SJ0B225I0005 / Jin Auto Services Pte Ltd ENTRY DATE & TIME: 18/05/2022 17:31 (SGT) SUBMITTED BY: Foong Sau Wah VERSION: 1 (18/05/2022 17:31 (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.

- 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 18/05/2022 17:31 (SGT) Date of Accident 20/04/2022 10:00 (SGT) Exact Location of Accident Singapore Additional Location Information SONG LIN BUILDING CARPARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBC453I

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner HUI WANG ENTERPRISE PTE LTD Company Reg No 201426468N **Email Address** winson.tan@huiwangenterprise.com Mobile Phone No (Phone) +65-62864541 Alternative Phone No (Office) +65-62864541

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 **EASIN** Passport No/FIN G6721726N Date Of Birth 01/01/1988 Occupation Outdoor Date Of Driving Pass 30/03/2021 Driving experience 1 YEAR AND 1 MONTH Gender Mobile Number (Phone) +65-90816076 Alt. Phone Number Email Address sggee@singnet.com.sg Address 700 LORONG 1 TOA PAYOH TRELLIS TOWERS Address complement Postcode 319773 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured HIRER'S EMPLOYEE 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 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? 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? Nο PASSENGER 1 Name MR. CHUA Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS DRIVING OUT FROM PARKING LOT. I ACCIDENTALLY HIT VEHICLE B WHICH WAS ON MY LEFT SIDE. 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 SMD4591J

Honda

Vehicle Manufacturer

Vehicle Model
Vehicle Variant
Vehicle Colour

| Vehicle Category | Private car |
|---|-------------|
| Name of Driver | - |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | _ |
| Details of property damaged in accident | _ |
| No. Of Passenger (Including Driver) | 0 |

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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' 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' 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 & Time (8 - 0.5 - 2022)
Sketch Plan

Driver's Signature (if driver is not the policyholder) / Date & Time (8 - 0.5 - 2022)

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Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Driver's Signature (If driver is not the volicyholder) / Date & Time 18-01-2022 2-13 pm

