ASSIMILAN Steve " . GS3/E-Q19	11012384/EVf3 . 1
	Vell Mo! SJY3318P YIREAN: 29/3/17 Typoina. Gas I M. Gycle / Bus / Von / Lorry 1. Yext / Prime Mover / Truck / Trellor or Mellor: Mazda 5 c. 1998 Colour "" Red: A/O: Insured/Stating / IN 1 / H Sp. 1808 filing 144412 YIRAGO; Insured/Stating / H Eng/No: Conc. Conc. Conc. Conc. Cond. Poor / Bugnt
Sum insulation [Citom's Record] Alaks of Velt [Policy Condition] [Policy Condition	Stoorlage Incident Johnmod / Looked / Burnt or Broker Interdent Jammod / Looked / Burnt or Mod Mill 18/Rim 1 870 APRIST OF Tyre Steel PI
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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 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 06/12/2021 13:39 (SGT) Date of Accident 03/12/2021 19:00 (SGT) Exact Location of Accident Singapore Additional Location Information Along Tanjong Pagar Road Towards Keppel Road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SJY3318P**

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Ng Yeu Chye, Roman NRIC No S8033460E Email Address roman.ng@gmail.com Mobile Phone No (Phone) +65-92312010 Alternative Phone No +65-92312010

VEHICLE PARTICULARS

Manufacturer Mazda Model 5 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 1998

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 5121276618 Cover Note Number

DRIVER

Name of Driver Ng Yeu Chye, Roman S8033460E

Accident report SC1P21C60003

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on on					
On Driving Page	20/10/1980				
Driving Pass	06/12/1999				
Driving Pass					
J experience					
ier	Male				
ile Number	(Phone) +65-92312010				
. Phone Number					
mail Address	+65-92312010 roman.ng@gmail.com				
Address					
The state of the s	28 Bukit Batok East Ave 2 #10-18				
address complement					
Postcode	659921				
s the driver the policyholder?	Yes				
f No, Relationship of the Driver with the Insured	les				
Does Driver Own Other Vehicles?					
/ehicle Registration Number of Other Vehicle Owned by Driver	No				
The second of th					
nsurance 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					
Was any foreign vehicle involved in the accident?	No				
Number of vehicles involved in the accident	2				
Was anybody injured in the Accident?	No				
Nas any injured conveyed to hospital by ambulance?	4				
Was any other vehicle or property damaged?	Yes				
Number of Passengers (Including Driver)	1				
Has the driver been approached by unknown person(s)	1				
soliciting/offering accident claims assistance?	No				
DETAILS OF POLICE ACTION					
Was the accident reported to the police?	No				
Was notice of intended Prosecution given?					
f yes, against whom?	No				
r yes, against whom?	-				
CIRCUMSTANCES OF ACCIDENT					
Refer to Sketch Plan					
ATTACHMENT(S)					
re accident photos available for attachment?	Voc				
Vas there any video captured by Car Carr. era?	Yes				
Reasons for not uploading a video of the accident	Yes				
Vas there any audio recorded?	Request from owner directly.				
	No				
DETAILS OF OTHER	VEHICLE PROPERTY 1				
ehicle Registration Number	SLQ680E				
Pehicle Manufacturer					
ehicle Model	Citroen				
	•				
ehicle Variant	•				
ehicle Colour	Blue				
ehicle Category	Private car				
ame of Driver	•				
ontact Number	(Phone) +65-90026968				
ddress	(mana) as addressed				
1	Page 2 of 15				
Accident report SC1P21C60003	rage 2 of 13				

amplement	

ce Company Name	***************************************
of Damage	
.ls of property damaged	
Of Passenger (Including	

SKETCH PLAN

VEHICLE NO. S JY 33189.
DATE OF ACCIDENT: 03/12/21

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 ladgement 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)

lunderstand, acknowledge, agree and consent that

- (a) My insurer, my w orkshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/perso al 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;

& Time

- (v) 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 of agents (including their law yers/faw firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Driver's Signature

Witnessed by Reporting Centre Personnel

CHARN'S CUSTON

Sketch Plan

Perallel Pork lone Sit le lane 03 Dur 2021

Keppel Roud.

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cff side o	Commence of the Commence of th						
REPORTING ONLY ()	OW	VN [AMAGE (/	THIRD PART			ORKSHOP

Oriver's Signature (II driver is not the policyholder) / Date & Time

Policyholder's Signature / Date & Time

Page 5 c

Witnessed by Reporting Centre Personnel



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: 5121276618

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SJY3318P

Chassis Number

: JM6CW1071H0125284

2. Name of Policyholder

: NG YEU CHYE ROMAN

3. Effective Date of Insurance

: 29 Mar 2021

4. Expiry Date of Insurance

: 28 Mar 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 Ro d Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement ar 1 the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: 5\$2,000	
EXCESS (SECTION 2)	: \$\$1,500	
WINDSCREEN EXCESS	: \$\$100	
ADDITIONAL EXCESS	: N/A	
REPAIR AT OWNER'S PREFERRED WORKSHOP	; NO	
INSURE WITH COE	; YES	
NCD PROTECTION	: YES	
TRANSPORT ALLOWANCE	: NO	
EXCESS WAIVER	: NO	
PRIMARY DRIVER	: NG YEU CHYE ROMAN	
NAMED DRIVER (1)	: LANA TRESNAWATIE GANI	
NAMED DRIVER (2)	: N/A	
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LIMITED	

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)

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

Agency

: IVAN INSURANCE BF DKERS PTE LTD (00000691209)

Date of Issue

SUM INSURED

: 21 Jun 2021 15:44 h s

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive