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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

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 Date of Accident **Exact Location of Accident** Additional Location Information 13/12/2021 10:50 (SGT) 10/12/2021 10:30 (SGT) Yishun Industrial Park A, Singapore 752106 TOWARDS YISHUN AVENUE 7 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SDP87T

INSURED/POLICYHOLDER

Country/State of Loss

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No

NG YONG PING, JOSEPH (HUANG RONGBIN)

SXXXX993D giggseph@gmail.com (Phone) +65-93831105

+65-93831105

VEHICLE PARTICULARS

Manufacturer

Model

Variant

accident

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to vour vehicle?

Vehicle Category Transmission

CC

Subaru

Impreza

Private use

No - Claiming third party

Private car

Auto

2457

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number Cover Note Number Sompo Insurance Singapore Pte. Ltd. Comprehensive

D21MTPV01013427

DRIVER

Name of Driver NRIC No

NG YONG PING, JOSEPH (HUANG RONGBIN) SXXXX993D

Accident report SN0921CD0001

Date Of Birth 17/01/1987 Occupation Outdoor Date Of Driving Pass 05/05/2006 Driving experience 15 YEARS AND 7 MONTH\$ Gender Mobile Number (Phone) +65-93831105 +65-93831105 Alt. Phone Number Email Address giggseph@gmail.com Address 116 WOODLANDS AVENUE 5 #12-33 Address complement Postcode 739018 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 Collision - Major/Minor Rd Type of Accident Weather Conditions Clear Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? Yes 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) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? FOREIGN VEHICLE 1 Vehicle Registration Number **JJR898** Private car Vehicle Category DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Yishun North Neighbourhood Police Centre Police Station Name (Phone) +65-18008529999 Police Station Phone No (Fax) +65-68522299 Alt. Police Station Phone No 31 Yishun Central Singapore 768827 Police Station Address Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20211210/2038 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes WITH TRAFFIC POLICE Reasons for not uploading a video of the accident Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

JJR898

Vehicle Manufacturer Vehicle Model Vehicle Variant	Toyota Innova
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	TEY KUANG FOOK
Passport No/FIN	
Contact Number	
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	all
No. Of Passanger (Including Driver)	-
No. Of Passenger (including Driver)	· ·

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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)

lunderstand, 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 & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

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e declare the foregoing particular	s are true in every respect.	
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(161)		12/12/5

Personnel

Policyholder's Signature / Date & Time



Date of Accident	10/12/21 Accident Time: 1030 (24-HR-Format)
	Yishun industal park A to yishun ave 7
Accident Place	SDP87T Make/Model: Subaru sti 2.5M
Vehicle No. (Car Plate No.)	Make/Model:
Insurance Company	: Sompo Policy No: D21MTPV01013427
Owner or Company Name /IC No.	:Ng yong ping joseph s8701993D
Owner or Company Contact No.	:Owner's HpCompany Tel
DRIVER'S Name / IC No.	:Ng yong ping joseph s8701993D
DRIVER'S Date Of Birth	:17/1/1987 DRIVER'S License Pass Date05/5/2006
Relationship of Owner & Driver	: Spouse\Parent\Children\Sibling\Employee\Others:Owner
DRIVER'S Address	:116 woodlands ave 5 #12-33 bellewoods 739018
DRIVER'S Contact No./ Alt No.	:1) 93831105 2)
DRIVER'S Occupation : INDO	OOR \ (e.g. working inside or outside office)
Email Address	: Giggseph@gmail.com
Weather & Road Surface	: LEAR & DRY RAINING & WET \ AFTER RAIN & WET
	orting Only Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Dri	ver): 1
Was there any video Captured by car Exact purpose for which vehicle was b Any Injury (If YES, Pls state):	peing used at time of accident: Private use \ Work Purpose
Other Par	ty Driver's Particular (if any)
Vehicle. No:	Vehicle. No: JJR898
Vehicle Make \Model:	Vehicle Make \Model:Toyota
Name Driver:	
IC No. Driver/Contact:	

NEW – Passenger's name & gender:



REPORT OF A TRAFFIC ACCIDENT



T/20211210/2038

1 of 4

Report No. T/20211210/2038

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

Date/Time Report Made: 10/12/2021 13:21			Vide Report No.: L/20211210/0061	Station Diary No.: 48		
Informar	nt's Particu	lars	A REPORT OF THE REAL PROPERTY AND A SECOND	AL MARKET MARKET STATES		
Name of Informant: NG YONG PING, JOSEPH			Address: 116 WOODLANDS AVENUE 5 #12-33 BELLEWOODS SINGAPORE 739018			
ID Type / ID No.: NRIC NO / S8701993D			Contact No.: Home/Office: Mobile: 93831105			
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Age: Date of Birth: Male 34 17/01/1987			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Foreign Vehicle			
Location: YISHUN INDI	JSTRIAL PARK A			
Weather		Pond Surfaces		
Weather: Clear		Road Surface: Dry		Road Speed Limit:
STATE OF THE PARTY		M. ST. PARK SALVANIAN SALVANIAN		Road Speed Limit: Traffic Volume: No Traffic

