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	16/10/2021 13:48 (SGT)
Date of Accident	15/10/2021 22:10 (SGT)
Exact Location of Accident	Sembawang Road, Singapore
Additional Location Information	SEMBAWANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN3804A

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHENG NAM SENG (ZHUANG NANSHENG)
NRIC No	SXXXX717J
Email Address	yokewei97@hotmail.com
Mobile Phone No	(Phone) +65-98203031
Alternative Phone No	+65-98203031

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1497

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5122580684
Cover Note Number	-

DRIVER

Name of Driver	PANG YOKE WEI
NRIC No	SXXXX619Z

Date Of Birth	25/04/1997
Occupation	Indoor
Date Of Driving Pass	20/12/2019
Driving experience	1 YEAR AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98583075
Alt. Phone Number	-
Email Address	yokewei97@hotmail.com
Address	BLK 528 CHOA CHU KANG ST 51
Address complement	#10-349
Postcode	680528
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
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	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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SALAY
Gender	Female

PASSENGER 2

Name	LI QING
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	10 UBI AVENUE 3 SINGAPORE 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED POLICE REPORT.

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA4100T

Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	PANG YOKE WEI
Gender	-
Phone No	(Phone) +65-98583075
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMN3804A
Were seat belts worn?	No
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 afforded.

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 presented 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/vetting 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 third parties by delivery of the same as well as on the external cover of envelopes/postal 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/vetting 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/vetting firms) which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Repairing Centre Personnel

Sketch Plan

Refer to sketch plan attached.

Describe Circumstances of the Accident

Refer to police report attached

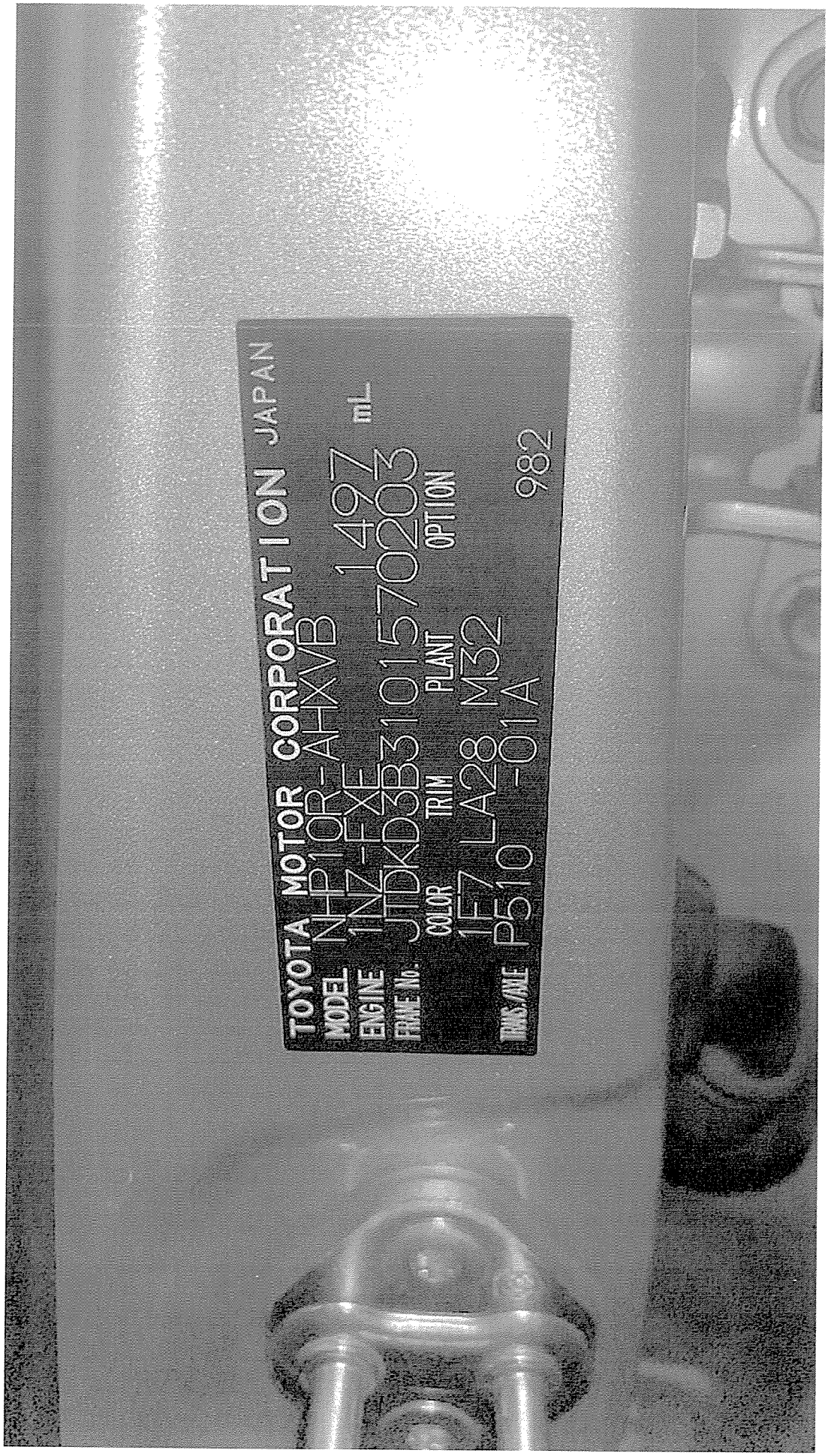
Declaration

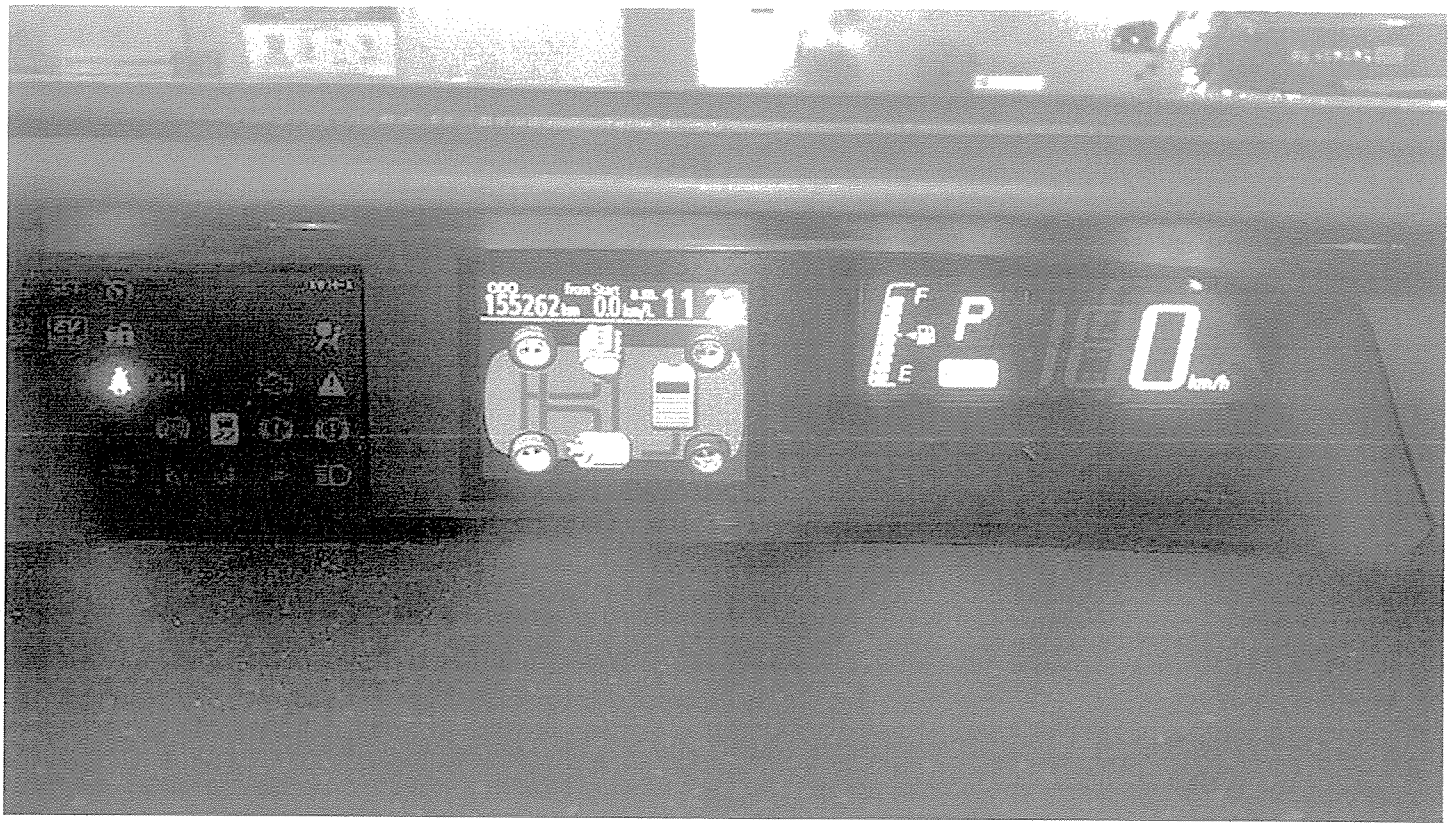
We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel


TOYOTA MOTOR CORPORATION JAPAN
MODEL NHP10R-AHXVB
ENGINE 1NZ-FXE 1497 mL
FRAME No. JTDKD3B310157023
COLOR 1F7 TRIM LA28 PLANT M32 OPTION
TRANS/AXLE P510 -01A 982


ODO
155262km
from Start
0.0km
11
F
E
P
0
km/h

SMN3804A

SMN3804A

SHN5804A

SHN5804A

SMN 3804 A
SMN 374X

SINGAPORE POLICE FORCE

T/2021/016/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No: T/2021/016/7008

CONTINUATION OF REPORT

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	TAN SEOK LUANG			ID No.	S1568523D
Related Vehicle	SHA4100T (Car)			Contact No.	93678022
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL	
No. of Days granted Medical Leave	NIL		Degree of	NIL	
Driver					
Name	PANG YOKE WEI			ID No.	S9713619Z
Related Vehicle	SMN3804A (Car)			Contact No.	96583075
Hospital/Clinic	DRS KOO & CHOO MEDICAL CLINIC PTE LTD			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	16/10/2021		Date	16/10/2021	
No. of Days granted Medical Leave	03		Degree of	Slight	

Brief Details:
On 16/10/2021 at about 2210 Hrs,I was driving my Vehicle SMN3804A along Sembawang Road towards Gambas Ave with 2 passenger onboard.While I was travelling straight at the centre lane of 3rd lane Road near to the junction of Sembawang Road and Yishun Ave 3,suddenly a Taxi SHA4100T dash out from the right turn lane and Vehicle queue at the Lane to make a right turn into Yishun Ave 3 without checking the blind spot and recklessly drive out.As a result,the Taxi front left portion collided onto my vehicle right side portion front side section and both doors.After the accident,we exchange particular and leave the scene.I retrieve my video footage but unfortunately,the chips is corrupted.I wish to state that the Taxi also have one in car camera. Today when I wakes up,I felt my neck was in pain due to the impact of the accident so I consult doctor and was given 3 days MC from 16/10/2021 to 18/10/2021.

SINGAPORE POLICE FORCE

T/2021/016/7008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No: T/2021/016/7008

CONTINUATION OF REPORT

Sketch Plan
Informant is not able to provide sketch

Signature Of Driver Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Proprietor: Not applicable	Date/Time: 16/10/2021 12:00
Officer in Charge Of Case: (or Proxy) MOHAMMAD ZULKAEDLI BIN ABDULLAH Contact No: 65470000	Classification Of Case:

SINGAPORE POLICE FORCE

T/2021101617008

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No:T/2021101617008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
16/10/2021 12:00		

Informant's Particulars

Name of Informant: PANG YOKE WEI		Address: 526 CHOA CHU KANG STREET 51 #10-349 SINGAPORE 680526	
ID Type/ ID No.: NRIC NO / S9713619Z		Contact No.: Home/Office:	Mobile: 96583075
Nationality: SINGAPORE CITIZEN		Email: YOKEWEI97@HOTMAIL.COM	
Sex: Male	Age: 24 / Date of Birth: 25/04/1997	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:
Occupation: PHV DRIVER		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury: Others	Drink Drive: No	Date/Time of Accident: 16/10/2021 22:10	Type of Location: Straight Road
Location: SEMBAWANG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Colour	Condition	No of
SJA4120T	Car	TOYOTA	PRIUS	Blue	Slightly Damaged	0
SJA5504A	Car	TOYOTA	PRIUS	Silver	Seriously Damaged	2

PRIVATE HIRE
N192769

income
made different

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5122580684 — Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SMN3804A
   Chassis Number : JTDKDJB3101570203
2. Name of Policyholder : CHENG NAM SENG (ZHUANG NANSHENG)
3. Effective Date of Insurance : 16 Jun 2021
4. Expiry Date of Insurance : 15 Jun 2022
5. Persons 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/her 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#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.
(b) Use for the carriage of goods (other than samples) in connection with any trade or business.
(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S$2,000
EXCESS (SECTION 2)	: S$1,500
WINDSCREEN EXCESS	: S$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHENG NAM SENG (ZHUANG NANSHENG)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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).

Agency : ASSURE (SINGAPORE) PTE. LTD. (00000615327)
Date of Issue : 15 Jun 2021 16:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive