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1.



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

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. 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 04/10/2021 17:46 (SGT) Date of Accident 03/10/2021 11:30 (SGT) Exact Location of Accident Singapore Additional Location Information CTE TOWARDS CITY Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKM7802H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TENG BEE KIAT NRIC No SXXXX040G Email Address ETSYBARK@YAHOO.COM.SG Mobile Phone No (Phone) +65-98461553 Alternative Phone No (Office) +65-98461553

VEHICLE PARTICULARS

Manufacturer Toyota Model Wish 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 1797

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number 1900103158-02 Cover Note Number

DRIVER

Name of Driver TENG SHENG YU EUGENE NRIC No SXXXX867D

Control of the Contro	
Date Of Birth	29/10/1994
Occupation	Indoor
Date Of Driving Pass	18/07/2013
Driving experience	8 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	The state of the s
Alt. Phone Number	(Phone) +65-97653077
Email Address	FTOVPARICOVALIDO COM CO
Address	ETSYBARK@YAHOO.COM.SG
	170 LENTOR LOOP
Address complement	#08-01
Postcode	789099
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	140
Temple Hegien and Hamber of Carlet Verificia Owned by Differ	
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Chain Collision
Weather Conditions	N-SAN
Road Surface	Clear
Trodd Garlage	Dry
OTHER INFORMATION	
West and the state of the state	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
PASSENGER 1	
Name	LILIAN CHANG
Gender	LILIAN CHANG
	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	
PLEASE REFER TO CIRCUMSTANCES OF ACCIDENT	
ATTACHMENT(S)	
Are accident photos available for attachment?	V
Was there any video captured by Car Camera?	Yes
Was there any video captured by Car Carriera?	No
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	
Vehicle Registration Number	SML2846X
Vehicle Manufacturer	₹1
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)	_

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJQ4248T
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLE9445Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	-
Contact Number	8=
Address	-
Address complement	_
Postcode	-
Insurance Company Name	100 545
Natura Of Daniera	
	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	_
Phone No	_
Address	
Address Complement	-
Post Code	_
Approximate Age Years Old	_
Injuries Sustained	-
Injured person in which vehicle?	
Were seat belts worn?	_
Was this injured conveyed to hospital by ambulance?	_

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 <u>truthful</u> and <u>accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

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 & Time	Driver's Signature (If driver is not the policyholder) / Date			
Sketch Plan		Jowarels	Personnel		
<u> </u>	DKAK	BKC		-	
4	- Continued	-			
—	AND THE PERSONNEL SECTION AND THE PERSONNEL			6	
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Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Date of Accident	:3 10 300) Accident Time: 11-3 Cant (24-HR-Format)
Accident Place	: CTE towards City
Vehicle. No. (Car Plate No.)	:SKM 7802 H Make/Model: To Yola Wish.
Insurace Company	: 1816 Policy No: 1900103158-02
Owner or Company Name /IC No.	Teng Bee Kiaf S14980406
Owner or Company Contact No.	Owner's Hp 9846 1553 Company Tel
DRIVER'S Name / IC No.	: & Teng Shang Yu Eugene 39441867 D.
DRIVER'S Date Of Birth	: 39 10 1994 DRIVER'S License Pass Date 18 Jul 2013
Relationship of Owner & Driver	: Spouse \ Parents \ Phildren \ Sibling \ Employee \ Others:
DRIVER'S Address	170, Center Coop #08-01 (789099)
DRIVER'S Contact No./ Alt No.	:1) 9765 3077 2) -
DRIVER'S Occupation	INDOOR OUTDOOR (e.g. working inside or outside office)
Email Address	etsybark @ yahoo.com.sg
Weather & Road Surface	CLEAR & DRY RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only Claim Other Party Claim Own Insurance
Number of Passengers (Including D	Driver):
Was there any video Captured by c Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	as being used at the time of accident: (Private use \ Work purpose
Other	Party Driver's Particular (if any)
Vehicle No: SML 284	6 X (B) Vehicle. No: 8JQ 4248 T (C)
Vehicle Make\Model:	Vehicle Make Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:
* NEW - Passenger's name Lilian Chang F	& gender: SCE 9445 Y (P)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

