SS1Y226E0009 / SME MOTOR PTE LTD ENTRY DATE & TIME: 14/06/2022 15:35 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (14/06/2022 15:35 (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 14/06/2022 15:35 (SGT) Date of Accident 11/06/2022 11:05 (SGT) Exact Location of Accident New Upper Changi Rd, Singapore Additional Location Information TWDS CHANGI RD BEFORE CHAI CHEE RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Fiat

Vehicle Registration Number GBB5199T

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **ESJAY GLOBAL PTE LTD** Company Reg No 202029634C **Email Address** samad8118@yahoo.com Mobile Phone No (Phone) +65-87178118 Alternative Phone No +65-87178118

VEHICLE PARTICULARS

Manufacturer

Model Doblo Variant 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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 1248

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMCG21013994 Cover Note Number

DRIVER

Name of Driver SAMAD BIN SALIM NRIC No. S0074217A

Date Of Birth 11/11/1952 Occupation Outdoor Date Of Driving Pass 03/06/1977 Driving experience 45 YEARS Gender Male Mobile Number (Phone) +65-87178118 Alt. Phone Number Email Address samad8118@yahoo.com Address 208 UPPER EAST COAST ROAD #08-05 Address complement Postcode 455287 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured **DIRECTOR** 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 Chain Collision 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? Yes 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 **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 I WAS STATIONARY ALONG NEW UPPER CHANGI ROAD TOWARDS CHANGI ROAD BEFORE CHAI CHEE ROAD. VEHICLE IN FRONT OF ME STARTED SLOWING DOWN AND CAME TO A STOP AS TRAFFIC LIGHT WAS RED. I DID AND KEPT A SAFE DISTANCE. AFTER 10-20 SECONDS, I SUDDENLY FELT A HUGE IMPACT COMING FROM THE REAR OF MY VEHICLE. THE IMPACT THEN CAUSED MY VEHICLE TO THRUST FORWARD AND HIT ONTO VEHICLE C. I GOT DOWN MY VEHICLE AND REALISED I WAS INVOLVED IN A 3 CARS CHAIN COLLISION. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

SMH6127H

SMH6127H

Private car

| Contact Number | - |
|---|-----------|
| Address | _ |
| Address complement | _ |
| Postcode | _ |
| Insurance Company Name | _ |
| Nature Of Damage | - |
| Details of property damaged in accident | VEHICLE B |
| No. Of Passenger (Including Driver) | 2 |

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SNA7114M 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 **VEHICLE B** No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

| Name of injured person Gender Phone No Address | SAMAD BIN SALIM Male - |
|---|------------------------------|
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | GBB5199T |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | No |

SKETCH PLAN

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- 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)

l 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 & Driver's Signature (if driver is not the policyholder) / Date Reporting Centre Personnel

Sketch Plan

A. G.B.B. STOCH TO B. SMH. 6127 H. C. SMA 7114 M.

Liens Most grand, by

Describe Circumstances of the Accident NOS Charonord 0/010 WW jarons roper dowalds Change Sydre Chai Elee 30,20 Mossili 90 Stottes Huffic 1:9/1 183 5/00/20 gown wy COMOS 03/ 45892 Safe Surstail 48/84 - 0/ ac securs Sufferia 413 Som uring impact How He Yest will. 511 : mous Strictor rest Some formy. 90 Howard Sin 0410 1.4 A SISHOV SUMBU 309 Sout m org realise NOS Sulwai 11 5 cor Noizinas

Declaration

We declare the foregoing particulars are true in every respect.

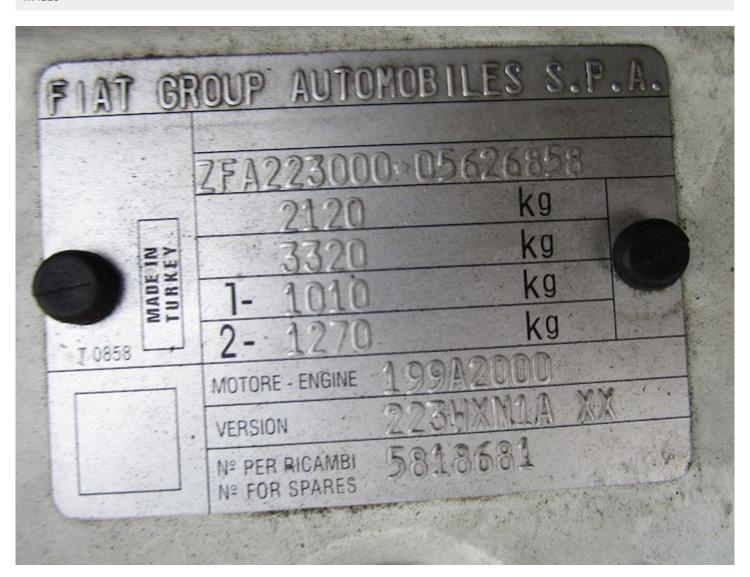
CO COMPANY OF THE PARTY OF THE

Policyholder's Signature / Date &

Time

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

Witnessed by Reporting Centre Personnel



















Sona

ERGO

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1980
ROAD TRANSPORT ACT, 1987 [MALAYSIA]
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1995 [MALAYSIA]
ROAD TRANSPORT (AMENDMENT) ACT 2019 [MALAYSIA]

Certificate/Policy Number

: DMCG21013994

Vehicle Registration Number

: GB85199T

: Comprehensive

Name of Policyholder/Insured

: Commercial Vehicle (Pte Use)

: ESJAY GLOBAL PTE LTD

Commencement Date of Insurance

: 27/11/2021

Explry Date of Insurance

: 26/11/2022

EXCESS: (SECTION I).

ADD1. EXCESS: NON-AUTH WORKSHOPS (SECTION I).
EXCESS: WINDSCREEN COVER(VEH BELOW 10 TONS).
YOUNGAINEXP DRIVERS(SECTION I).

FLASH

24-Hour Helpline: 6100 1620

500.00 300.00 100.00

Finance Company/Hire Purchase Owner: B-T-S-C AGENCY

*Persons or Classes of Persons entitled to drive:

The Policyholder
 Any Person who is driving on the Policyholder's order or permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- Use in connection with the Policyholder's business
 Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
 Use for social domestic and pleasure purposes

- This Policy does not cover:

 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing

 2) Use whilst drawing a trailer except the towing of any one disabled machanically propelled vehicle

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the load Transport Act, 1987 (Malaysia) are not to be included under these headings (*).

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Moter Vehicles (Third Party Risks and Compensation) Act (Chapter 189), the Moter Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of ERGO Insurance Pte. Ltd. Approved Insurer

Karl- Keint Jung

Authorized Signature

A100058 SONA INSURANCE AGENCIES PTE LTD

Vehicle Chassis Number : ZFA22300005626858, Vehicle Engina Number : 199A20002753753

CP1, 15/11/2021 12:40

ERGO Insurance Pte. Ltd. Co. Reg. No.: 199305211H GST Reg. No.: M2-0116930-5 8 Ternasek Boutevard #04-01 Suntec Tower Three Singapore 038988 Tel: +65 6829 9199 Fax: +65 6829 9248 www.ergo.com.sg