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.

- 4. The issue and acceptance of this is form by instrained 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 30/03/2022 15:52 (SGT) Date of Accident 30/03/2022 08:56 (SGT) Exact Location of Accident Singapore Additional Location Information CTE TOWARDS PIE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Nissan

Vehicle Registration Number GBK8285K

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner METAQUIP TC INDUSTRIAL PTE LTD Company Reg No AXXXXXX621Z **Email Address** jonathan_goh@tanchong.com Mobile Phone No (Phone) +65-87775119 Alternative Phone No (Office) +65-87775119

VEHICLE PARTICULARS

Manufacturer

Model Nv350 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 No - Claiming third party your vehicle?

Vehicle Category Commercial vehicle Transmission Manual CC 2000

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 7990000064 / 1220000358 Cover Note Number

DRIVER

Name of Driver RYHAN MATIEN BIN ABDUL RAHIM NRIC No. SXXXX838A

Date Of Birth 18/11/1989 Occupation Outdoor Date Of Driving Pass 15/05/2013 Driving experience 8 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-87684546 Alt. Phone Number Email Address jonathan_goh@tanchong.com Address APT BLK 405B NORTHSHORE DRIVE Address complement #07-134 Postcode 822405 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Side Swipe 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? 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 SEE ATTACHED SKETCH PLAN. PHOTO AND VIDEO FOOTAGE ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

No

Vehicle Registration Number SML3379X Vehicle Manufacturer Volvo Vehicle Model Vehicle Variant Vehicle Colour Red Vehicle Category Private car Name of Driver SIM MONG JEN, ALEX (SHEN MAOREN) NRIC No SXXXX504C Contact Number (Phone) +65-97874870 49 PARK VILLAS TERRACE



Was there any audio recorded?

Address complement	_
Postcode	545276
Insurance 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.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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, 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyhelder's Signature Date's

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

Witnessed by Reporting Centre Personnel FINGE

Sketch Plan

A - GILA 82554 B - SML 3379 X

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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

