SW08223B0002 / Wearnes Automotive Pte Ltd ENTRY DATE & TIME: 11/03/2022 16:21 (SGT) SUBMITTED BY: Paul Ong VERSION: 1 (11/03/2022 16:21 (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 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.

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 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 11/03/2022 16:21 (SGT) Date of Accident 06/03/2022 07:50 (SGT) Exact Location of Accident 846 Yishun Ring Rd, Singapore 760846 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDN312D

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Hu Kuo-Ming, Danny NRIC No. S0336925J Email Address noemail@email.com Mobile Phone No (Phone) +65-96649128 Alternative Phone No +65-96649128

VEHICLE PARTICULARS

Manufacturer Infiniti Model Q50 Variant Infiniti Q50 Premium Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private car Transmission Auto CC 1991

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number Cover Note Number

DRIVER

Name of Driver Hu Kuo-Ming, Danny NRIC No. S0336925J

Date Of Birth 01/01/1946 Occupation Indoor Date Of Driving Pass 16/05/1964 Driving experience 57 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-96649128 Alt. Phone Number +65-96649128 Email Address noemail@email.com Address 1 Barker Road Address complement Postcode 309859 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 Collided into Parked Vehicle 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 ATTACHED 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 Vehicle Manufacturer Vehicle Model	SMR6472H Toyota Voxy
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private hire
Name 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)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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>.
- 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.
- 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.
- 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 .
 - (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' 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN		
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DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
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DECLARATION	2010	
We declare the foregoing part	iculars are true in every respect.	
olicyholder's Signáture vate & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:



