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	06/05/2022 14:32 (SGT)
Date of Accident	06/05/2022 08:02 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	Towards City (near lamp post 117F)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ62P

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM NAIZHI, DAYNA (LIN NAIZHI, DAYNA)
NRIC No	S8412316A
Email Address	daynalvin03@hotmail.com
Mobile Phone No	(Phone) +65-97341368
Alternative Phone No	+65-97341368

VEHICLE PARTICULARS

Manufacturer	Porsche
Model	Cayenne
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 your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	3000

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNA00057772201
Cover Note Number	-

DRIVER

Name of Driver	LIM NAIZHI, DAYNA (LIN NAIZHI, DAYNA)
NRIC No	S8412316A

Date Of Birth	13/04/1984
Occupation	Indoor
Date Of Driving Pass	25/04/2017
Driving experience	5 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-97341368
Alt. Phone Number	+65-97341368
Email Address	daynalvin03@hotmail.com
Address	31 Luxus Hill Avenue
Address complement	-
Postcode	804830
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
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	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Tan Renez L'ea
Gender	Female

PASSENGER 2

Name	Tan Reia
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Thomson Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004529999
Alt. Police Station Phone No	(Fax) +65-65535740
Police Station Address	Blk 25 Sin Ming Road #01-180 Singapore 570025
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to the sketch plan.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD4442R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	Tan Pau Soon
NRIC No	S0059168H
Contact Number	(Phone) +65-97912492
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	Lim Naizhi, Dayna
Gender	Female
Phone No	(Phone) +65-97341368
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Ribcage and shoulders.
Injured person in which vehicle?	SLQ62P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

06 May 2022

Policyholder's Signature / Date & Time

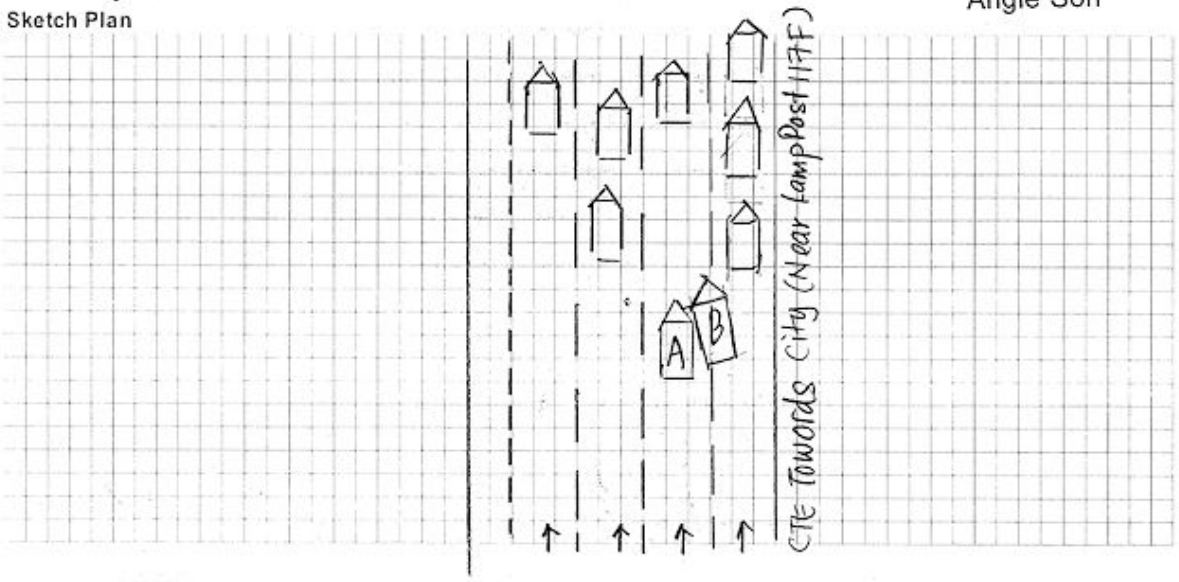
06 May 2022

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

Witnessed by Reporting Centre Personnel

Angie Soh

Sketch Plan



DESCRIBE CIRCUMSTNCES OF THE ACCIDENT

On 6 May 2022, I was driving along CTE towards city, near lampost 117F. I was with my 2 children on board. I was driving on lane 2. Shortly after, a taxi changed lane and hit me on my right back door. There was an impact. I quickly stop my car and turn on my hazard lights to ask if my children are fine. After which, I shifted my car to the road shoulder and exchange details with the taxi driver.

DECLARATION

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

6 May 2022

Policyholder's Signature / Date Time

6 MAY 2022

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

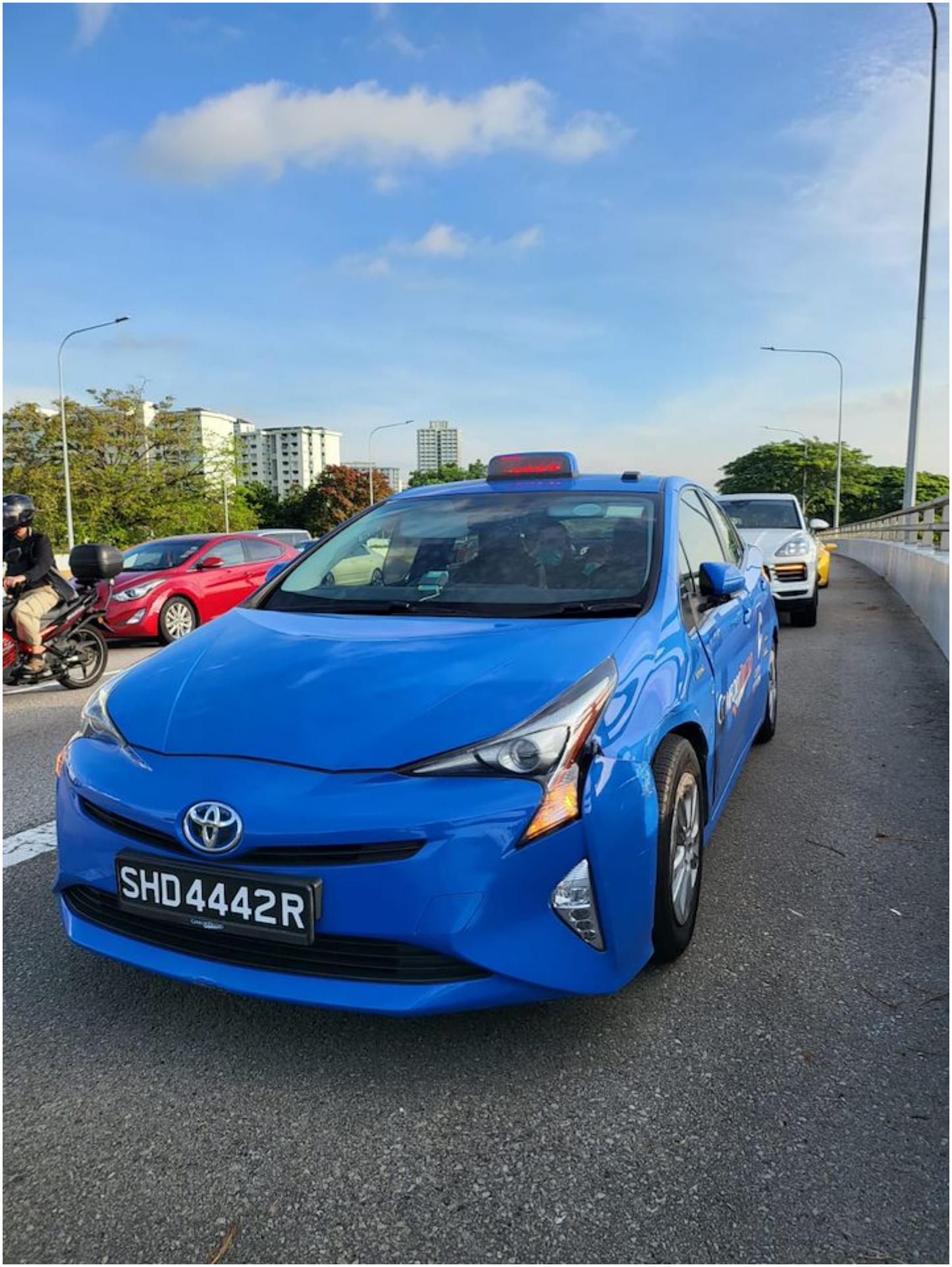
Witnessed by Reporting Centre Personnal

Angie Soh

IMAGES

IMAGES #2

IMAGES #3



IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9

IMAGES #10

IMAGES #11

SINGAPORE POLICE FORCE

T/20220506/2037

Report No. T/20220506/2037

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
06/05/2022 13:04		21

Information of Informant

Name of Informant: LIM NAIZHI, DAYNA			Address: 31 LUXUS HILL AVENUE SINGAPORE 804830	
ID Type / ID No.: NRIC NO / S8412316A			Contact No.: Home/Office: Mobile: 97341368	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 38	Date of Birth: 13/04/1984	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: STOCKBROKER			Driving Licence Information: Class: 3A	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/05/2022 08:00	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY Lamp Post Number: 117F				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No. of Passenger
SHD4442R	Car					0
SLQ62P	Car	PORSCHE	CAYENNE V6 3.0I	White	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLQ62P	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNA0005777 2201	29/03/2022	28/03/2023

SINGAPORE POLICE FORCE

T/20220506/2037

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

Report No. T/20220506/2037

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	TAN PAU SOON	ID No.	S0059168H
Related Vehicle	SHD4442R (Car)	Contact No.	97912492
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LIM NAIZHI, DAYNA	ID No.	S8412316A
Related Vehicle	SLQ62P (Car)	Contact No.	97341368
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	06/05/2022	Date Discharge	06/05/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the above mentioned date and time, I was driving my vehicle (SLQ62P) along CTE towards City. I had two passengers (my two children) with me inside my vehicle.

While I was driving my vehicle on lane two of the road, a taxi (SHD4442R) from lane one filter in to my lane and side swiped my vehicle. I stopped my vehicle to make a check on my two children to see if they are fine. I then drove to the road shoulder to make a check on my vehicle and exchange particulars with the taxi driver. The right driver and passenger doors of my vehicle were dented in due to the collision. I also manage to exchange particulars with the other party and we subsequently left.

I then sent my children to school and went to the workshop and then went to Mount Alvernia Hospital as I felt pain on my ribcage and my shoulders. I received 3 days MC dated from 06/05/2022 to 08/05/2022.

SINGAPORE POLICE FORCE

T/20220506/2037

Report No. T/20220506/2037

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE 570025
Tel No: 1800-4529999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report: E / SGT 3 MUHAMMAD TAUFIQ BIN ISHAK	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/05/2022 13:04
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:

NP168

中国太平 CHINA TAIPING

中国太平保险（新加坡）有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

R SN

AN0478A

Cov. Type:C

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)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Engine No.: DCB021611

CERTIFICATE No. DMPCSNA00057772201

Cha. No.:WP1ZZZ9YZKDA01331

1. Index Mark and Registration Number of Vehicle: SLQ62P

2. Name of Policy Holder: LIM NAIZHI, DAYNA (LIN NAIZHI, DAYNA)

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment: 29/03/2022 (00:00:00)

4. Date of Expiry of Insurance: 28/03/2023

Named Drivers Ex Sect. I	S$2,500.00
Additional Ex Other than Named Drivers:	
Ex Sect. I - Age <= 25	S$3,000.00
Ex Sect. I - Age >= 26	S$500.00
* Age as at date of accident	
EX ON WINDSCREEN .	S$350.00

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 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:*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.
One time Waiver of Excess for the first S$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) PTE LTD

** Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.*

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ..... Lim Lee Choo Authorised Officer

..... Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909 6389 6111 6222 1033 www.sg.cntaiping.com