AUTOLUTION INDUSTRIAL PTE LTD
19 UB1 ROAD 4
SINGAPORE 18923
TEL: 6490 661 AX 88167483

Witnessed by Reporting Centre
Personnel ETMER ALFONSO





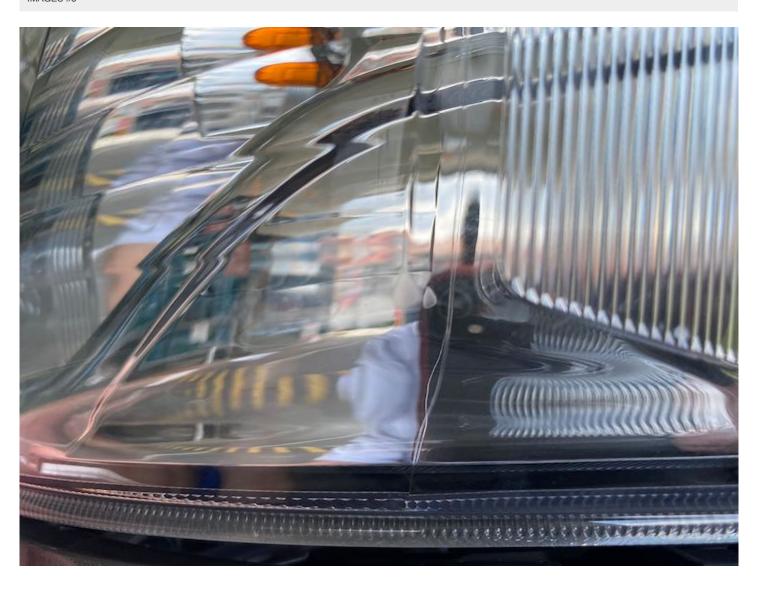








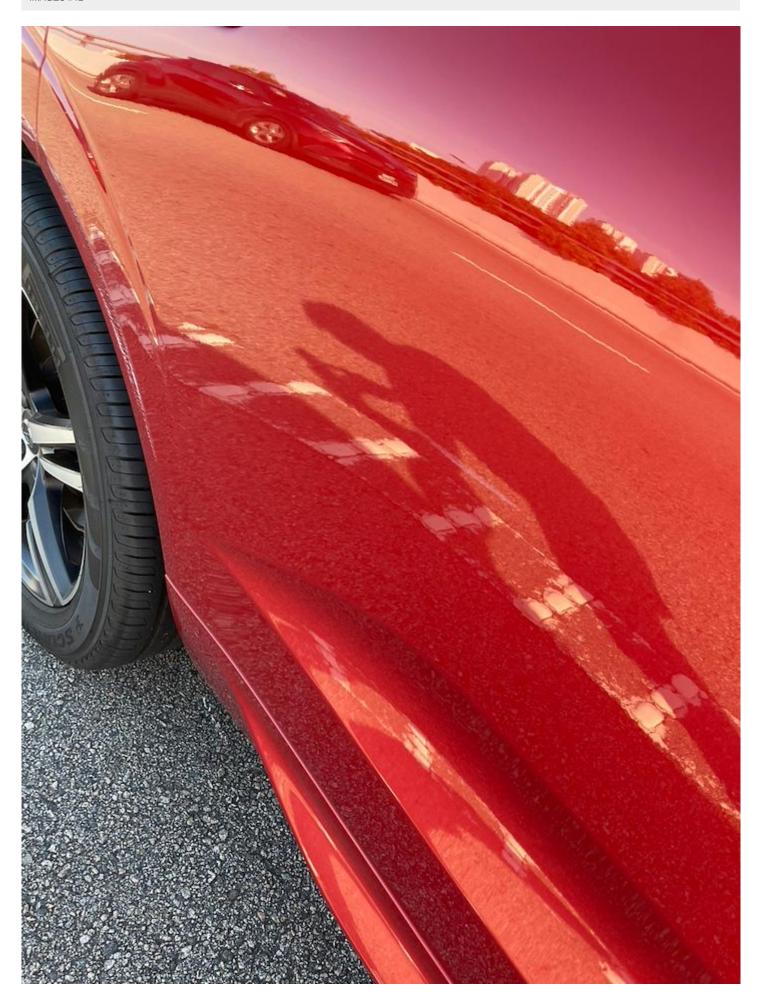


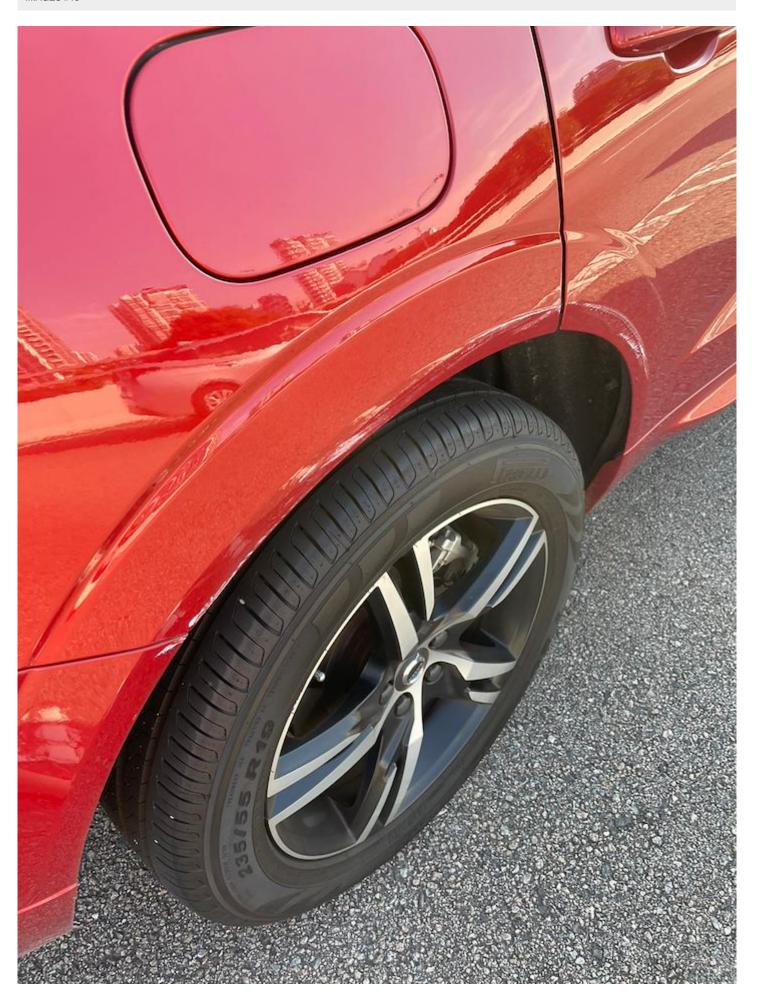


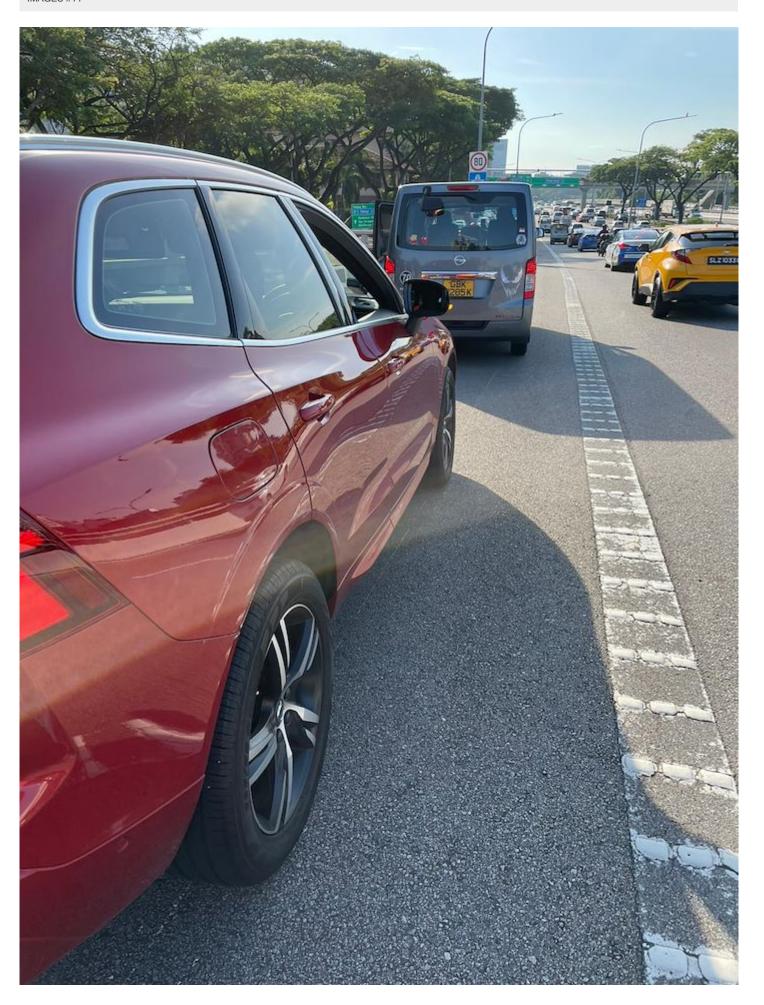


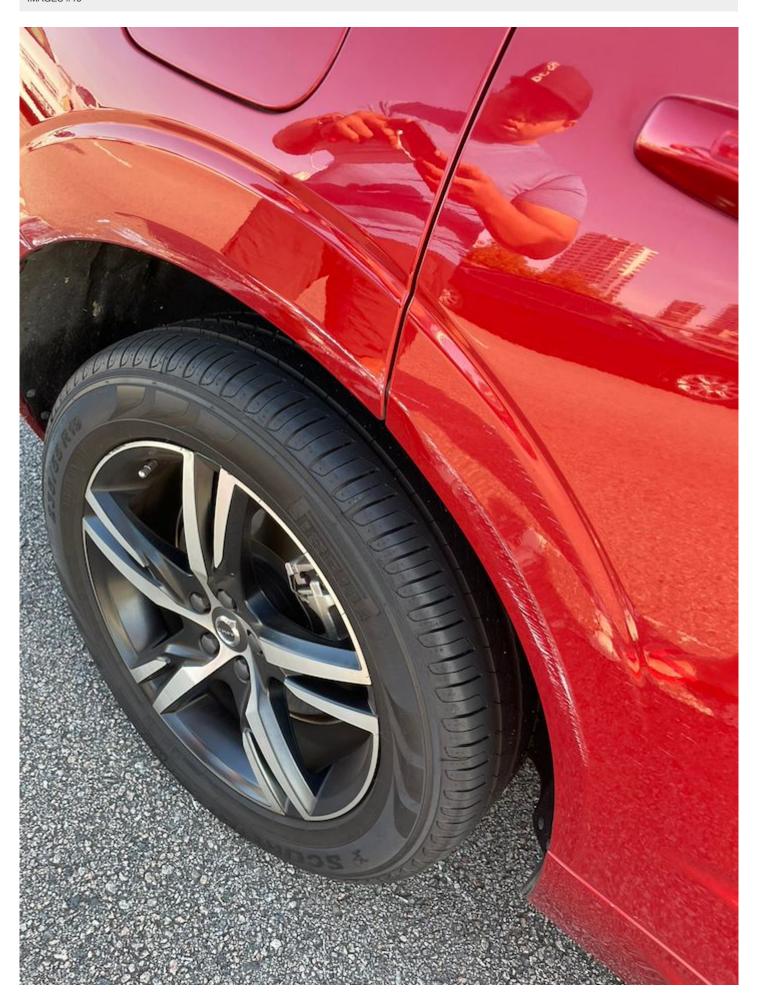


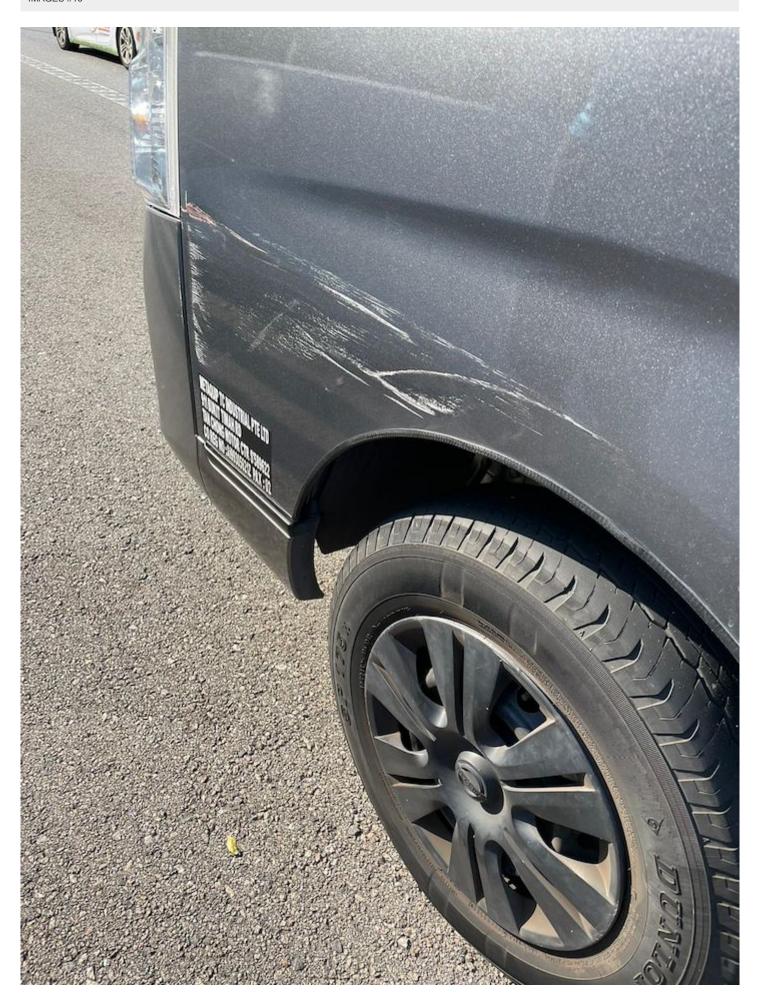


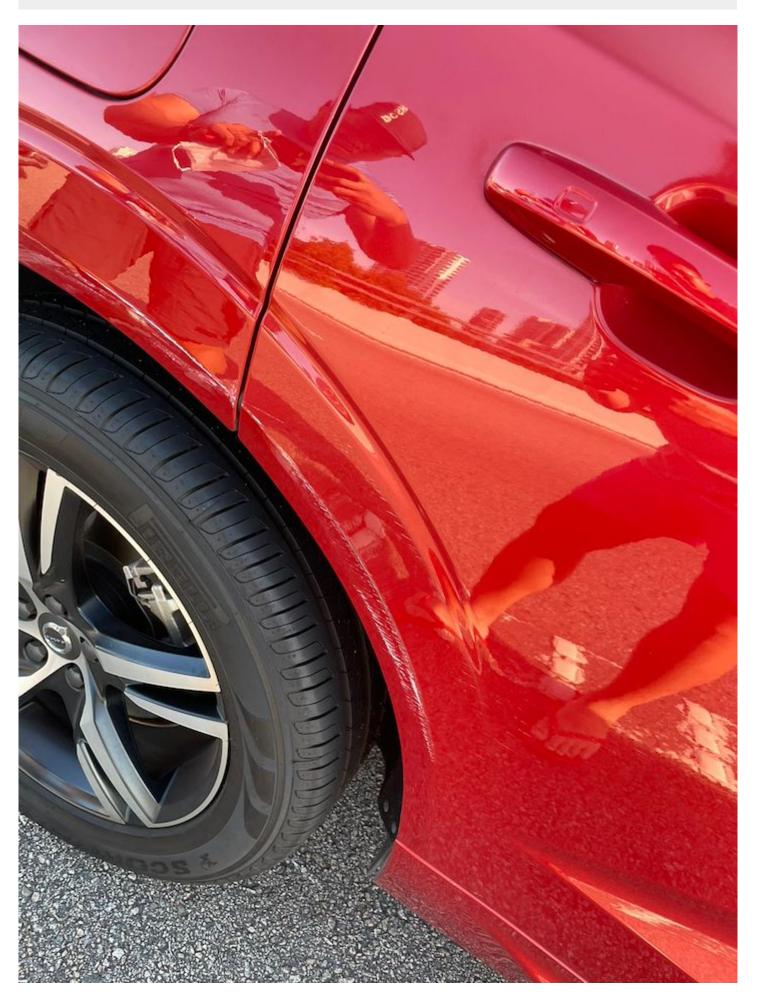


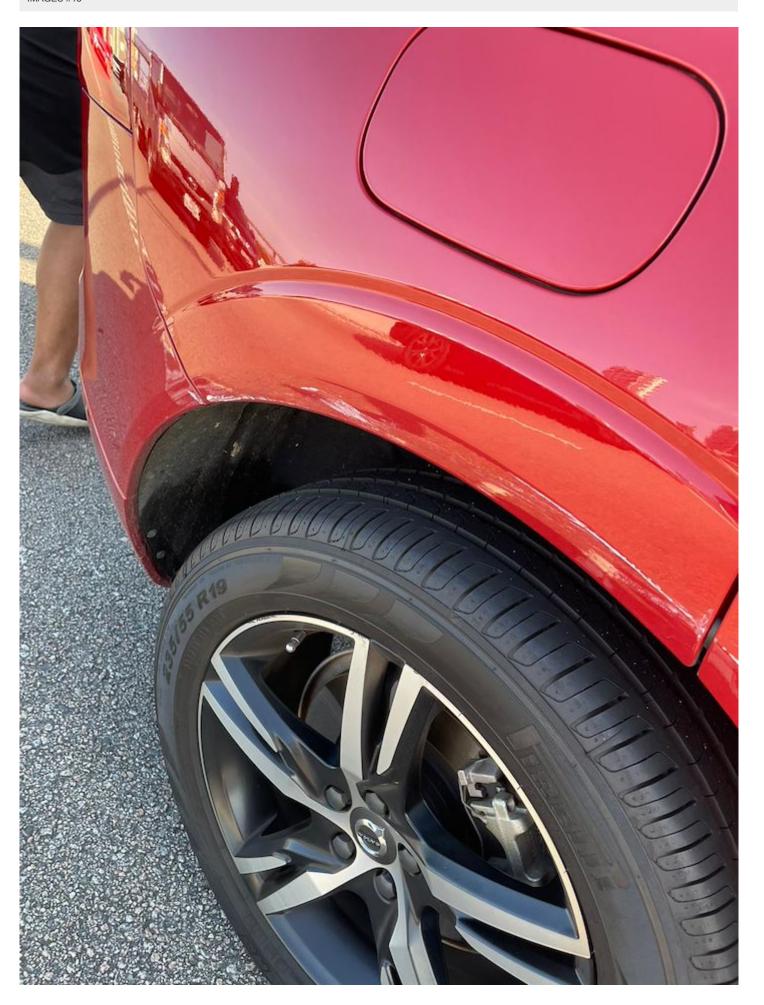




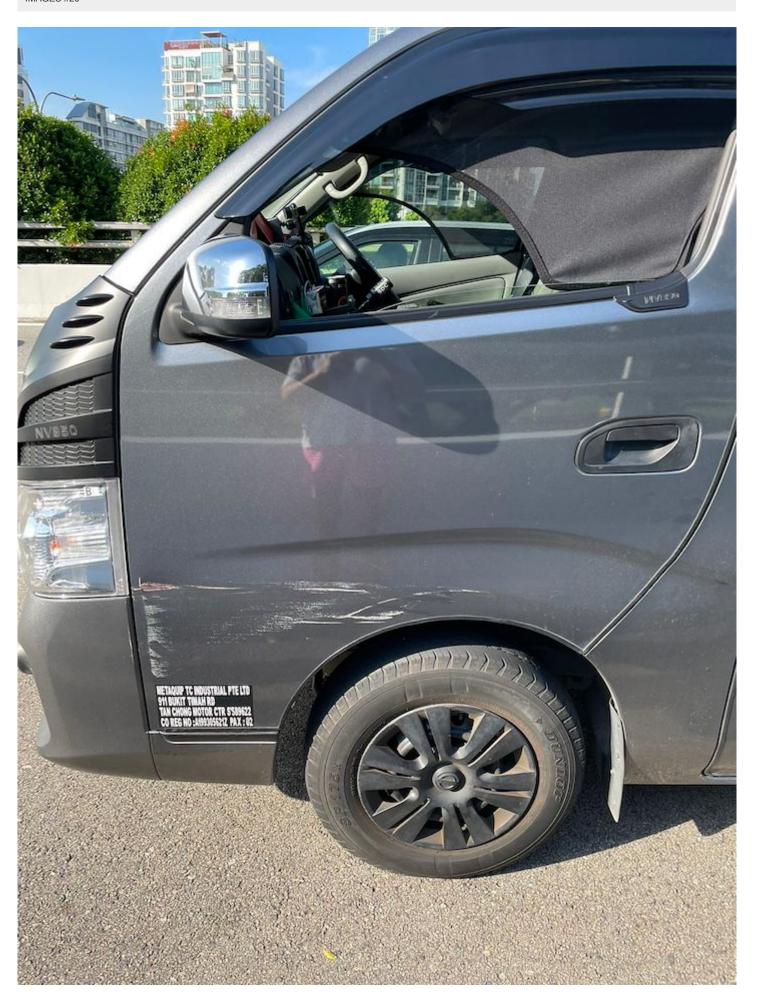














CERTIFICATE OF INSURANCE

COMMERCIAL AUTO COMPREHENSIVE

Name of Individual Policyholder : METAQUIP TC INDUSTRIAL PTE LTD

Master Policy No./Policy No. : 7990000064 / 1220000358

