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 14/12/2021 14:26 (SGT) Date of Accident 14/12/2021 08:45 (SGT) Exact Location of Accident Singapore Additional Location Information SLE TOWARDS BKE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number GBF7179Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner KEYDENCE SYSTEMS PTE LTD Company Reg No 2XXXXX151W **Email Address** huawei@keydence.com Mobile Phone No (Phone) +65-96289703 Alternative Phone No (Home) +65-96289703

VEHICLE PARTICULARS

Manufacturer

Model Hiace Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Commercial vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number MR001244 Cover Note Number

DRIVER

Name of Driver PALANIVELU MANI MARAN Passport No/FIN GXXXX353K

Date Of Birth 24/07/1968 Occupation Outdoor Date Of Driving Pass 03/12/2019 Driving experience 2 YEARS Gender Male Mobile Number (Phone) +65-98554537 Alt. Phone Number Email Address huawei@keydence.com Address 7030 Ang Mo Kio Ave 5 #01-62, Northstar Address complement Postcode 569880 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? 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 - Change/cross lane Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SBW85K Vehicle Manufacturer Vehicle Model

venicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Vehicle Variant

Postcode	-
nsurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	-
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.
- This Form must 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation
- 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.
- By the lodgment 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.
- 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 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 (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured
 - 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' 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 or agents[including their lawyers/law firms], which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policycologer Speature Date & Time Driven's Signature (if driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name: West!

NRIC/FIN No .: SOLBERY 1270

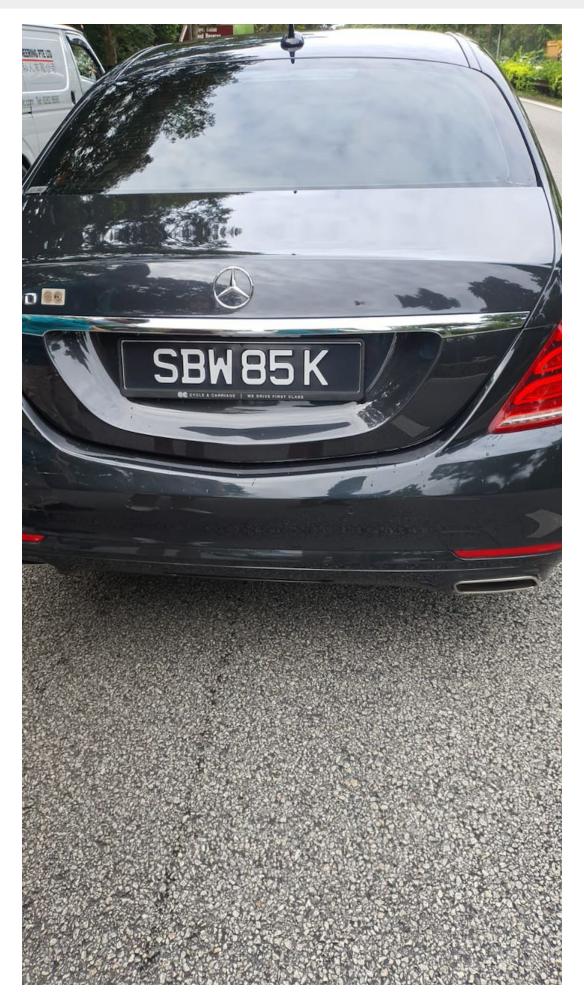
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SKETCH PLAN	REE	ELE Woodship
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eniclen: GBB7179Y		
MICH 8: SOWPER		i A i
DESCRIBE CIRCUMSTANCES OF THE	SLE	
ON 14/12/2021, AT AROUND 0845 HRS,	HE ACCIDENT I WAS DRIVING ALONG SLE TO	OWARDS BKE.
VEHICLE B "SBW85K" TURN ON LEFT SIG	NAL AND FILTER INTO MY LAI	NE. HOWEVER, WHEN THE VEHICLE IS FILTER INTO MY LANE ALL THE CARS
THIS ACCIDENT NO PERSON INJURED.	IN TIME TO AVOID THE COL	LOSION AS THE VEHICLE B HAS FILTER IN .
	HE OTHER PARTY INSURAL	NCE POLICY FOR OUR PROPERTY DAMAGED CLAIM,
BOTH PARTIES HAD EXCHANGED EACH P.	ARTICULAR DETAILS AFTER TO	HEACCIDENT
-		
15		
REMARKS		ARMS
REPORTING ONLY OWN DAMAGED CLAIM	You	had been advised by the workshop that in the event that you wish to n against your own policy (OD Claim), there is a Fourteen (14) days
THIRD PARTY CLAIM	claus	se whereby the claim must be made within the stipulated timeframe
DECLARATION	i iii	the day of occurrence.
I/We declare the foregoing particulars are	true in every respect.	0.4 fg ::
(ter *		
100 / - 15		(M) (M)
13 (9)5	(ner en
Policyholger's Signature Date & Time		rer's Signature Reporting Centre Personnel's Signature sopt the policyholder) Name: 1404 S.
		s not the policyholder) Name: IVEN S NRIC/FIN No.: SALLIYY2H NRIC/FIN No.: SALLIYY2H
		907100000000000000000000000000000000000
		1 1













Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

TOKIOMARINE INSURANCE GROUP

A member of the Tokio Marine Group

Certificate of Insurance

FORM MZ300

MOTOR 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)

Policy No.: MR001244 (Commercial Vehicle)

1. Index Mark and Registration Number of

GBE7179Y

Chassis No.: KDH2010187357

2. Name of Policyholder

KEYDENCE SYSTEMS PTELTD 2010 1915 W

3. Effective date of the Commencement of Insurance for the purposes of the Act

14/03/2021 (00:00:00)

Date of Expiry of Insurance

13/03/2022

5. Persons or Class of Persons entitled to drive* Any person who is driving on the policyholder's order or with their permissi

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 under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use*

Limitations as to use*

1) Use in connection with the policyholder's business.

2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.

3) Use for social domestic and pleasure purposes.

The policy does not cover.

1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle. Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation Included under these headings. n) Act (Chapter 189) and Section 95 of the Road Transport Act, 1967 (Melaysia), are not to be

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision Road Transport Act, 1987 (Malaysia). of the Motor Vehicles. (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable, During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof Act (Chapter 189).

Act (Chapter 189).

ADDITIONAL INFORMATION		_	
Insurance Plan:	Comprehensive Approved Workshop	Plan	Account No: 1254DDA
Limit for total loss or theft:	Prevailing Market Value	riai	
Policy Excess:	Own Damage Claims Additional Excess for Unnamed Driver(s)	SGD 750.00 SGD 1,500.00	(Original Excess : SGD 750.00) (All Claims)
	or inexperience Driver(s)	SGD 3,000.00	(All Claims)
	WindScreen Excess	SGØ 100.00	
Financial Interest:	ETHOZ CAPITAL LTD		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

User ID: 1254DOA

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Vehicle Details

Vehicle No.

GBE7179Y

Vehicle Type:

A50 - Goods (Closed) Van/Van Panel (Delivery)

Vehicle Scheme:

Normal

Propellant:

Diesel

Motor No.:

-

Power Rating:

-

Maximum Laden Weight:

3225 kg

Year Of Manufacture:

2015

Lifespan Expiry Date:

13 Mar 2036

PQP Paid:

\$36,818.00

Road Tax Expiry Date:

13 Mar 2022

Inspection Due Date:

13 Mar 2022

CO2 Emission:

180.00 (g/km)

Make / Model

TOYOTA / HIACE 3.0 DX DIESEL TURBO MT 2WD LGV

Vehicle Attachment 1:

No Attachment

Chassis No.:

KDH2010187357

Engine No.:

1KD2581326

Engine Capacity:

2982 cc

Maximum Power Output:

-

Unladen Weight:

1800 kg

Original Registration Date:

14 Mar 2016

COE Category:

C - Goods Vehicle & Bus

COE Expiry Date:

13 Mar 2026

PARF Eligibility Expiry Date:

-

Intended Transfer Date:

14 Dec 2021

CEV/VES Rebate Utilised Amount: