swee Seng
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Neck, back & shoulders
Injured person in which vehicle?	SLJ3584S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

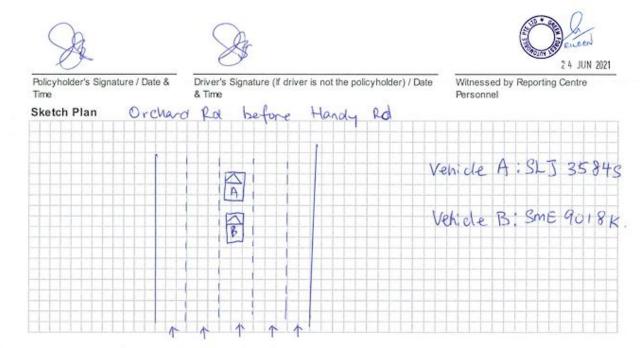
- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material 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)

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.



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Declaration

We declare the foregoing particulars are true in every respect.

S

Policyholder's Signature / Date & Time

St.

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

2 4 JUN 2021

Witnessed by Reporting Centre Personnel







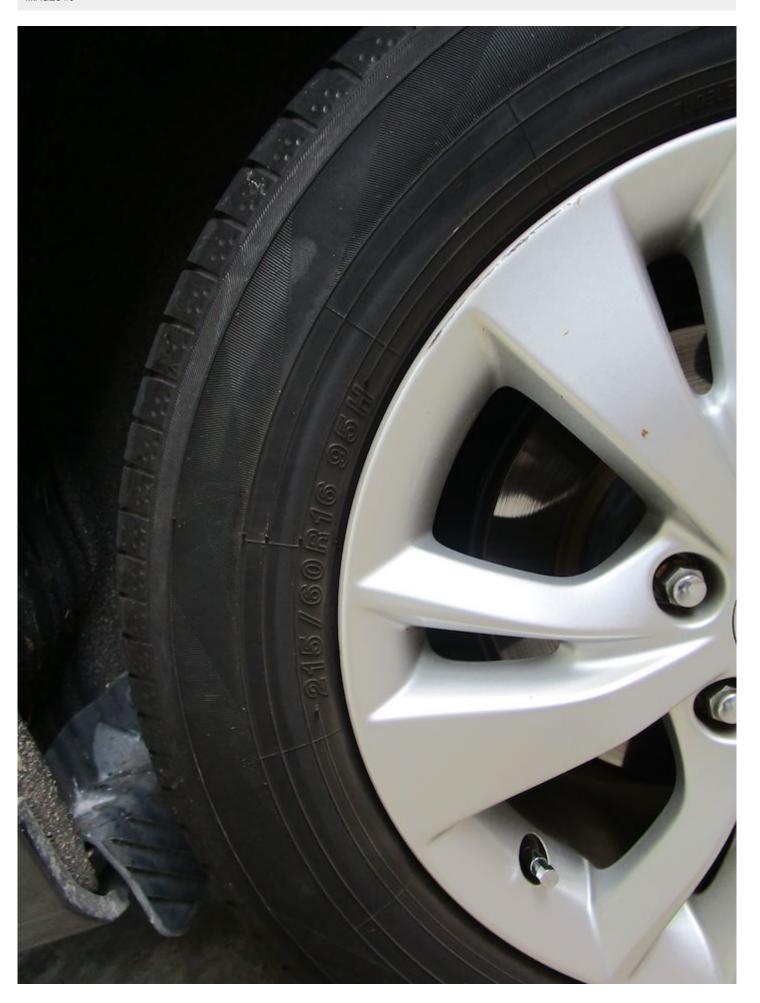












HONDA MOTOR CO., LTD. JAPAN
CHASSIS NO.
JHMRU1810GX201088
RU1
T7AGZA6-NH788P-A-J









1 of 1

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Report No. E/20210623/7022

Date/Time Report Made 23/06/2021 18:20	Vide Report No.			Station Diary No.
Name Of Informant TAN SWEE SENG	Address 189A RIVERVALE DRIVE #15-1018 SINGAPORE 541189			
ID Type / ID No. NRIC NO / S1313877Z	Contact No. Home/Office: Mobile: 96753825			
Nationality SINGAPORE CITIZEN	Email Address TANSWEESENG58@GMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
PHV driver	Male	63	16/04/1958	Chinese
Institution/School Name	Language English			
Date/Time Of Incident 23/06/2021 14:55	Location Of Incident ORCHARD ROAD			
D 1 () ()				

Brief details.

On the stated date and time I vehicle SLJ3584S was travelling along the stated venue, as the vehicle in front stopped, I gradually follow suit. Suddenly vehicle SME9018K came from behind and hit onto my vehicle's rear portion. The impact was great and I suffered pain on my neck and shoulders. I then proceeded to intermedical kovan clinic to seek treatment and was given 5days MC.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this		
Not applicable	report has been authenticated by Singpass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 23/06/2021 18:20		
Officer In-Charge Of Case:	Classification Of Case:		
Authentication Stamp			

Accident report SG08216O0001



Tokio Marine Insurance Singapore Ltd.

[Company Reg. No: 192300014M] (GST Reg No: M2-0000023-4) 20 McCalturn Street #09-01 Tokio Marine Centre Singapore 069046 T; (65) 6221 6111 F (65) 6221 4355 / (65) 6224 0895 E: Univertoklomarine com.sg W: www.toklomarine.com

A member of the Tokso Marine Group

Certificate of Insurance

TOKIOMARINE INSURANCE GROUP FORM MXI H

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)

Policy No.: 21-MM000315-R00 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

Chassis No.: JHMRU1810GX201088

2. Name of Policyholder

MR TAN SWEE SENG

3. Effective date of the Commencement of Insurance for the purposes of the Act

26/04/2021

4. Date of Expiry of Insurance

25/04/2022

5. Persons or Class of Persons entitled to drive*

The Policyholder

Any person who is driving on the Policyholder'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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use"

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

- 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 except for private hire services
- 4) Use for hire or reward except for (3) and rental by the Policyholder.
- 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION Account: 2316DDA

Insurance Plan: Comprehensive Approved Workshop Plan

SGD 2,000

SGD 2,000 SGD 3,500 SGD 100

Limit for total loss or theft:
Policy Excess:
Own Damage Claims
Excess-Third Party (Sect II)
Young/Inexperienced Driver
Windscreen Excess
Financial Interest:
OCBC BANK LIMITED

(In Addition To Own Damage Claims Excess)

User Name: Tay Pui Leng Katherine -

Printed 22/04/2021