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 12/07/2021 10:31 (SGT) Date of Accident 09/07/2021 22:35 (SGT) Exact Location of Accident Singapore Additional Location Information AYE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

1595

Vehicle Registration Number **SLR9283D**

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TAN CHEN SIANG, NICODEMUS HIDALGO NRIC No SXXXX739D Email Address CLARIS.LIM17@GMAIL.COM Mobile Phone No (Phone) +65-97267897

Alternative Phone No +65-97267897

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180 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 - Claiming third party Vehicle Category Private car Transmission Auto

CC

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο

Policy Number GA419688/1

Cover Note Number

DRIVER

Name of Driver TAN CHEN SIANG, NICODEMUS HIDALGO NRIC No. SXXXX739D

Date Of Birth 07/11/1981 Occupation Indoor Date Of Driving Pass 22/11/2012 Driving experience 8 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-97267897 Alt. Phone Number +65-97267897 Email Address CLARIS.LIM17@GMAIL.COM Address 6 SINARAN DRIVE #10-14 Address complement Postcode 307468 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 Raining Road Surface Wet 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 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 **UNKNOWN** Gender Female PASSENGER 2 Name **UNKNOWN** Gender Female 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 IT WAS RAINING HEAVILY, I COME TO A COMPLETE STOP STATIONARY DUE TO FRONT TRAFFIC SLOW DOWN AND STOP. ALL OF SUDDEN "B" VEHICLE COLLIDED MY REAR. I HAVE FOOTAGE VIDEA AND WE EXCHANGE PARTICULAR. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Nο

REFER TO AQ

Was there any audio recorded?

Reasons for not uploading a video of the accident

Vehicle Registration Number	YP6190P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	GANGADURAI KRISHNAMOONTHY
Passport No/FIN	GXXXX923N
Contact Number	(Phone) +65-85041806
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Lonpac Insurance Bhd
Nature Of Damage	· -
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

SKETCH PLAN

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 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)

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 (all insurers) 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;
 - (iii) 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' lawyersflaw 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

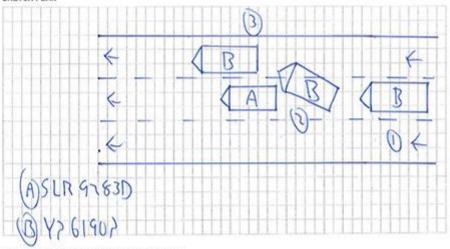
Reporting Centre Personnel's Name: Algy QHK

Version 1.3 | Updated 02 DEC 2020

10/07/21

Cycle & Carriage Industries Pte Ltd

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

it was raining hearily, I come to a complete stop stationary due to front traffic slow down and stop. All of sudden B' relicle collided my rear. I have footage video and me exchange particular

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's

Name: Alan Queh

Cycle & Carriage Industries Pte Ltd

Version 1.3 | Updated 02 DEC 2020



Certificate of Insurance



AXA Insurance Pte Ltd 26 1800 880 4888 (Within Singapore) (65) 6880 4888 (International) (65) 6880 4740 Costomer.care@axa.com.sg P WHILEHALDERING

account number 04069

Motor Vehicles (Third Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third Party Risks and Compensation) Rules. 1960 - Acad Transport Act. 1987 (Malaysia) - Motor Vehicles (Third Party Risks) Rules. 1959 (Malaysia)

Policy details

Folioyholder name

TAN OKEN SIANO MICODEMUS HIDALGO

Comprehensive Flexi

Certificate number Chassis number Engine number

0.4419688/1 WDD2053402F636018 27491031212445

Cover Flannemo NOD applicable Vahiolo registration sumber Period of Insurance

SLRS2ESD from 11/12/2020 to 10/12/2021 (both dates inclusive)
MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD

Persons or classes of persons entitled to drive*

80%

Fittence loan company

(a) The Policyholder
(b) Any Named Driver as stated in the Policy:

1. LIM MEIHUL

(c) 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 Lew or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

Use only for social, demestic and pleasure purposes and for the Policyholder's business.

The policy does not cover- use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

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

EXCESS

Basic Own Damage Excess Windscreen Excess

SGD 400.00 SGD 100.00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
- S\$500 for declared Young and Inexperienced Driver
 S\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium

Additional clauses & endorsements to your policy

I/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).

AXA Insurance Pte Ltd

Authorised signature

important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company, if the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an effence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cop. 189).

The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsoment etc.

AXA Insurance Pte Ltd (199903512M) 8 Sherton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

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