 Period of Insurance
 : 01 Jan 2022 To 31 Dec 2022

 Engine No.
 : YD25081014B

Engine No.

Chassis No. : JN1MC2E26Z0032434 Vehicle No. : GBK8285K

Endorsement No.

Issued Date : 08 Feb 2022 16:34

ABOUT THE COVER

: NISSAN NV350 PANEL VAN

Engine Capacity/Tonnage : 1.5 Tonnage Sum Insured : Market Value First Year of Registration : 2020 Insuring with COE/PARF : Yes Off Peak Car : No Driver Restriction : NA

Person or Classes of Persons Entitled to Drive* :

Any person who is driving on the Policyholder's order or with their permission. This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

Age Condition : All Age Condition Mileage Condition

Limitation as to use* :

LIMITIATION as to USE*:

Use for social, domestic, pleasure purposes and business purposes of the Policyholiders

Use for social, domestic, pleasure purposes and business purposes of any person to whom the Vehicle is hired.

Use for the carnage of passengers or goods (other than for reward) by any person to whom the Vehicle is hired.

This Policy does not dover

1) use for driving furtion, driving test, racing, pace-making, reliabily firal or speed-leating.

2) use whist drewing a trailer

3) use for the towing of any one disabled mechanically propelled vehicle,

4) use for the carnage of passengers for hire or reward by any person to whom the Vehicle is hired; and

5) use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehiclas (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1 Fire - \$0 Own Damage - \$1300 Theft - \$0 Flood Cover - \$1300

Section 2 Property Damage - \$1000

Windscreen: \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).
For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200, Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Ends, 140 applies: Driver must be at least 23 to 70 years old with at least 2 years driving exp. Additional Excess \$3,000 applies for authorised drivers age below 23 years. After above 70 years old &for has less than 2 year relevant driving experience provided that the person is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle. Policy does not cover carrying of passenger for Hire and Reward purpose. The vehicle is strictly to be driven by the person to whom it is hired to. If vehicle is rented to a Company client, the vehicle is not to use to carry passengers for hirefeward.

Hire Purchase Company/Employer's Loan: NA

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189). Part IV of the Road Transport Act, 1987 (Malaysia); Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia); Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia);

0504694000

TAN CHONG CREDIT PTE LTD

913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE

SINGAPORE 589623

Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

