ATIONAL Assessment Centr			
LI 1 1 1 1 1 1 1 1 2 1 2 2 6 2 2 1 1 6 1 1 C 6 1 1 1	e Services, willsados.	SUBS 718 K000	6
Dute In: 20 00 2021 18' 24	Jep desemblon	· Dute & Tino Completed	. Done by
Rel'No: x MAAAU DUD	SAS c-Illing		1.0
Vel No. (1877) (1878)	E-inal/(b) who shir, Alo shir,		1 P
120X	1-Motor Claim Yorin		
200 (20)	1-Motor W/O (Williagt OD	Thrs. TP (brs)	10
OD: TP) Reporting Only	1	I wanted	
	I-Photo Uploaded	, .	
TP Insurer:	AssessmenUSurvey Repor		
A SHE WAS THE PROPERTY OF THE	. Ass't Report by Pax / Hay	Tol:	Paxi)
rotorrod Witsh I ING Vasid it Mirab / OM: (20)222P ' INC		
P Hindenthysi Veh Nor (1)	BU 1874 - 1 1111	Teli)
Owner/Driver: (Perlodi () Cover Typo: (,)
	. Data:	-7711101)
Confirmed by : (Dine Her Sintus (WO): No	0-20%; P: 21-79%. P: 80	-1001/1
Insured/Driver Liability: (%) Year of Registration: (%)	Werrentyl YES ()/NO		-
Brocasi (\$) Londing: \$1			Carling Company
	对方,以外外的自己的现在分词,	则是原则积极的对象的产生	SALEST MILLS
) Walk-In Customar i Customors Ir	nformation articly confidential	& Shierly NO holor of report)(1
) 'rotal Loss Case to a-mail Yas	TANA ALLCOUNTERA	The state of the s	1
Drive-in ()/Towed-in (); Invo	ion Ara() / No (Towing Col(WALKER BURNERS
		WAR THURSTON TO THE	ALCONOMIC TO THE PROPERTY OF T
1) While to Librations ()	/ Courtsy Cur (')		1
2) OC Chook / Post Reputr Inspection	()		
) Uplood Resurvey Photo [Repuir Cost>	2,2000]	11 1	
Injurý i	1	CARLES MANAGEMENT CONTRACTOR CONT	
			(SALIUP WOOD 13 TO 1
5.2.15.8.60.17.8.16.60.20.13.11.8.10.29.8.8.10.5.8.419.8.8.4.02-8.10.7.1	ZZZYNKI POZANANA ZA ZA ZA ZAZA ZAZA ZAZA ZAZA ZAZ	+	
	The second secon		
			t 1
	1		
XA2W3632		Apaldant lupprung (\$30)	
XA2W3632	THE HEAD TO SEE THE STATE OF TH	Demnis Vienteure of (\$100)!	\$10213
XA203652	THE HEAD TO SEE THE STATE OF TH	Demnis Vienteure of (\$100)!	\$10213
river/Owner:	3) PT 1 4) PT 1 5) PT 1 4) PT 1 10 PT 1	Dennys (Issuence of (\$100)) Ollow-Through Burvey (Ite-curvey) ollow-Through Burvey (Ite-curvey) Tellomation HAT Only (well of the curvey)	1120 1120 210 210 330
river/Owner:	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Dennys Armsenuel (\$100); Ollow-Through Burvey (Its-urvey) ollow-Through Burvey (Its-urvey) Almhirestinal MAT Dinky (wellod) The lumpston The Lumpston	\$10212
river/Owner: Ontage No:		G Additional Serviceste Graditional Serviceste Graditional Serviceste Graditional Serviceste	330 h 2003 330 2130 3130
Tiver/Owner: ortenet No: armäged Pordon:	3) FT 11 3) FT 11 5) TV 11 11 FT 11 11 FT 12 11 FT 12 12 FT 12 13 FT 14 14 FT 12 15 FT 14 16 FT 12 17 FT	Demy's Airstantol (\$100); U Demy's Airstantol (\$100); U owlny F: ollow-Through Burvey (Ferrary) ollow-Through Burvey (Ferrary) ollow-Through Burvey ollow-Through Burvey ollow-Through Burvey ollow-Through Burvey ollow-Through Burvey ollow-Through Burvey ollow-Through ollow-Through ollow-Through ollow-Through ollow-Through Cautlety Caf / Tpl Allow-Through Cautlety Caf / Tpl Allow-Through Cautlety Caf / Tpl Allow-Through ollow-Through	\$100 \$100
NATION OF THE PORTION	5) F7 1 5) F7 1 5) F7 1 5) F7 1 5) F7 1 6) T1 1 7) K1 1 1) K1 1 0) L1 1) K1 1 1) K	Demys Airesensed (\$100); Demys Airesensed (\$100); Ollow-Through Burvey (The curvey) Almhinestinal HO Only (Wellod) The lameston Oleo DA + BMRT Burvey C Adollond Scrytopse Caustery Cast Tpi Allows now Here it Constaline than	\$ (05/45) \$ (120) \$ (100) \$
NATION OF THE PORTION	3) FT 1 3) FT 1 5) TT 1 10 TT 1 11 HT 0 11	Demy's Airstance (\$100); Demy's Airstance (\$100); owley Fig. ollow-Through Burvey (fig.eurvey) ellow-Through Burvey (fig.eurvey) ellow-Through Burvey (fig.eurvey) ellow-Through Burvey (fig.eurvey) ellow-Through Burvey ellow-Through Burvey ellow-Through Burvey ellow-Through Burvey ellow-Through Burvey ellow-Through Burvey ellow-Through Ellow-Through ellow-Through Income Ellow ellow-Through Ellow-Through ellow-Throug	30 SAVING 30 SAV
Oriver/Owner: Cortage No: Ournaiged Pordon: OG Checked by (Engr-In-Churgo):	5) F/1 (1) F/1 (2) F/1 (3) F/1 (4) F/1 (5) F/1 (7) F/1	Denny & Albert me of (\$100); Ornay & Albert me of (\$100); Owlow Through Burvey (Resurvey) Almhur trins that HAT Duly (Wellow) Chiphellon Burvey Chelley Car / Tpi Allows mus Espelt Concides than (You Upsit Inspection (You	20 21 21 21 21 21 21 21 21 21 21
Approver/Owner: contract No: Outrasified Portion: OC Checked by (Engr-In-Churgo): Approver Churgo):	5) F/1 (1) F/1 (2) F/1 (3) F/1 (4) F/1 (5) F/1 (7) F/1	Denvy Airstand (\$100); Denvy Airstand (\$100); owlny F. ollow-Through Burvey ollow-Th	\$100 \$100 \$100 \$100 \$100 \$200 \$100 \$200 \$100 \$200
Oriver/Owners Contract No: Outrailed Portion: OG Checked by (Engr-In-Churge):	5) F/1 (1) F/1 (2) F/1 (3) F/1 (4) F/1 (5) F/1 (7) F/1	Denny & Albert me of (\$100); Ornay & Albert me of (\$100); Owlow Through Burvey (Resurvey) Almhur trins that HAT Duly (Wellow) Chiphellon Burvey Chelley Car / Tpi Allows mus Espelt Concides than (You Upsit Inspection (You	310 310 310 310 310 310 310 310
Approverion or the contract No: Onthis god Portion: Of Checked by (Engr-In-Charge): Approveries of the contract of the cont	1 1 1 1 1 1 1 1 1 1	Denny & Albert me of (\$100); Ornay & Albert me of (\$100); Owlow Through Burvey (Resurvey) Almhur trins that HAT Duly (Wellow) Chiphellon Burvey Chelley Car / Tpi Allows mus Espelt Concides than (You Upsit Inspection (You	310 310 310 310 310 310 310 310



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.

- Any false reporting may be referred to the Police for investigation.
 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.
 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 20/08/2021 18:21 (SGT) Date of Accident 20/08/2021 12:05 (SGT) Exact Location of Accident Tampines Street 83, Singapore Additional Location Information **TOWARDS TAMPINES AVENUE 8** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

2754

Vehicle Registration Number GBF6489D

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CRASHER SERVICES Company Reg No 5XXXX767M Email Address bryanbeng24@gmail.com Mobile Phone No (Phone) +65-98516488 Alternative Phone No +65-98516488

VEHICLE PARTICULARS

Manufacturer

Model Hiace Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Commercial vehicle Transmission Manual CC

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number 2070178099 Cover Note Number

DRIVER

Name of Driver **GWEE YU WEE CORNELIUS** NRIC No SXXXX415C

Date Of Birth	07/10/1980
Occupation	Outdoor
Date Of Driving Pass	23/07/2014
Driving experience	7 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-98516488
Alt. Phone Number	(Filotie) +00-360 10486
Email Address	havenhore 24@!!
Address	bryanbeng24@gmail.com
Address complement	BLK 896 TAMPINES STREET 81 #06-884
	-
	520896
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	DIRECTOR
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	•
modification of other vehicle owned by briver	•
CENERAL INFORMATION OF THE ACCIDENT	
GENERAL INFORMATION OF THE ACCIDENT	
Time of Assident	
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	2
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)	1
soliciting/offering accident claims assistance?	No
	140
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	
English and the state of the st	
ATTACHMENT(S)	
A	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	
Vehicle Registration Number	GBD2382P
Vehicle Manufacturer	
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	9
Contact Number	<u></u>
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 Gender Phone No Address	GWEE YU WEE CORNELIUS Male (Phone) +65-98516488
Address Complement	-
Post Code	12
Approximate Age Years Old	·-
Injuries Sustained	
Injured person in which vehicle?	SLIGHT INJURY
	GBF6489D
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.
- 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 withholding 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.
- 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.
- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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
- (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.

