SA1A222G0002 / Auto Insure Pte Ltd [739145] ENTRY DATE & TIME: 16/02/2022 17:06 (SGT) SUBMITTED BY: ALYWIN YEO VERSION: 1 (16/02/2022 17:06 (SGT))

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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of withouting of material facts may allow insurance companies to reputial 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 16/02/2022 17:06 (SGT) Date of Accident 27/01/2022 16:40 (SGT) Exact Location of Accident Clementi Ave 2, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT5940U

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LEROY LEASING Company Reg No 53415770W Email Address LEROY MONG@HOTMAIL.COM Mobile Phone No (Phone) +65-85001640 Alternative Phone No +65-85001640

VEHICLE PARTICULARS

Manufacturer Ssangyong Model Tivoli 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 - Reporting only Vehicle Category Private hire Transmission Auto 1597

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMHCSNW00006212100 Cover Note Number

DRIVER

Name of Driver **LEROY MONG** NRIC No S7403934J

Date Of Birth 23/01/1974 Occupation Outdoor Date Of Driving Pass 04/04/2016 Driving experience 5 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-85001640 Alt. Phone Number Email Address LEROY_MONG@HOTMAIL.COM Address BLK 288C PUNGGOL PLACE #02-827 Address complement Postcode 823288 Is the driver the policyholder? If No. Relationship of the Driver with the Insured **OWNER** 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 - Head to Rear 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) 1 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? Yes Police Station Name Punggol Neighbourhood Police Centre Police Station Phone No (Phone) +65-18006049999 Alt. Police Station Phone No (Fax) +65-64468015 Police Station Address Blk 21A Tebing Lane Singapore 828837 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT T/20220128/2060. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number FBR3069P Vehicle Manufacturer Vehicle Model Vehicle Variant

Motorcycle

Vehicle Colour
Vehicle Category

| lame of Driver | _ |
|---|---|
| Contact Number | _ |
| Address | _ |
| Address complement | _ |
| Postcode | _ |
| nsurance Company Name | _ |
| Nature Of Damage | _ |
| Details of property damaged in accident | _ |
| No. Of Passenger (Including Driver) | _ |

GIARMA SketchPlanForm_V3

SKETCH PLAN

IMPORTANT NOTICE

- 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 Oriver.
- Information provided must be as <u>truthful</u> and accurate as <u>possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 loggment 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, 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of 1.
 - 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 disciosure 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.



Policyholder's Signature Date & Time: Mr.

Driver's Signature (If driver is not the policyholder) Date & Time: Just .

Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

GIARMC SkotchPlanForm_V3



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Hire Car

MZ407

BR0138A

CERTIFICATE OF INSURANCE

Motor Verbishs (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Verbishs (Third-Party Risks and Compensation) Risks, 1960
Raud Third-Party Risks) Roles. 1959 (Malaysia)
Motor Verbishs (Third-Party Risks) Roles. 1959 (Malaysia)

Cov. Type:C

Engine No.: 87391002095451 CERTIFICATE No. DMHCSNW00006212100

SMT5940U

Cha. No: KPT30A1USLP319613

1. Index Mark and Registration Number of Vehicle

AUTOSAFE

LEROY LEASING 2. Name of Policy Holder

 Effective date of the Commencement of Insurance for the purposes of the Regulations. Ordinance or Engineers. 03/07/2021 (00:00:00)

Excess Sect I... S\$1,250.00

Excess Sect. I (Outside Singapore) S\$2,500.00

Excess Sect. II S\$1,250.00

4. Date of Expiry of Insurance. 02/07/2022 Excess Sect.II (Outside Singapore). S\$2,500.00 EX ON WINDSCREEN . \$\$100.00

5. Persons or Clarison of Persons intitled to drive?

Any employee or any person who is driving with the Policyholder's order or with their 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 *

Use for the carriage of passengers or goods in connection with the Policyholder's business.
 Use for social domestic pleasure purposes.

