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 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 20/04/2022 15:26 (SGT) Date of Accident 19/04/2022 12:30 (SGT) Exact Location of Accident 1 HarbourFront Walk, Singapore 098585 Additional Location Information **CARPARK** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Lexus

Vehicle Registration Number SMJ5893A

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner HONG SEH MOTORS PTE LTD Company Reg No 1XXXXX320D Email Address kenlow@hongseh.com.sg Mobile Phone No (Phone) +65-97243211 Alternative Phone No (Office) +65-62661555

VEHICLE PARTICULARS

Manufacturer

Model Nx300h Variant Exact purpose for which vehicle was being used at time of Private use accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Commercial vehicle Transmission Auto CC 2494

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 7990000073/1220001052 Cover Note Number

DRIVER

Name of Driver **BRANS LARA INDRAWATI** Passport No/FIN GXXXX973N

Date Of Birth 03/10/1967 Occupation Indoor Date Of Driving Pass 17/01/2020 Driving experience 2 YEARS AND 3 MONTHS Gender Female Mobile Number (Phone) +65-97243211 Alt. Phone Number Email Address kenlow@hongseh.com.sg Address 32 OCEAN DRIVE Address complement Postcode 098228 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 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? 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 PLEASE REFER TO SKETCH PLAN 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 SMV8666G Vehicle Manufacturer Vehicle Model Vehicle Variant

Private car

Address complement	
Accident report	SN08224K0003

Vehicle Colour
Vehicle Category

Name of Driver
Contact Number
Address

Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident - No. Of Passenger (Including Driver) -

SKETCH PLAN

IMPORTANT NOTICE

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- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding 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
- 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 (GM) 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)

Lunderstand, 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' 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' 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.

Policyholder's Signature / Date &

Sketch Plan

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

Vehicle A: SmJ 5893A

Witnessed by Reporting Centre

Personnel

Lehide & smy 8666 G

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Declaration

We declare the foregoing particulars are true in every respect.

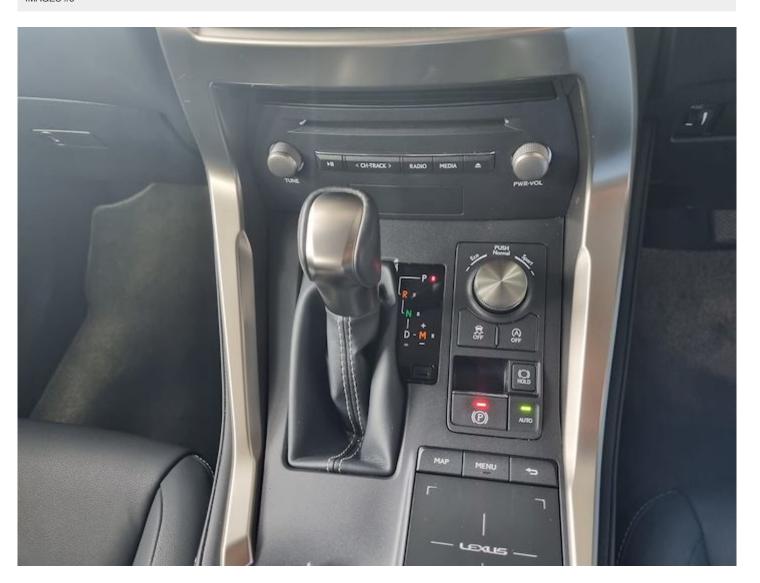
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel







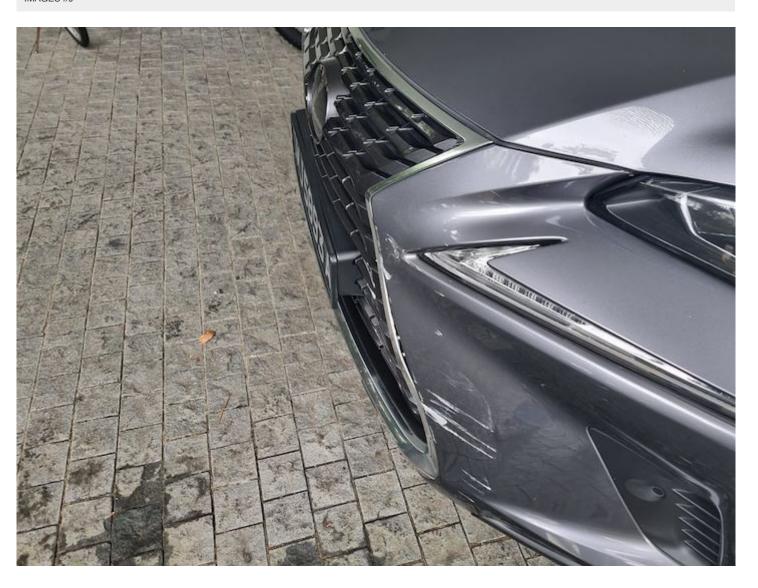






















Operating Lease Agreement - Schedule

Pariles		Regal Capits					
Contract No	104	Commencement of I End of of Lease Per		14-Mar-19 13-Mar-23	Committee of the commit		
Agreement Date	: 14-Mar-19	Lease Period		48	months		
Owner/Lessor (inc	cludes its assigns and successors)	First rental due on		14-Mar-19	and the		
Hong Seh Mo	[[[] [] [] [] [] [] [] [] [] [] [] [] []		due on the same	day of each successive			
		rimounts	Quarter	half-year	year		
Lessee:	Ms Brans Lara Indrawati	Rental			No. of		
	G3824973N (Co Rep N. NEE)	Amount	GST	TOTAL	Rentals		
		SS 2,770.00	S\$ 193.90	SS 2,963.90	48		
Address:	41 Ocean Drive	-					
	Singapore 098188 Hp: 97243211	Total rent payable		SS 132,960.00			
	110.71273211	Total GST		SS 9,307.20			
Principal Driver:	Ms Brans Lara Indrawati	200400000					
Address:	41 Ocean Drive	Total due over full to	enn	SS 142,267.20			
	Singapore 098188						
	Hp: 97243211	Additional kilometro	es (rofer "Tonns as	nd Conditions") will be	v		
Alternate Driver:	Mr Whitfield Gary Martyn	charged at SS	0	per kilometre			
Address:	41 Ocean Drive	- Changes III					
nouress.	Singapore 098188						
	Hp: 90296180	Insurance excess:		driver age 23 to 65 a			
Visite Orașile		5	full, valid appropriat	and current driving lic	ense in the		
BOX THE PROPERTY.		0.		Motors Pte Ltd reserv	es the right to		
New New	Used		increase th	ne excess in the event of mage claim per year.			
Make / Model:	Lexus NX 300 Executive	Republika Deposi		Barrier Co. Co.			
Year of Manufact	ure: 2018	rite/apparent Course	Charles and the				
		Refundable Deposit	S\$8310.0	0			
Engine No:	8ARW951648	Optional Services	SECTION		WASTING NO.		
Chassis No:	JTJBARBZ002196741	Superior services	ing lasters				
Chassis No.	717071102002170741	Maintenance :	Included	Not Included			
Vehicle Regn No.	SMJ5893A						
Accessories:	Dual Channel Dashcam with SD card	Replacement Car:	Included	Not Included			
NO.	CONTRACTOR OF THE CONTRACTOR O				MALE HOUSE		
this Operating Le	owledges, agrees and declares that the provisions case Agreement. The Lessee acknowledges re- civery of the Vehicle.	above and in the Terms and Con-	Conditions are tog ditions to the ex-	gether incorporated in ecution of this docu	and form a part of ment. The Lessec		
Signed by the Le For and behalf o	" LEN BLAN	Accepted by:	Hong S	ch Motor Free t	G OTORS		
Name :	GARY WHITFIELD	ii.	Name : K	on Low			
Designation :	ρ_{l}		Designati	on Head, Car Leasin	T.		
Witness By	U5,			N			
Name :	In Chan						
	ran Cour	W-00		L 2010			
Date	14th March 2019	Date	14th Man	ch 2019			