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 15/07/2021 15:56 (SGT) Date of Accident 14/07/2021 19:05 (SGT) Exact Location of Accident Lor 4 Toa Payoh, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJY18A

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Tay Yong Hua NRIC No S1359108C Email Address tayyonghua@icloud.com Mobile Phone No (Phone) +65-96230266 Alternative Phone No +65-96230266

VEHICLE PARTICULARS

Manufacturer Porsche Model Taycan 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

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMPCSNW00137572100 Cover Note Number

DRIVER

Name of Driver Tay Yong Hua NRIC No S1359108C

Date Of Birth 18/02/1959 Occupation Indoor Date Of Driving Pass 14/04/1979 Driving experience 42 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-96230266 Alt. Phone Number +65-96230266 Email Address tayyonghua@icloud.com Address 8 Chuan Garden Address complement Postcode 558527 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 vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name Peter Lim Gender Male 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 Please refer to sketch plan ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SHB9755R Vehicle Manufacturer

Taxi

Vehicle Variant

Vehicle Category

Vehicle Model

Vehicle Colour

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)	<u>-</u>

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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.

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

| Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date
| Time /5/7/2/| Sketch Plan/3/10 | Carpark | Angie Soh

| A - SJY 18 A | B - SH 8 9 7 5 5 R

CAccident report SL03217F0001

AnonA

Describe Circumstances of the Accident	
Describe Circumstances of the Accident On 14-7-2021 (2) 1905hs I was driving along Loron of a Tou Payor towards Loron 1 Tou Payor my ear 57/18 Was quening at the back of Yellow Box shart the from Vehicles to burn night so Il Signalled left to proceed Swarn out of a Sudden, I heard an impact Sound from behind land realised that a tax; 5413 9755R I grazed my car my left side pamenge door	
TON PAYOR TOWARDS LOVERY / TON PAYOR MY CAR STYK	PA
was quening at the back of Yellow box shart the from	1
vehicles to tearn night so Il signalled left to proceed	,
Swaight out of a Sudden, I heard an impact sound	
from behind land realised that a town SHB 9755R	
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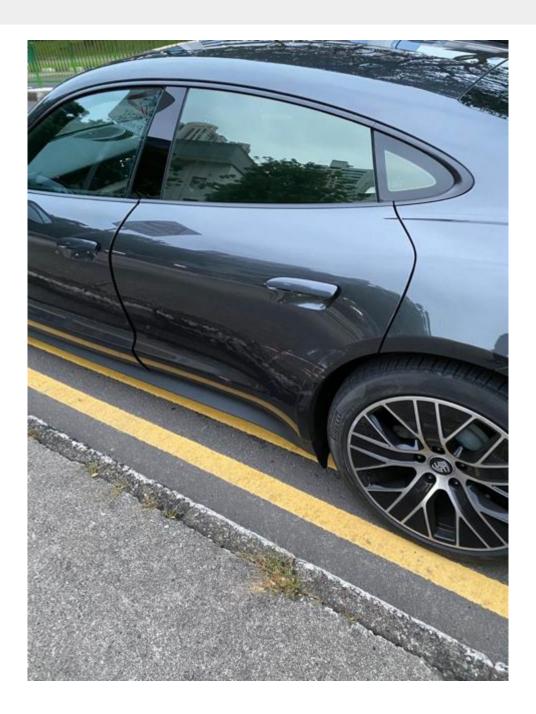
Declaration

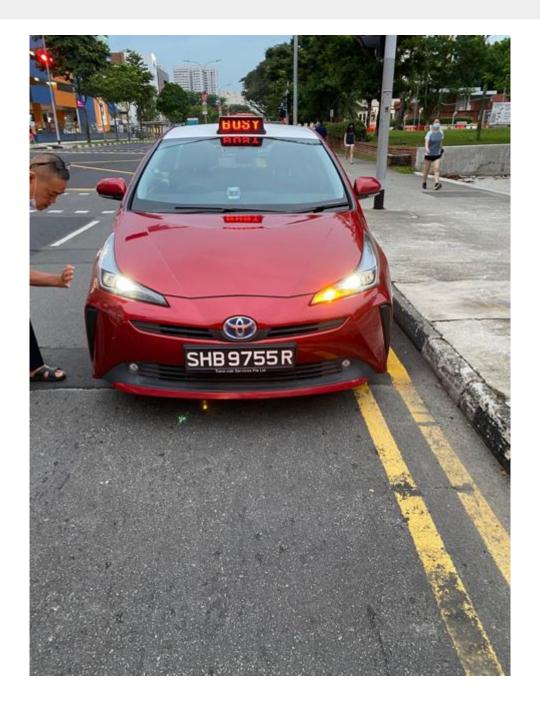
IWe declare the foregoing particulars are true in every respect.