The Policy does not cover (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.: MOTOR-WAY CREDIT 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

Issued By: IVAN INSURANCE BROKERS 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

C 6389 6111

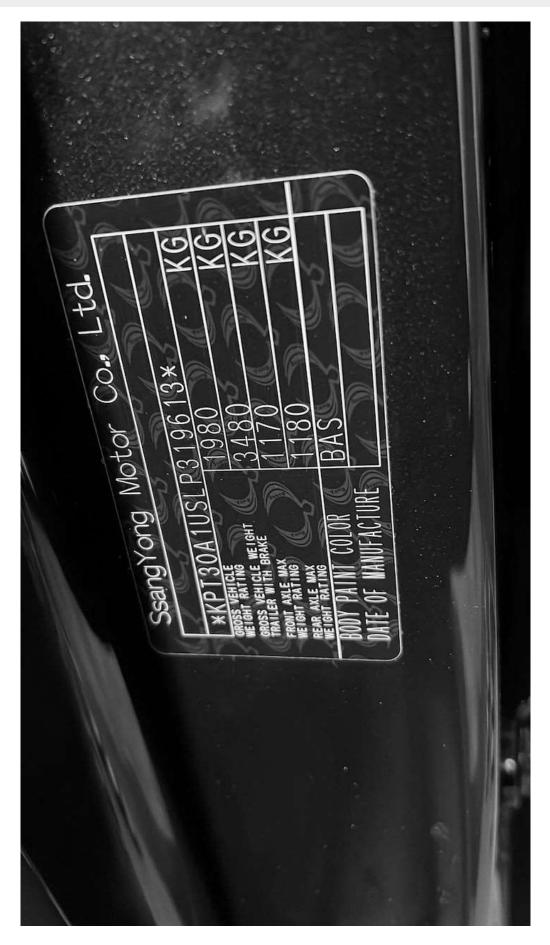
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3 of 3

Report No. T/20220128/2060

Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

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 F / SGT 2 LOW SIANG HENG, JONATHAN | | Signature Of Informant: | | |
|---|------------------------|-----------------------------|--|--|
| Signature Of Interpreter: Not applicable | | Date/Time: 28/01/2022 16:55 | | |
| Officer In Charge Of Case: TP / GIA / | | Classification Of Case: | | |
| DSP (2) YIP YEW SENG N Contact No.: 65476182 | SINGAPORE POLICE PORCE | SN158 | | |
| Authentication Stamp NP158 | 7 | | | |
| | SIGNA | TURE | | |





Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

1 of 3 Report No. T/20220128/2060

| REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made: 28/01/2022 16:55 | | shapity to the contract of the | Vide Report No.: | Station Diary No. 41 | |
|---|--------------|--|--|----------------------------|--|
| Informa | nt's Particu | ilars | | | |
| Name of Informant: LEROY MONG ID Type / ID No.: NRIC NO / S7403934J Nationality: SINGAPORE CITIZEN | | | Address: APT BLK 288C PUNGGOL PLACE #02-827 SINGAPORE 823288 | | |
| | | 3 4 J | Contact No.: Home/Office: | Mobile: 85001640 | |
| | | | Email: | | |
| Sex: Male | Age: 48 | Date of Birth: 23/01/1974 | Type of Informant: Driver | O to 1 Nome | |
| Race: Chinese | | | Language: | Institution / School Name: | |
| Occupation: Grab Driver | | | Driving Licence Information: Class: | Date of Expiry: | |

| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 27/01/2022 16:40 | Type of Location Car Park | |
|---|----------------------|------------------------------------|---|--|--|
| Location: CLEMENTI A | VENUE 2 | | | | |
| Weather: | | Road Surface: Dry | | Road Speed Limit: | |
| | | Dry | | | |
| Veather: Clear Traffic Flow: Dual Carriage | » Wav | Traffic Control: Not Controlled | 1 | raffic Volume: No Traffic Anyone conveyed by | |

| - | ehicle Involve | Make | Model | Color | Condition | No of Passenge |
|-------------|----------------|------|---------|-------|-----------|----------------|
| Vehicle No. | Type | Manc | 1110000 | | Slightly | 0 |
| FBR3069P | Motorcycle | | | | Damaged | <u> </u> |
| SMT5940U | Car | | | | Slightly | 0 |





2 of 3

Report No. T/20220128/2060

Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999

CONTINUATION OF REPORT

Brief Details.

On the 27/1/22 at about 4:40pm, while exiting the carpark of 351 Clementi Ave 2, a motorcycle (FBR3069P) stopped in the yellow box in front of me just outside the exit of the car park. I did not notice the yellow box so I inched my vehicle forward and my vehicle (SMT5940U) knocked into the rear of the motorcycle. My vehicle suffered slight damages to the front right bumper area. The motorcycle suffered slight damages to the side of the body frame. No ambulance was required. Police assistance was not required.