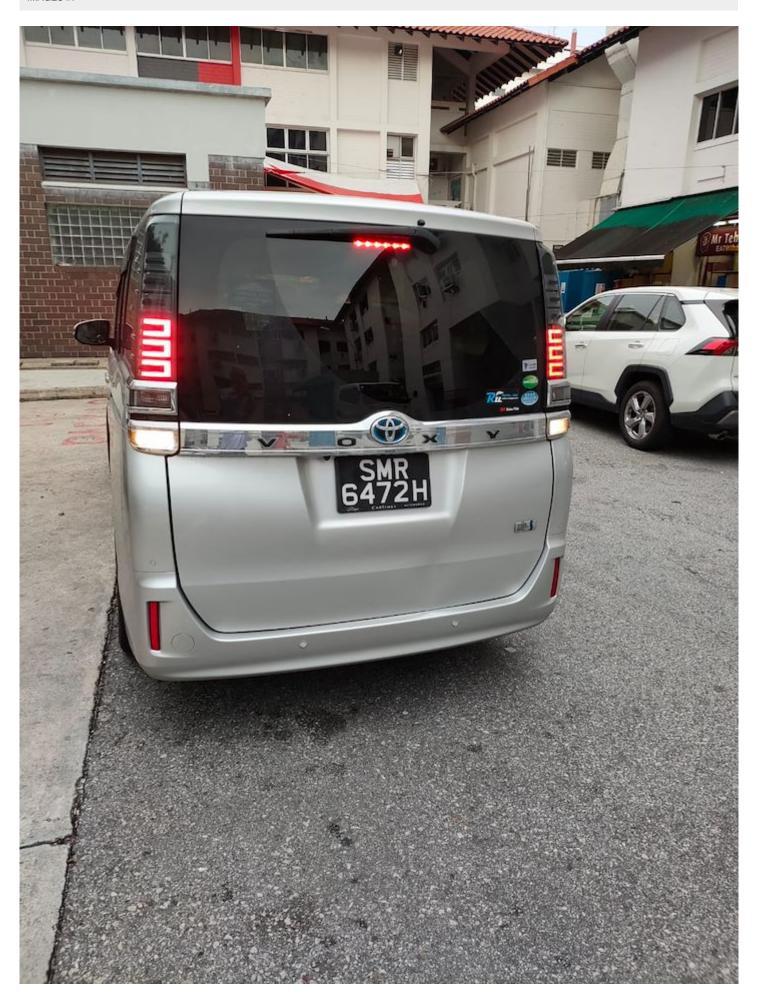


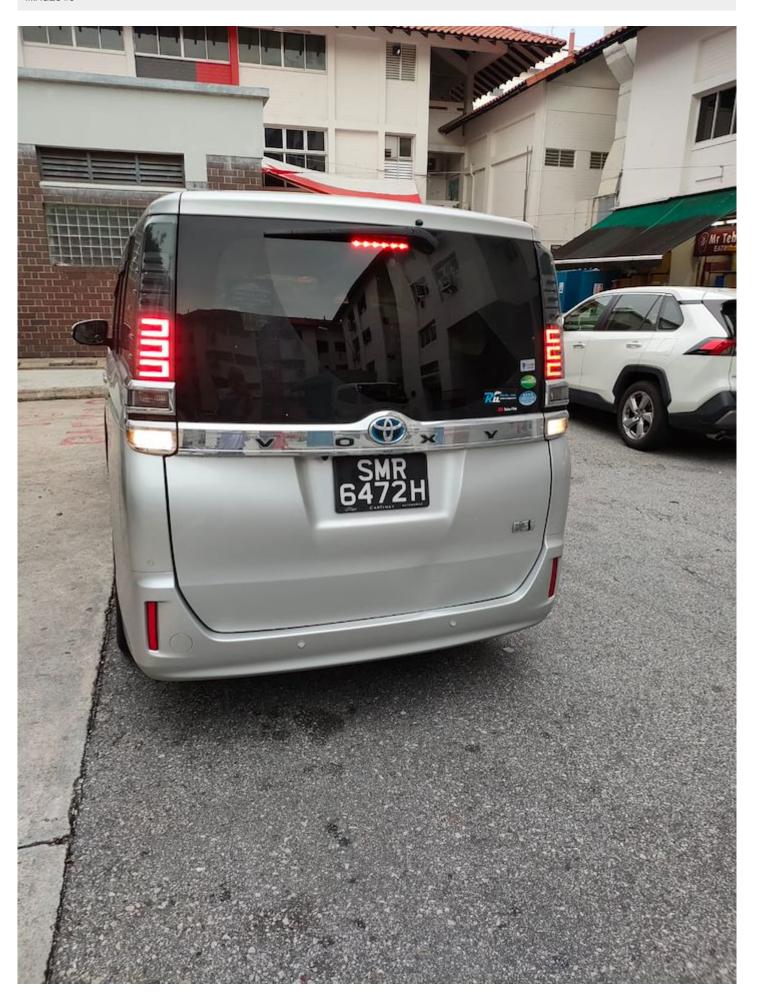














51 UBLAVE 1, #01-25 PAYA UBLINDUSTRIAL PARK, SINGAPORE 408933 [TEL: (065) 62563564 FAX; (065) 62564 US

Our Ref: CC6/AIG22002198/Kea3

11 March, 2022

HU DENNY @ HU KUO-MING, DANNY 1 BARKER ROAD SINGAPORE 309859

Dear Sirs,

ACCIDENT INVOLVING SDN 1312D AND SMR 6472H ON 06/03/2022 07:50 ALONG /AT 846 YISHUN RING ROAD, SINGAPORE 760846 - OPEN SPACE CAR PARK

We, LKK Auto Consultants Pte Ltd has been appointed to act on the behalf of your insurer, AIG Asia Pacific Insurance Pte Ltd (AIG) to settle a THIRD PARTY claim against you for an accident which happened on the above-mentioned date and location.

Kindly proceed to lodge your GIA report within five (05) working days of receipt of this letter, giving the version of the accident amongst other things related to the accident. The GIA report can be lodged at any of AIG reporting centres. You may refer to your Certificate of Insurance for the list of the reporting centres.

If you have any information to add or any amendments to make, please contact the undersigned within five days from the date of this letter.

Please note that the standing of your insurance policy such as NCD, premium & etc would be affected.

Yours faithfully,

4. . /

Asher Sng Claims

Tel: 6841 6051 Fax: 6741 4108

* Email: AsherSng@lkkauto.com

c.c. Claims Manager AIG Asia Pacific Insurance Pte Ltd (Motor Claims Dept)