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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.

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 13/10/2021 15:23 (SGT) Date of Accident 12/10/2021 13:12 (SGT) **Exact Location of Accident** Ang Mo Kio Ave 4, Singapore Additional Location Information Country/State of Loss

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKD7800K

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner KHENG YEW TRADING PTE LTD Company Reg No 1XXXXXX377R Email Address wendyseah@khengyew.com.sg Mobile Phone No (Phone) +65-96640603 Alternative Phone No +65-96640603

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180 Variant Exact purpose for which vehicle was being used at time of Employment Are you claiming under your own insurance policy for repair to No - Reporting only your vehicle? 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 DMPCSNW00187592000 Cover Note Number

1597

DRIVER

Name of Driver SEAH SZE ING WENDY NRIC No SXXXX550B

Date Of Birth 19/02/1978 Occupation Indoor Date Of Driving Pass 01/11/1997 23 YEARS AND 11 MONTHS Driving experience Gender Female Mobile Number (Phone) +65-96640603 Alt. Phone Number Email Address wendyseah@khengyew.com.sg 318 UPPER EAST COAST ROAD #03-08 Address Address complement Postcode 465521 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 Clear Road Surface Dry 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? No Was any injured conveyed to hospital by ambulance? 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 FRIEND 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 PLEASE REFER TO SKETCH PLAN ATTACHMENT(S) 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 VEHICLE PROPERTY 1** Vehicle Registration Number **GBC9332T** Vehicle Manufacturer Toyota Vehicle Model Hiace Vehicle Variant Vehicle Colour

Commercial vehicle

Vehicle Category

Name of Driver	IVAN ONG ZHEN HOU
Passport No/FIN	GXXXX344R
Contact Number	(Phone) +65-93661998
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	
Details of property damaged in accident	:=
No. Of Passenger (Including Driver)	·=

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.
- 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)

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.

KHENG YEW TRADING PTE. 234, Balestier Road Singapore 329698 Tel: 62528622 / 62521026	
Policyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder)

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A) SKD (800K

B) GBC 93321

Describe Circumstances of the Accident
I was driving along thom we kin the 4 at the time of inciclent and braked to stop my vahide at the traffic light The other vehicle came on from the back and hit the rear of my car. The impact caused my car to move forward.
braiced to stop my vahide at the traffic light The other venicle came
on from the back and hit the rear of my car, the impart caused my car
to move forward.

Declaration

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

KHENG YEW TRADING PTE. LTD.
234, Balestier Road
Singapore 329698
Tel: 62526622 / 62521026

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

Witnessed by Reporting Centre

Personnel

Policyholder's Signature / Date & Time

Missell 5001

ACCIDENT STATEMENT

ACCIDENT DATE: (12/10/12/1) (DD/MM/YYYY), TIME: (13:12) (HH:MM)
LOCATION: Ang me kis Ave 4
DETAILS OF VEHICLE GIVEHICLE NUMBER: SED 7800 K DINSURANCE COMPANY: CHIMA TAIPING CIPOLICY NUMBER:
d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT) B)MAKE & MODEL: MOVING SOME COMPRE F)TYPE: (SALOON / COUPEY MPV / VAN / LORRY / MOTORCYCLE / OTHERS) B)VEHICLE CATEGORY: (PRIVATE / COMMERCIAL) / MOTORCYCLE) h)PURPOSE OF USING AT ACCIDENT TIME: COMMERCIAL (
1) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YES/190) IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY) 2. INSURED / POLICY HOLDER A) NAME: (Chang Yew Trading Pfc Hd (MALE / FEMALE) b) NRIC/FIN/PASSPORT: (8820537) CONTACT:
Friend Who of passenges Continue to 3.d if DRIVER ALSO POLICY HOLDER Briver Chicluding driver) Temale (2) Chadress: 318 Appen East Coast Road #03-08, SC465521)
*d) DATE OF BIRTH: (
Ho of passanger of Vehicle Number: GBC 9332T MODEL: TOXOTA (Including driver) b) DRIVER'S NAME: I an Ong Then How. (Including driver) b) DRIVER'S NAME: G27 60344 R. CONTACT: 9366 1998. (Including driver) f) Vehicle Number: MODEL: (Including driver) f) NRIC/FIN/PASSPORT: CONTACT:: (Including driver) f) NRIC/FIN/PASSPORT: CONTACT::

email = wendy seah @ Knengyew. wm.sq



中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX4E

SŅ

DR09990

Cov. Type:C

CERTIFICATE OF INSURANCE
otor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules., 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00187592000

Engine No.: 27182030370767

Cha. No.:WDD2043492F792776

1. Index Mark and Registration

SKD7800K

Number of Vehicle

2. Name of Policy Holder

KHENG YEW TRADING PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

28/12/2020

Named Drivers Ex Sect. I

\$\$750.00

(00:00:00)

Additional Ex Other than Named Drivers: Ex Sect. 1 - Age <= 25

\$\$3,000.00

4. Date of Expiry of Insurance

27/12/2021

Ex Sect. I - Age >= 26

\$\$500.00

* Age as at date of accident EX ON WINDSCREEN.

S\$100.00

Persons or Classes of Persons entitled to drive* 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 Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition 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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

* 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.

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:

Catherine Thia

Authorised Officer

Authorised Signatory

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

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