040G

Vehicle Details

Vehicle No.:

SKM7802H

Vehicle to be Exported:

No

Intended Deregistration Date:

30 Nov 2021

Vehicle Make:

TOYOTA

Vehicle Model:

WISH 1.8X A

Primary Colour:

Black

Manufacturing Year:

2009

Engine No.:

2ZRA337854

Chassis No.:

ZGE200012251

Maximum Power Output:

106.0 kW (142 bhp)

Open Market Value:

\$21,599.00

Original Registration Date:

23 Jul 2009

First Registration Date:

23 Jul 2009

Transfer Count:

1

Actual ARF Paid:

\$21,599.00

Intended PARF Rebate Details

PARF Eligibility:

Forfeited

PARF Eligibility Expiry Date:

\$0.00

PARF Rebate Amount:

Intended COE Rebate Details

interiaca COL Repart Det

31 Mar 2029

COE Category:

B - Car (1601cc & above)

COE Period(Years):

COE Expiry Date:

10

PQP Paid:

\$33,018.00

COE Rebate Amount:

\$24,213.00

Total Rebate Amount:

\$24,213.00

The information contained herein is correct as at 04 Oct 2021



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : TENG BEE KIAT

Period of Insurance

: 23 Jul 2021 To 22 Jul 2022

Engine No. Chassis No. : 2ZRA337854

1 ZGE200012251

Vehicle No.

SWMTRO2H

Policy No.

1900103158-02

Endorsement No.

Issued Date

1 16 Jun 2021

ABOUT THE COVER

Make/Model

TOYOTA WISH 18

Engine Capacity/Tonnage 1,798 00 CC Driver Restriction

. NA

Sum Insured | Market Value

First Year of Registration

Off Penk Car No

Insuring with COE/PARE ... No

Person or Classes of Persons Entitled to Drive*

Vice have to pay an existence success \$5,000 as "Vipung endow marginalization Division Excess" ("Vipung & couling or visual than 2 years diving expensions).

Age Condition

All Age Condition

Mileage Condition Unlimited Mileage

Limitation as to use*

Use cody for extent discretes, and placeton exections and for the Policyholder's Euleness.
This Policy dies and source use for his or treated discrete policy policy and executing and equal trading. For campage of goods offer their sections of one purpose, in connection with Mode Trade.

Losk of Use 1500cc - 1600cc Optional

* Employed conductor inspectation by Section 8 of the Motor Vehicles (Third-Party Raks and Compensation) Act (Cap. 1895 Decision 9) of the Road Tourspool Act 1967 (Malaysian and Prince) Acquired and 2019, are not to be induced under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$600 Thirt - \$0 Food Cover - \$600

Section 2 Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

CHANG NING CHOIC LILIAN - \$100 (Own Damage), \$600 (Flood Cover) TENG WEI XUAN CHERYL - \$600 (Own Damage), \$600 (Flood Cover) TENG SHENG YIJ EUGENE - \$600 (Damage), \$600 (Flood Cover) TENG BEE KIAT - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres: All Authorised Repaires (For starms island repairs Any account repairs to the Vehicle must be served out by one of our Authorised Repaires; vivines the first 3 years of our registration of the Vehicle in Singapore. You have the option of favoing the account repairs carried out at the Sale Agent's account, For other Approved Reporting Centres A G Authorised. Requiring served in 14 focus accident emergency horizon active at 45 6336 8200. Afternatively: You may select to A/G without a 55 0 kind Age. Samply search and download "AkG Son Internatively: You may select to A/G without a 55 0 kind Age. Samply search and download "AkG Son Internatively: You may select to A/G without a 55 0 kind Age. Samply search and download "AkG

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

We havely northy that the policy to which the Centicular of projections related is natural and coordinate with the provisions of the Notice Vehicles That Plant Risks and Compensation) Act (Cop. 189), Part W of the American Transport Act. 1887 (Malaysia). Road Transport (American and Autor Vehicles That Pury Malaysia).

0504670000

MEVIE YAME

18 CEYLON FOAD WITGE

SINCAPORE 429748 EP. KGONLFORTITUDE

Underwritten by AuG Asia Pacific traurance Pte Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature,