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 31/08/2021 11:37 (SGT) Date of Accident 30/08/2021 12:30 (SGT) Exact Location of Accident Singapore Additional Location Information NORTH SPRING BIZHUB LEVEL 3 DRIVEWAY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGP3132R

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner FOONG WENG SUM NRIC No. SXXXX185H Email Address VINCENT@MAYTATPLASTICS.COM.SG Mobile Phone No (Phone) +65-91093227 Alternative Phone No +65-91093227

VEHICLE PARTICULARS

Manufacturer Subaru Model FORESTER 2.0XT CVT AWD SR 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 - Claiming third party Vehicle Category Private car Transmission Auto CC 1998

INSURANCE COMPANY

Name of Insurance Company **EQ Insurance Company Ltd** Type of Coverage Comprehensive Fleet Policy Policy Number DMPPHQ21-003210 Cover Note Number 28/04/2021 - 27/04/2022

DRIVER

Name of Driver FOONG WENG SUM NRIC No. SXXXX185H

Date Of Birth 23/08/1973 Occupation Indoor Date Of Driving Pass 14/12/1992 Driving experience 28 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-91093227 Alt. Phone Number +65-91093227 Email Address VINCENT@MAYTATPLASTICS.COM.SG Address BLK 204C COMPASSVALE DRIVE #10-427 Address complement Postcode 543204 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 Collided into Parked Vehicle Weather Conditions Clear Road Surface \/\e_t OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? 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 **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO THE ATTACHED SKETCH PLAN BY DRIVER. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GBK8166X

 Vehicle Registration Number
 GBK8166X

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Commercial vehicle

 Name of Driver
 NG YI FA, GABRIEL

 NRIC No
 SXXXXX693J

 Contact Number

 Address

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

WITNESS DETAILS

WITNESS 1

 Name
 CHAN CHEE WAH

 Phone

 Email

 WITNESS 2
 WEI ZHENG ZHONG

 Phone

 Email

 WITNESS 3
 FOONG WENG KUAN

Phone - Email -

ly Vehicle A: SGP3132	Time: 12.30 PM Location Vehicle B: GRK \$166	× Vehicle C:	driven
KETCH PLAN			
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licyholder's Signature te & Time: ひんをし こし	Oriver's Signature	Reporting Centre Personnel's	Signature
	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:	
10-30	WALL OF FRIENDS		UMAINOTON COMPANY

SKETCH PLAN

IMPORTANT NOTICE

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- 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 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.

Policyholder's Signature Date & Time: 31/08/24

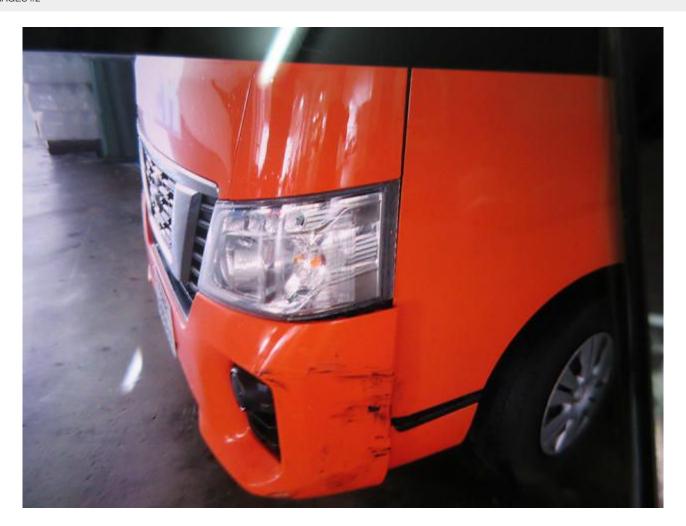
10.30

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

shift would have at











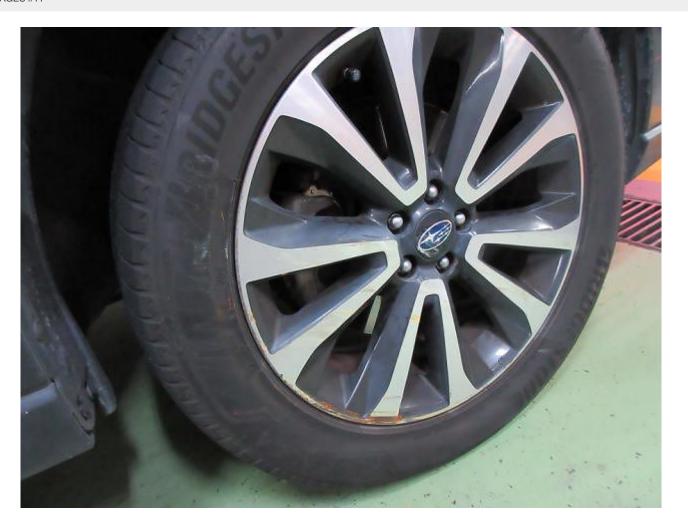




















EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA) THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES(THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR

Comprehensive Premier

Certificate No.: DMPPHQ21-003210

1. Index Mark and Registration Number of Vehicles SGP3132R

2. Name of Policyholder

FOONG WENG SUM

3. Effective Date of the Commencement of Insurance for the purpose of the Act

4. Date of Expiry of Insurance

27/04/2022 5. Person 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 permission permission

EQI Motor Accident Hotline

Comprehensive Plan - Any Workshop

Form: MX2 Excess:

YEID

Insured/Named Driver:

Additional:

Unnamed Drivers:

6311 3211



\$\$600.00

S\$3,000.00

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

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

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials 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 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.

IWE 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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: HL Bank

A000020/Timothy Tan Sheng Meng Date of Issue: 20/04/2021 16:11

Authorised Signatory

EQ Insurance Company Limited

Exp No.: DMPPHQ20-002874

Ply A Member of Chystate

Witnesses For Accident Between SGP3132R And GBK8166X.

To whom It might concern

Date:

30/8/2021

We hereby witness the accident between SGP3132R and GBK8166X.

The driver of GBK8166K admitted that he crashed into the SGP3132R on 30/08/2021 at around 12.30pm.

The supervisors/business owners of GBK8166X was also presented after the accident.

Witness 1

Name: Chan chee Wah WP number: F7960016N

Signature:

Witness 2

Name: Wei Zheng Zhong WP number: G8544514L

ulai ahana ahono

Signature:

Witness 3

Name: Foong Weng Kuan NRIC: \$8637686E

Signature: