SJ0B22410009 / Jin Auto Services Pte Ltd ENTRY DATE & TIME: 01/04/2022 18:12 (SGT) SUBMITTED BY: Foong Sau Wah VERSION: 1 (01/04/2022 18:12 (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 01/04/2022 18:12 (SGT) Date of Accident 30/03/2022 17:00 (SGT) Exact Location of Accident Singapore Additional Location Information ROSEWOOD BLOCK 7 CONDOMINIUM COMPOUND Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBA7823S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner HUI WANG ENTERPRISE PTE LTD Company Reg No 201426468N **Email Address** admin@huiwangenterprise.com Mobile Phone No (Phone) +65-92370344 Alternative Phone No (Office) +65-92370344

VEHICLE PARTICULARS

Manufacturer Toyota Model Hiace 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? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage ThirdParty Fleet Policy Policy Number DMCVSNA00012982200 Cover Note Number

DRIVER

Name of Driver MUSA BIN MOHAMED SHARIF NRIC No S6809536J

Date Of Birth 07/04/1968 Occupation Outdoor Date Of Driving Pass 30/01/2021 Driving experience 1 YEAR AND 2 MONTHS Gender Mobile Number (Phone) +65-89173398 Alt. Phone Number Email Address admin@huiwangenterprise.com Address BLK 55 CHAI CHEE DRIVE #04-172 Address complement Postcode 460055 Is the driver the policyholder? No 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? Nο 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 WHEN I WAS REVERSING OUT FROM THE PARKING LOT. ACCIDENTALLY HIT ONTO VEHICLE B'S LEFT HAND FRONT PORTION. AFTER THE ACCIDENT, I FORGOT TO WRITE DOWN VEHICLE B'S REGISTRATION NUMBER AND THE DRIVER'S HANDPHONE NUMBER. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberUNKNOWNVehicle ManufacturerHondaVehicle Model-Vehicle Variant-Vehicle ColourBlackVehicle CategoryPrivate hireName of DriverABU BAKAR BIN BARMAWINRIC No\$7419992E

Contact Number	-
Address	_
Address complement	
Postcode	-
nsurance Company Name	_
Nature Of Damage	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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- 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, 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' 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.

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time 01 04 2ン 01550

Witnessed by Reporting Centre Personnel

Sketch Plan

Rosewood Block 7

Condominium Compound

A: GBA 7823S

B: Unknown

Driveway

Driveway

Describe Circumstances of the Accident	
When I was reversing out from the parking lot	
accidentally hit onto vehicle B's left hand fr	unt
1) 00: 11 10:10	
portion. After the accident, I forgot to write	e down
vehicle B's registration number and the drive	75
handphone number.	
and the second of the second o	
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	1000
The second secon	
	0.11.11.10.00

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder Sanate / Date &

Driver's Signature (if driver is not the policyholder) / Date & Time 01 04 | 2022 @ LS50