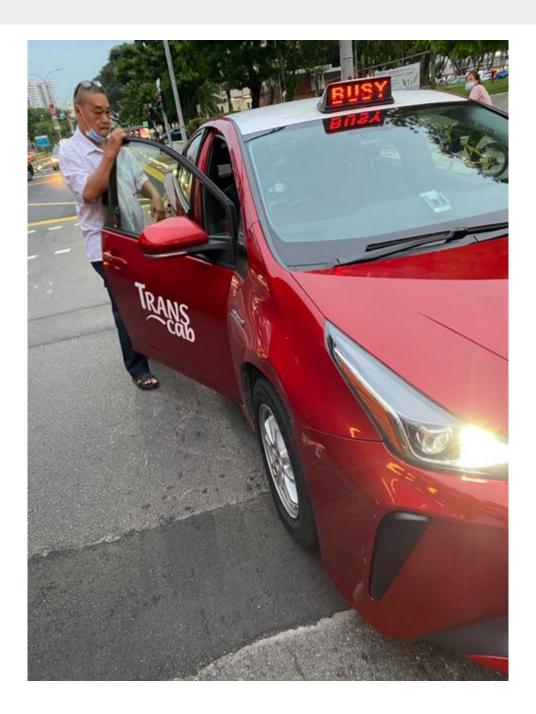
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Angie Soh





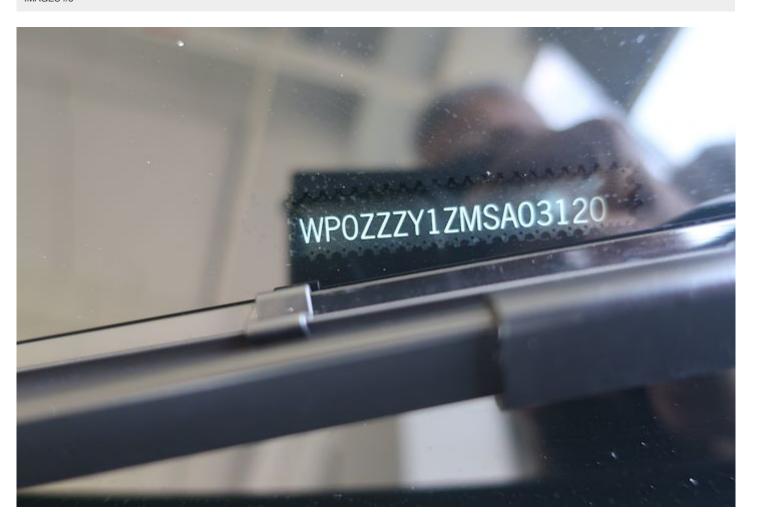






















中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Private Car

MX1/B

CERTIFICATE OF INSURANCE

AN0044A

Vehicles (Third-Party Risks and Compensation) Act (Chapte for Vehicles (Third-Party Risks and Compensation) Rules, 19 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Cov. Type:C

CERTIFICATE No.

DMPCSNW00137572100

Engine No.: EBF039892

Index Mark and Registration

SJY18A

Cha. No.:WP0ZZZY1ZM8A03120

2. Name of Policy Holder

TAY YONG HUA

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment
 (00:00:00)

Named Drivers Ex Sect. 1 Excess Sect. I (Outside Singapore)

\$\$2,000.00 9\$4,000.00

4. Date of Expiry of Insurance

07/07/2022

EX ON WINDSCREEN.

\$\$500.00

5. Persons or Classes of Persons entitled to drive"

As per Named Driver(s) stated below.

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.

TAY YONG HUA

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

The Policy does not cover use for hire or reward fultion driving test 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 the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vetricles (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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Tan Xin Yi Josephine Authorised Officer

@www.sg.cntaiping.com

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) ↑ 3 Anson Road #16-00 Springleaf Tower Singapore 079909

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