Witnessed by Reporting Centre Personnel













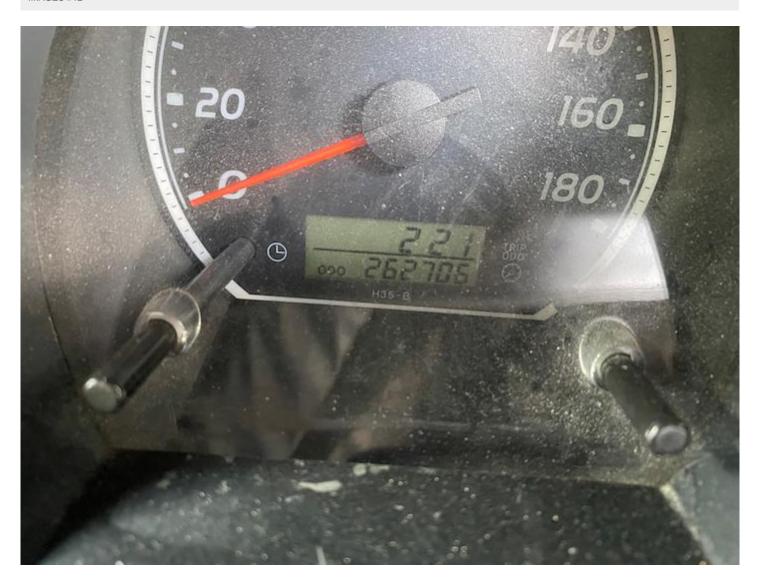


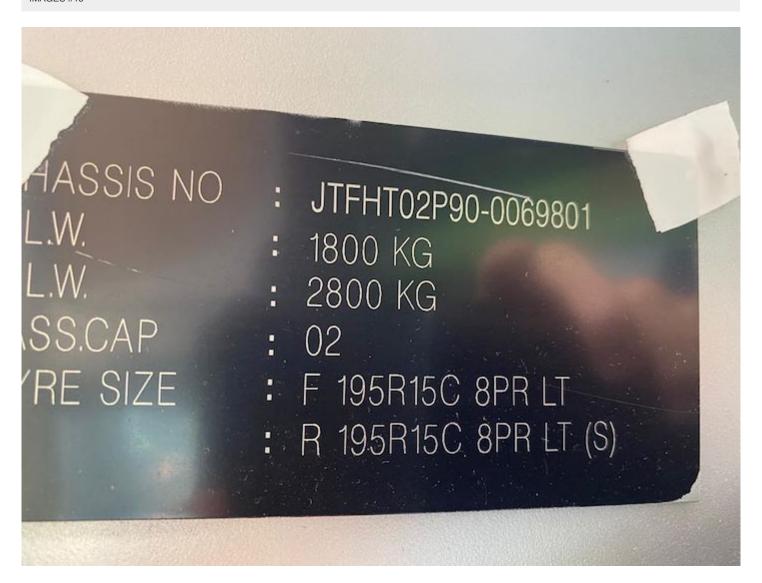




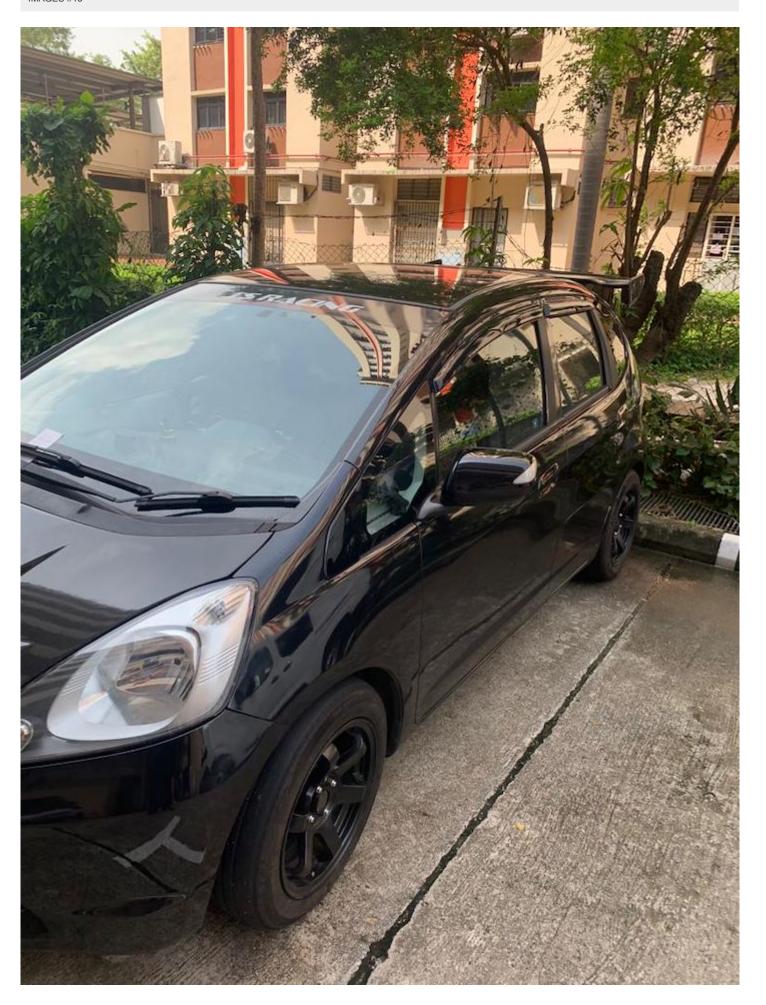


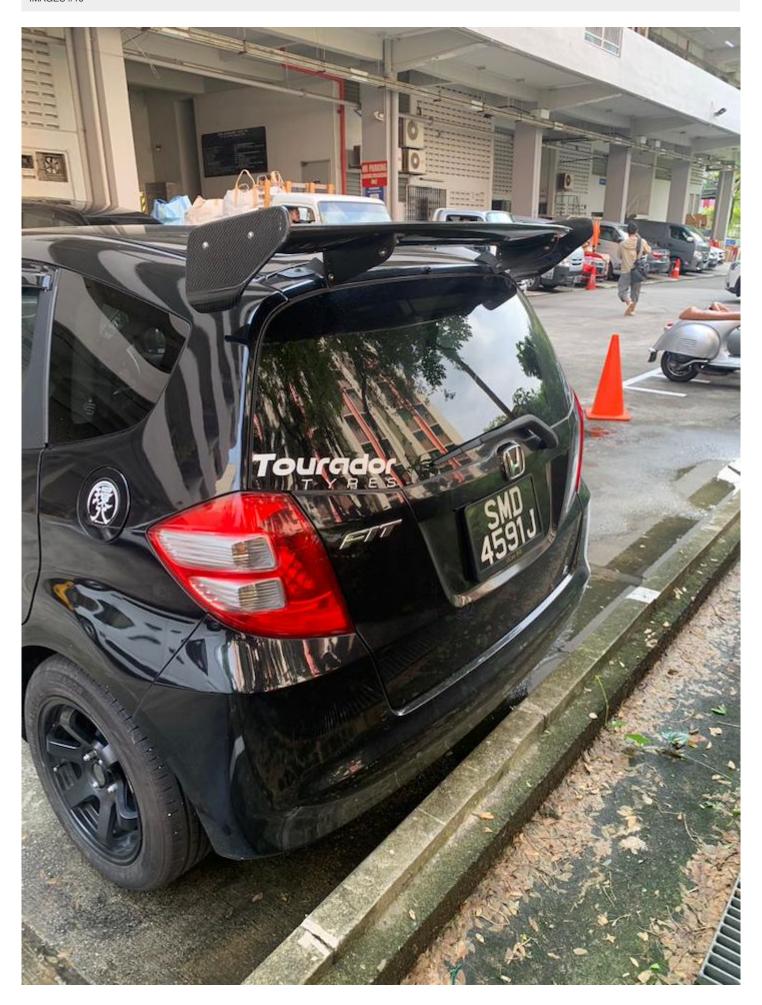


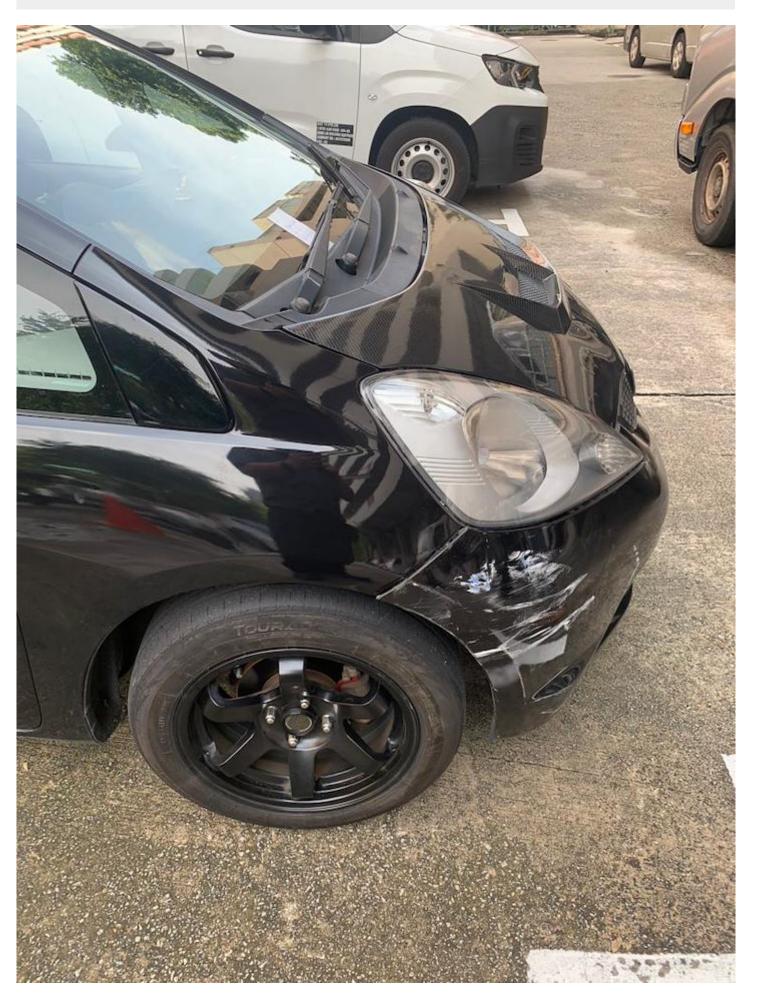


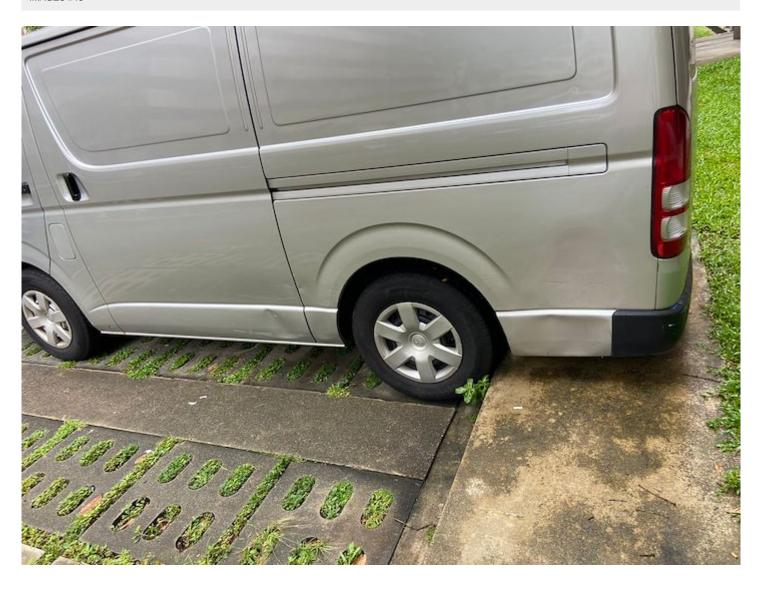














HW # 望企業私人有限公司 HUI WANG ENTERPRISE PTE LTD

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

Nº 23427

Co. Reg. No. 201426468N

· 順度。 貨車出租。 車輛檢查 ,修理,噴漆 ,打吗唧等 LORRY, VAN RENTAL, VEHICLES INSPECTION, REPAIRING, SPRAY PAINTING, PANEL BEATING, INSURANCE CLAIM, ETC.

VEHICLE RENTAL AGREEMENT

| HIRER'S PARTICULARS 1 1/We_ | Kansen Engineering Pta | Ltd I/C No: |
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| ental fees as shown below and it nd/or damaged caused to the said vote event of the Vehicle being CC | agree that I shall be responsible chicle and I shall be responsible to pay DNFISCATED or any loss resulting fr | orise Pte Ltd the undermentioned NEW/USED Vehicles at the first payment of \$2,000.00 / \$3,000.00 for any loss Messrs Hui Wang Enterprise Pte Ltd the value of the vehicle from THEFT or DESTRUCTION of the said vehicle whether the of the terms and conditions of hire, hereinafter mentioned |
| Vehicle Redg, No. 单號 | GBC 453 L. | (Diesel) Petrol) |
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| d understood by me. I/We hereby de holder of a valid driving lice | eclare that the particulars of the Hirer as once enabing me to drive the abo | read and understood or have been read over and explain to me d licence given above are correct in every respect and that I am ve-mentioned vehicle and not disqualified from driving |
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