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.

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 08/07/2022 15:21 (SGT) Reported by Date of Accident 07/07/2022 11:45 (SGT) Exact Location of Accident Mosque St, Singapore Additional Location Information **CARPARK** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Lexus

Vehicle Registration Number SJA8583H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ONG KHOON CHUAH NRIC No S6926362C Email Address desmond kimhock@yahoo.com Mobile Phone No (Phone) +65-81111551 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Rx350 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 your vehicle? No - Claiming third party

Vehicle Category Private car Transmission Auto CC 3500

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Policy Number / Cover Note Number 5102226894-03

DRIVER

Name of Driver ONG KHOON CHUAH NRIC No S6926362C Date Of Birth 30/07/1969 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	25/08/1987 34 YEARS AND 11 MONTHS Male (Phone) +65-81111551 - desmond_kimhock@yahoo.com BLK 194 WESTWOOD AVE #12-30 - 648152 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? 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? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
MY VEHILCE A WAS PARKING AT THE LOT. VEHICLE B(GBG9: (SJA8583H) FRONT RIGHT PORTION.	382X) START REVERSE AND HIT ONTO MY VEHICLE A
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	GBG9382C - - -

Commercial vehicle

Vehicle Category

(Phone) +65-91517165
<u>-</u>
-
-
-
-
VEHICLE B
-

SKETCH PLAN

MECRYANT NOTICE

- 1. Rease report <u>notice tily</u> the datalia of the socident to speed up the claims process.
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- 7. By the lodgement of this report to the insurans, 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 Parsonal Data Proteotion Act (PDPA)

lunderstand, acknowledge, agree and consentings;

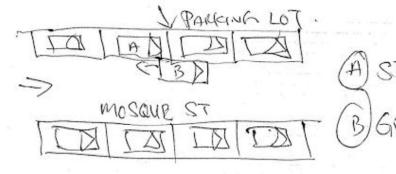
- (2) We insured , my workshop and the Geberal Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by the or cossessed by my insurer (collectively the "Paraonal Information") and displace and transfer such Personal information to all insurers who have insured vanicle(s) involved in this accident (all insurer(s) who have insured vahicle(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 sity relevant government agency authority (auch as the police), for the purposers of :
- percessing, handling and or desing with my claims including the settlement of the claims and any necessary investigations relating to se alzine:
- a) investigating the applicant studios my classes:
- 3) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims. Including the making of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal cats about his to bring about delivery of the same as well as on the external cover of envelopes mail
- vi complying with applicable law in administering, processing, handling and/or dealing with my claims. collectively the "Purposes")
- b) all insurer(s) who have insured various involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect use, disclose and or probase my Personal information for one or more of the above Purposes; and
- .c) my Personal Information may/can be disclosed by any of the insurars and/or GA to their third party service providers or agents naturally their law yers few forms), which may be shed outside of Singapore, for one or more of the above Purposes,

Policyholder's Signature / Date &

Oriver's Signature (8 driver is not the policyholder) / Date & Three

Witnessed by Reporting Centre Personnel

Sketch Plan

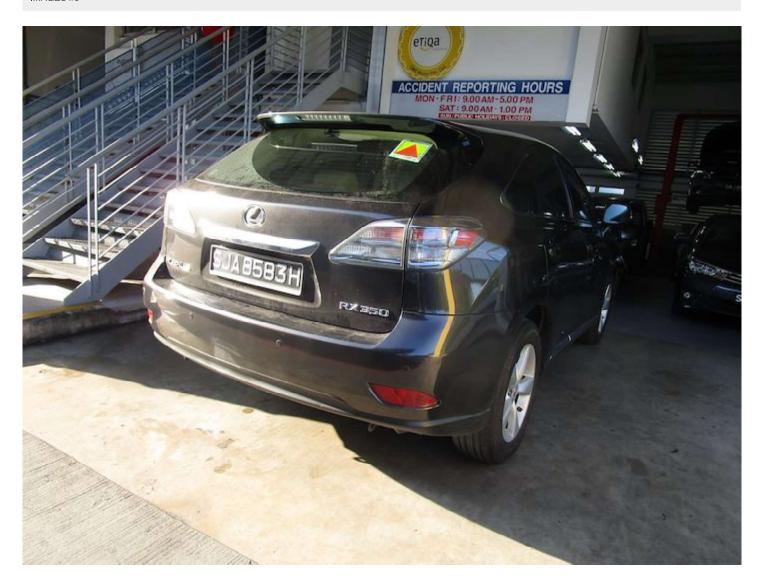


Accident report SS2X2278000B

My UR	HICCR (A) WAS	PAKKING AT	THE LOT URHROLE
61861 9382C	STAYET BRURINGS	TIH GOOD HIT	ODTO MY VEHICLE (F
3148283H	FRONT RIGHT POR	· COOT	
DIMENS -			
		TWO	
ration			
clars the forepoing particu	lars are true in svery respect.		
11/	.17		
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1 / V	110		















Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5102226894-03

1. Index mark and Registration Number of Vehicle

: SJA8583H

Chassis Number

: JTJBK11A202412681

Cover : drivo CLASSIC

2. Name of Policyholder

: ONG KHOON CHUAH

3. Effective Date of Insurance

: 15 Jul 2021

4. Expiry Date of Insurance

: 14 Jul 2022

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

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

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1) : N/A EXCESS (SECTION 2) : N/A WINDSCREEN EXCESS

: \$\$100 ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : YES NCD PROTECTION : YES (FREE) TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : YES

PRIMARY DRIVER : ONG KHOON CHUAH NAMED DRIVER (1) : ONG QLIJA SAMUEL NAMED DRIVER (2) : ONG QI XUAN SAMSON

HIRE PURCHASE COMPANY : TOKYO CENTURY LEASING (SINGAPORE) PTE LTD SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

: INXPRESS INSURANCE AGENCY PTE. LTD. (00000610870)

Date of Issue

: 11 Jun 2021 17:09 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive