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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

differences as a few reads

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

29/12/2021 11:51 (SGT)

28/12/2021 15:25 (SGT)

BETWEEN BLK 214 AND BLK 216

Petir Rd, Singapore

Singapore

Date of Submission Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKR2052L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner RAMLE BIN ISMAIL NRIC No SXXXX980B **Email Address** hancarrepairs@gmail.com Mobile Phone No (Phone) +65-88165420 Alternative Phone No. +65-88165420

VEHICLE PARTICULARS

Manufacturer Toyota Model Prius Variant Exact purpose for which vehicle was being used at time of Employment accident

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

Transmission

CC

No - Claiming third party Commercial vehicle

Auto 1497

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Policy Number Cover Note Number China Taiping Insurance (Singapore) Pte. Ltd. Comprehensive

DMHCSNW00014392100

DRIVER

Name of Driver NRIC No

RAMLE BIN ISMAIL SXXXX980B



Date Of Birth	15/11/1955
Occupation	Outdoor
Date Of Driving Pass	22/06/1994
Driving experience	27 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88165420
Alt. Phone Number	+65-88165420
Email Address	hancarrepairs@gmail.com
Address	BLK 37 MARSILING DRIVE #07-419
Address complement	BER 37 MARSIEING DRIVE #07-419
III DANGE CONTRACTOR OF THE CO	-
Postcode	730037
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	
Type of Accident	Collision - Major/Minor Rd
Weather Conditions	200 - 100 -
	Clear
Road Surface	Dry
OTHER INFORMATION	
11 11 11 11 11 11 11 11 11 11 11 11 11	
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?	(a) 30)
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance?	No
conotting crowning account	
DETAILS OF POLICE ACTION	
DE IVILLO OF TOURISM	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
	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?	Yes
Was there any audio recorded?	No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
DETAILS OF OTHE	TVEHIOLET NOT ENTIT
William Deviate Number	OBKOOFRY
Vehicle Registration Number	GBK9958X

Vehicle Registration Number	GBK9958X
Vehicle Manufacturer	Toyota
Vehicle Model	Hiace
Vehicle Variant	-
Vehicle Colour	
Vehicle Category	Commercial vehicle
Name of Driver	NG ZHEN CHAI, IVAN
NRIC No	SXXXX688H
Contact Number	•
Address	

Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	
He. Of assenger (including briver)	

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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, acknow ledge, 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.

29/12/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

PHOIR HORD

A SKR 2052L

B GBK 9958X

Describe Circumstances of the Accident
ON 28/12/2021 AT ABOUT 15:36HRS I WAS AT BIK 126 & BIKI
PETIR ROAD WANTED TO FETCH MY PASSANGER AT THE SHECTER
NEAR BIK 24 DETIR. BEFORE I WAS ABOUT TO STOP I, SAW
& VAN which ABOUT TO REVALUE OUT FROM THE PARKINGS LOT
I HORK BUT THE VAN DRIVER STILL EKINGSE & BANK ON
THE RIGHT SIDE DRIVER of my RIGHT SIDE MIRROR DROP
OUT, AFFIRE PHAR BURIF HE QUICKLY DRIVE BACK INDO THE GOT
WHICH HE RAPK JUST NOW

Declaration

 ${\it lWe}$ declare the foregoing particulars are true in every respect.

29/12/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

ACCIDENT STATEMENT

ACCIDENT DATE: (28, 12, 2021)(DD	MMMYYY TIME! 15 16 VIIII
LOCATION: BYW BIK 214 9 216	PETIO POAN
I. DETAILS OF VEHICLE	TEIL NOTO
A CONTRACTOR OF THE CONTRACTOR	0/501
The Control of the Co	
b)INSURANCE COMPANY: (F	timm TAI PING
OFFICE TYPE: (COMPREHENSIVE /	THIRD PARTY / THIRD PARTY FIRE &THEFT)
SIMAKE & MODEL: (6 40.1M	RIUV
TITTE: (SALOON / COUPE / MPV /VA	AN / LORRY / MOTORCYCLE / OTHERS)
9/ VEHICLE CATEGORY: (PRIVATE / CO	OMMERCIAL / MOTORCYCLES
THE OWN OSE OF USING AT ACCIDENT	TIME. INDEKTAL
I) ARE YOU CLAIMING UNDER YOUR	OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY O	CLAIM / REP.ORTING ONLY)
AINAME: RAMUR BING ISI	MALL
DINRIC/FIN/PASSPORT: S126898	
c) ADDRESS:	OB CONTACT: 38/65420
The one of the original of the	
* CONTINUE TO 3.d IF DRIVER ALSO PO	OLICY HOLDED
Who of passanges DRIVER CONTINUE TO 3.d IF DRIVER ALSO PO	SUCT HOLDER
(Including driver) SINAME: ABOUT	K MANE LEGARIES
b)NRIC/FIN/PASSPORT;	(MALE / FEMALE) CONTACT:
c)ADDRESS:	- CONTACT.
"d) DATE OF BIRTH: (15 / 11 / 1954)(DD/MM/YYYY) ·
e)OCCUPATION; (INDOOR / OUTDOO	R)
FIDATE OF DRIVING PASS	
4. WAS DRIVER AN EMPLOYEE OF THE	INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVE	ER WITH INSURED: OWNER!
 d) WEATHER CONDITION: (CLEAR / RAIN b) ROAD SURFACE: (DRY / WET / OTHER 	NING / OTHERS
6. WAS ANYBODY INJURED (YES / KO)	3
7. a) REPORTED TO POLICE (YES / NO)	· · · · · · · · · · · · · · · · · · ·
IF YES, PLEASE STATE WHICH POLICE ST	TATION:
8 THIRD PARTY VELLOIR	Allon
He of passenger a) VEHICLE NUMBER: GBK 9958 X	MODEL: TOYOTA HIACM
Including driver) b) DRIVER'S NAME: NG ZITHON CITY	
() NRIC/FIN/PASSPORT: S& 5046/	CONTACT:
7. IHIRD PARTY VEHICLE	
No of passanger of DRIVER'S NAME.	MODEL:
landing the second	
NRIC/FIN/PASSPORT:	CONTACT::
	· ·
•	i

email = ROMLKBIM78MAIL126 @ GMAIL. Com



中国太平保险 (新加坡) 有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

◆ COWELL INSURANCE Agency Pte Ltd

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)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MZ406L/B

SN

AN0055A

Cov. Type:C

CERTIFICATE No.

DMHCSNW00014392100

Engine No.: 1NZR213715

Cha. No.:JTDKD3B3301572678

1. Index Mark and Registration

SKR20521

AUTOSAFE

Number of Vehicle

2. Name of Policy Holder

RAMLE BIN ISMAIL

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

23/11/2021

Excess Sect I.

S\$1,250.00

(00:00:00)

Excess Sect. I (Outside Singapore)

\$\$2,500.00

Date of Expiry of Insurance

22/11/2022

Excess Sect. II

\$\$1,250.00

Excess Sect.II (Outside Singapore). EX ON WINDSCREEN .

\$\$2,500.00 \$\$100.00

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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 Vehicle.

RAMLE BIN ISMAIL

6. Limitations as to use:*

(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

(1) Use for racing, pace-making, reliability trial or speed-testing.
(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: TOKYO CENTURY LEASING (S) PTE LTD

* 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: COWELL INSURANCE (AGENCY) PTE LTD Authorised Officer

Authorised Signatory

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

©63896111

6222 1033

www.sg.cntaiping.com

Transaction ref 20211123150408920203

Please check that the owner and vehicle details are correct:

1. Name	: RAMLE BIN ISMAIL
2. Identification No. Type	: Singapore NRIC
3. Identification No.	: SXXXX980B
4. Country/Region	:-
5. Vehicle Registration No.	: SKR2052L
6. Previous Vehicle Registration No.	:-
7. Effective Date of Ownership	: 23 Nov 2021
8. Original Registration Date	: 23 Jan 2015
9. First Registration Date	: 23 Jan 2015
10. Vehicle Type	: P10 - Passenger Motor Car
11. Vehicle Scheme	: Normal
12. Attachment 1	: No Attachment
13. Attachment 2	:-
14. Attachment 3	:-
Vehicle Make	: ТОУОТА
16. Vehicle Model	: PRIUS C CVT
17. Year of Manufacture	: 2014
18. Primary Colour	: Grey
19. Secondary Colour	:-
20. Passenger Capacity	: 4
21. Chassis/Trailer Chassis No.	: JTDKD3B3301572678 / -
22. Propellant	: Petrol-Electric
23. Engine No./Motor No.	: 1NZR213715 / 1LMR213715
24. Engine Capacity(cc)/Power Rating(kW)	: 1497 / 45.0
25. Maximum Power Output(kW/bhp)	: 74.0 / 99
26. Unladen Weight(kg)	: 1120
27. Maximum Laden Weight(kg)	: 1565
28. Open Market Value	: \$23,578.00