Witnessed by Reporting Centre Personnel

















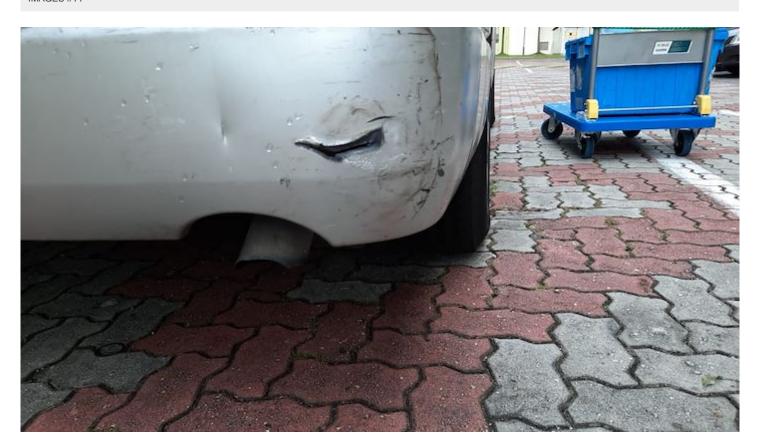


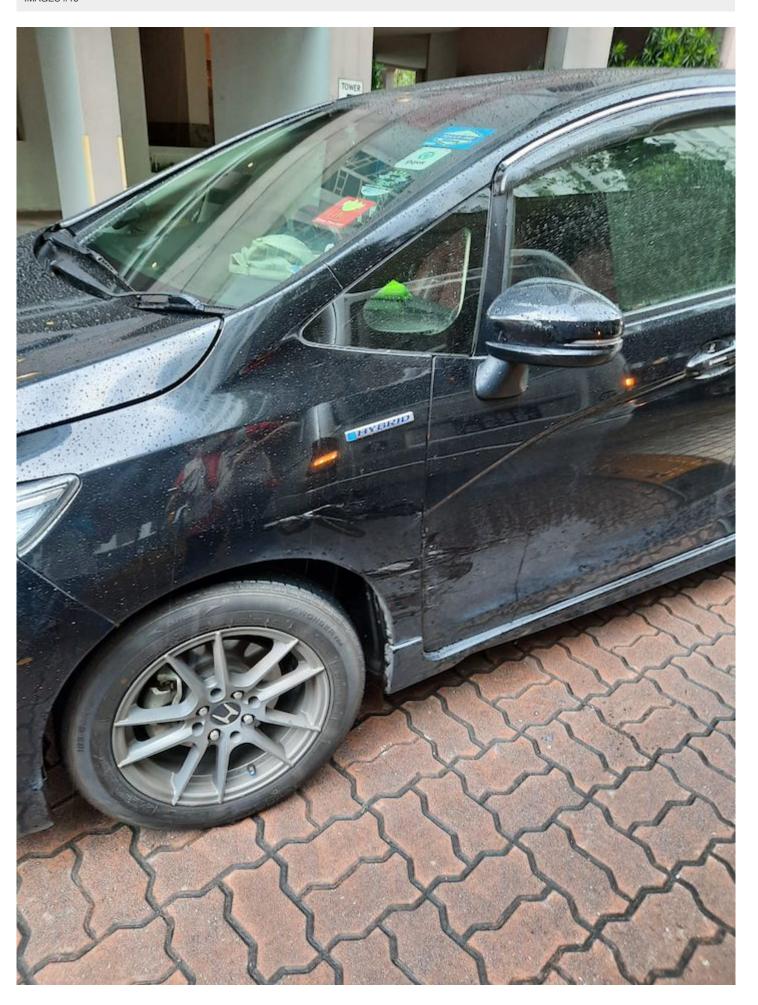












HW 輝皇企業私人有限公司 HUI WANG ENTERPRISE PTE LTD

BLK 5, DEFU LANE 10, # 01-576, SINGAPORE 539186 TEL: 6286 4541, 6283 0717 FAX: 6281 0647

Nº 25110

Co. Reg. No. 201426468N

囉厘, 貨車出租,車輛檢查,修理,噴漆,打嗎呷等 LORRY, VAN RENTAL, VEHICLES INSPECTION, REPAIRING, SPRAY PAINTING, PANEL BEATING, INSURANCE CLAIM, ETC.

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULARS 1 I/We FAST	LINK TEGNSZOFT TRO	1/C No:	
Different From Section 1 of	their least of	Tel No:	- 5-3a
ereby confirm having agreed to hire this day to ental fees as shown below and I agree th and/or damaged caused to the said vehicle and the event of the Vehicle being CONFISCA or not such damage or loss is caused by neg and printed.	at I shall be responsible for the I shall be responsible to pay Messrs TED or any loss resulting from TF	first payment of \$2,000.00 / \$ s Hui Wang Enterprise Pte Ltd the IEFT or DESTRUCTION of the	3,000.00 for any lo value of the vehicle said vehicle wheth
Vehicle Redg. No. 丰號 GSA 7 8-2	35	(Diesel Petrol)	771
Section 1 Hirer's And / Or Driver's Partticulars 利	L卓者\驾驶员個人記錄	日期及取車時間 Date & Time Out: 7 3122	12-03 Pm
Name & Musa Bin mohama	ed sharif	日期及还单時間 Date & Time In:	
Address 地址 BK SS Chai	chee Drive	天教 Days @\$	
204.172	SE. 460055	星期 Weeks @\$	
駕駛執照 Dr/Licence No: I/C No: S68 6 95-36	5 Tel No: 89173398	月 Months @ \$	
截止日期 Expiry Date	Date Of Birth	總數 Nett-Total	
Replacement Veh. Redg. No.	(Diesel / Petrol)	接機金 Deposit りも SUO	1300
日期及取車時間 Date & Time Out:		Refund	and the
日期及还卓時間 Date & Time In:		Balance To Pay	
* Note: A repossession fee of S\$100.00 will be	charged on repossess vehicles	Cash / Cheque	
NOTICES: ACCIDENT EXCESS: \$ 2500		此单油箱 Fuel Tank OUT E 1/8 1/4	$\frac{3}{8} \frac{1}{2} \frac{5}{8} \frac{3}{4} \frac{7}{8}$
NO INSURANCE COVERAGE FOR YOUNG (BELOW), OLD (ABOVE) AND IN EXPERIENCED DRIVERS.		か額費用 Total Additional Charges	
請注意水權里的水及引擎里的黑油損益 Please check Radiator Water & Engir			
半途汽油不足,這失鑰匙等、若須服料 Extra charges are required for those	等者另付额外费用。 vehicle that run out of petrol, lost of key	and etc.	
Interest rate of 1.5% will be charged of	on overdue payments		
Eg-	IMPORTANT!		
I / We declare that the usage of rentin offences in connection with thefts, un	ng the above mention Vehicle a	re not to be used for illegal p	purpose, includin
	,	-> W	大
		Signat	ture of Hirer
We hereby accept the terms and conditions her nd understood by me. I/We hereby declare that he holder of a valid driving licence enal	the particulars of the Hirer and licer	ice given above are correct in every	respect and that I a
	10.00		· ·
emarks:		MARLE	Λ