CRASMER SERVICES REG NO. 53321767M

Oriver's Signature (If driver is not the

Policyholder's Signature / Date & Time

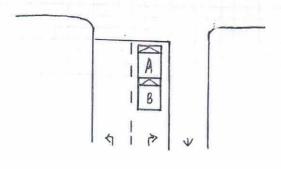
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

tampines street 83 towards Tampines Ave &

Vehide A: GBF64890 Vehideb: GBD238>P



Describe Circumstances of the Accident
on the stated date & time, I, vehicle AL GBF6489D) was stationary at the stated
location on the Lane 2 as the traffic light was still in red. Suddenly, I felt an impact from the
rear portion of my which. I alighted & realised which & (GBD 2382P) collided onto the near porti
the rear porti
of my vehicle causing damages.
The control alliants.
2.
2

Declaration

We declare the foregoing particulars are true in every respect.

CRASHER SERVICES REG NO. 53321767M

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

	Date of Accident	20 8 20x Accident Wines 1266har
1	Accident Place	Tamping (Street D.) (24-HR-FORMAT)
	Vehicle Reg. No (Car plate No.)	Tampines Street &3 towards Tampines Ave 8 GBF6489D Watistan Colored Townships Ave 8
	Insurance Company	ALA
	Name of Registered Owner	_1010y 110. <u>2076128099</u>
	ID of Registered Owner	: Company / Individual Crasher Services
	Barrior O Mile!	: Co Reg No: 53321767m Owner's NRIC No:
	DEWENNESS	: Co Contact No: Owner's Contact No; 98516488
	DRIVER'S Name	: Grusse Yn Wes Cornelius DRIVER'S NRIG No: 8803641BC
	DRIVER'S Date of Birth	DRIVER'S License Pass Date 33 301 2014
	Relationship bet. Owner & Driver	Spouse Parents Children Sibling Employee Others: Director
	DRIVER'S Address	81k 896 Tampines Street B1 # 06-884 Singapore 526896
	DRIVER'S Contact No./ Alt No.	11) 4851 6488 2)
	DRIVER'S Occupation	4)
	Email Address	; INDOOR OUTDOOD (eg. working inside or outside of an ofc)
	Weather & Road Surface	: CLEAR & DRY RAINING & WET AFTER RAIN & WET
*:	Reporting Type	
	Number of Pessengers (including Dr Was the accident reported to the poli Was there any video Captured by car	Passenger Name: Gender: M/F Camera: YEST NO Any Injuries: YES /-NO Injuried Name: Gravel Yu have Corpoling
	maner brushage for Autou Asprofe Mai	s being used at the time of accident; Private use L Work purpose
	<u> </u>	ner Party Driver's Particulars (if any)
	-Vehicle Reg No: GBD 23823	Vehicle Ren No.
	Kehiste MakelModel	
	Name DRIVER:	Name DRIVER:
	FRIVER'S Contact & add	
		DRIVER'S Contact & add:
	Vehicle Reg No:	r Party Driver's Particulars (if any)
	Vehicle Makel Model	· ·
	Name DRIVER	
	IC No DRIVER.	
	DRIVER & Consult & and	The second secon
		트립스 등은 '중 Contest 중 호선소



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Crasher Services

Period of Insurance

: 24 Jan 2021 To 23 Jan 2022 : 1KD2610926

Engine No. Chassis No.

: KDH2015022089

Vehicle No.

: GBF6489D

Policy No.

: 2070178099

Endorsement No.

Issued Date : 12 Jan 2021

ABOUT THE COVER

: TOYOTA HIACE VAN 1.5 ton [Van]

Engine Capacity/Tonnage : 1.5 Tonnage Driver Restriction

Sum Insured : Market Value

First Year of Registration : 2017

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

: NA

a) Any person who is driving on the Policyholder's order or with their permission.
 b) This Policy will indemnify the Policyholder or any authorised driver only if helsho 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" driving experience.

Age Condition

: All Age Condition

Limitation as to use':

1) Use in connection with the Policyholder's business.
2) Use for the carriage of passenger (either than for hire or reward) in connection with the Policyholder's business.
3) Use for social, domestic or pleasure purposes. The Patry does not cover a) use for hire or reward, driving button, driving best, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a machanically propelled vehicle o) use for any purpose in connection with Motor Trade.

Loss Of Use (7 Days) Commercial Auto

* Limitations rendered inoporative by Section 5 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysta) and Road Transport (Amendment) Act 2019, are not to be included under those headings.

EXCESS

Section 1

Fire - SC Own Damage - \$600 Theft - SO Flood Cover - SO

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

Gwee Yu Wee Cornellus - \$600 (Own Damage)

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

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers, Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop. For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hodine at +65 d338 6200. Alternatively, You may refer to AIG website www.aig.sq or AIG SG Michie App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

I/We hereby certify that the policy to which this Certificate of Insurance relates is assued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0502263000

SAFE HARBOUR ASSURANCE AGENCY

BLK 208 HOUGANG ST 21 #04-207

SINGAPORE 53020B

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Pusy Khao Got

3

Lid.

TEO Pio.

品

NG