Vehicle No.	Туре	Make	Model	Color	Cooding	
JJR898	Car	TOYOTA	INNOVA	The second second	Condition	No of Passenger
			INNOVA	Black	Slightly	0
SDP87T (Car SUBARU	IMPREZA	Grev	Damaged		
	· 通過		5DR 2.5 STI AWD 6MT ABS	Gley	Seriously Damaged	

Details of Vehicle Insurance	MANUAL PROPERTY OF THE PARTY OF		大水水
Vehicle No. Insurance Company		M. B. Waller	
12. 14. 15. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	Insurance No	Effective	1
	福度 数件模型	Tenective	Expiry Date



T/20211210/2038

2 of 4

Report No. T/20211210/2038

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

CONTINUATION OF REPORT

Details of Ve	ahicle Insurance		NAME OF THE VALUE	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDP87T	TENET SOMPO INSURANCE PTE.	D21MTPV0101342	Libertan Manager	19/09/2022

No. of Pedestrian	is Injured: NIL	Ilse of De	doctries C-	
Driver		OSO OFFE	destrian Cro	ssing: NA
Name	TEY KUANG FOOK		ID No.	G0604416L
Related Vehicle	JJR898 (Car)		Contact No	. 83066193
Hospital/Clinic	NIL		Class of Driving Licence &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	Expiry Date	Santa and the land of the
No. of Days gran	ted Medical Leave NIL	Degree of	harge NIL	· · · · · · · · · · · · · · · · · · ·
Driver	15.1.17 · 11.00 · 14.00 · 14.00 · 15.			CONTRACTOR AND ADDRESS OF THE PARTY OF THE P
Name	NG YONG PING, JOSEPH		ID No.	S8701993D
Related Vehicle	SDP87T (Car)		Contact No.	93831105
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disch	Contract Con	
No of Dave areal	ed Medical Leave NIL	Degree of		

Brief Details.

On 10/12/2021 at about 1030hrs, I was driving my car bearing registration number SDP87T along Yishun Industrial Park A. While I was driving along the main road near to Blk 1017 Yishun Industrial Park A, a vehicle bearing registration number JJR898 which was from the service road of Blk 1017 and 1016 Yishun Industrial Park A was driving out; I was having the right of way as such I had continued to drive...

However, the said vehicle did not stop and continued to drive out to the main road, colliding onto the right side of my car. I had alighted from my car to check on the damages. The collision impact caused my car to be dented with scratches from the front to the rear on the right side, and my rear right wheel was also slanted inwards and punctured. My car was unable to be driven. I had then exchanged particulars with the said driver. In addition, I had also called for Police (reference L/20211210/0061), the Traffic Police came to my accident scene. No one was injured during the accident.

I am lodging this report for my insurance claimant. The memory card for my in-car CCTV was handed over to the Traffic Police. I am unsure of the cost of the damage.



Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999



T/20211210/2038

3 of 4

Report No. T/20211210/2038

CONTINUATION OF REPORT



Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999



4 0 1 4

Report No. T/20211210/2038

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report	Signature Of Informant:
Sr Staff Sgt YAP YHEE HOE	
Signature Of Interpreter: Not applicable	Date/Time: 10/12/2021 13:21
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp	ATTACAM



Sompo Insurance Singapore Pte. Ltd.

50 Ratfles Place, #03-03 Singapore Land Tower, Singapore 048623 Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) **ROAD TRANSPORT ACT 1987 (MALAYSIA)** ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No.

: D21MTPV01013427

Insured

: NG YONG PING, JOSEPH (HUANG RONGBIN)

Motor Vehicle (Registration No.): SDP87T

Coverage

: Comprehensive - ExcelDrive FOCUS

Policy Commencement Date

: 23 SEPTEMBER 2021 00:00

Policy Expiry Date

: 19 SEPTEMBER 2022 23:59

Maximum Liability (Section I)

: Market value at time of loss

Excess*

: \$1000 - Section I

Voluntary Excess*

: N.A

Windscreen Excess*

: S\$100.00 for each and every applicable claim.

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.

2. Any other person who is driving on the Insured's order or with his permission.

3. In the event of the death of the Insured,

a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and

b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.30

Sompo Insurance Singapore Pte. Ltd.

Duy 20

Authorised Signatory

Date/Time of Issue: 20 SEPTEMBER 2021 12:14

IMPORTANT NOTICE

Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act;

Motor Vehicle without a valid policy of insurance under the Act;

On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);

This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name: 11D09106 & D&S AUTO AGENCY CI Code: 22A R3LD55O4NI0LMKRA