Legiste Law Corporation

ADVOCATES & SOLICITORS
NOTARIES PUBLIC
COMMISSIONERS FOR OATHS
INCORPORATED WITH LIMITED LIABILITY

TED WITH LIMITED LIABILITY Co. Regn. No. 2003051832

24 Peck Seah Street #04-06 Nehsons Building Singapore 079314 Telephone +65-62279909 Facsimile +65-62272767 E-mail advocates@legiste.com.sg

FOK MUN CHEONG TAN KIM KEE NG LAI LENG

Our Ref

FMC.12718.22.03

29th July 2022

URGENT

Motor Claims Department
India International Insurance Pte Ltd
(Insurers of SLM 7580K)
64 Cecil Street
#04 # 05 IOB Building, Singapore 049711

BY EMAIL (motorclaim@iii.com.sg) & BY PDX

GRAB Rentals Pte Ltd (Owners of SLM 7580K) 6 Battery Road #38 – 04, Singapore 049909

BY CERTIFICATE OF POSTING

Dear Sirs

NOTICE OF ACCIDENT
ACCIDENT ON 17.07.22 INVOLVING SKA 6250U & SLM 7580K
AT / ALONG PIE EXIT TO UPPER BUKIT TIMAH ROAD
CLAIMANT(S): ANG LAY CHIAN

We are instructed by the abovenamed Claimant, owner of motor-vehicle No. SKA 6250U to notify you of a road traffic accident on 17th July 2022 at about 7.15 pm at / along PIE exit to Upper Bukit Timah Road involving our client's motor-vehicle and your motor-vehicle No. SLM 7580K driven by your insured driver at the material time. A copy of Singapore Accident Statement filed by our client is enclosed.

THIS COPY FOR

FOR THE INSURER(S)

As a result of the accident, our client's vehicle has been damaged. Before our client proceeds to repair the damaged vehicle, please let us know within 2 working days of your receipt of this notice i.e by end of office hours, 2nd August 2022 whether you would like to conduct a prerepair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you. For the avoidance of doubt, you are liable to compensate our client for loss of use/rental commencing from (and including) today under the provisions of the applicable NIMA Protocol.

FOR THE OWNER(S)

To avoid repudiation of liability by your insurers for breach of policy condition, we would strongly suggest that you report the accident to your insurers on an immediate basis, if you have not already done so. TAKE NOTICE that if your insurers should repudiate liability on the basis that you have breached their policy terms and conditions, you may be personally liable for our client's losses as adjudged by the Court.

Yours faithfully

Joseph Fok Mun Cheong Legiste Law Corporation

enc cc client

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate
- 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 18/07/2022 17:45 (SGT) Reported by Date of Accident 17/07/2022 19:15 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE EXIT TO UPPER BUKIT TIMAH RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

1497

Vehicle Registration Number SKA6250U

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ANG LAY CHIAN NRIC No SXXXX055D Email Address ANGLAYCHIAN@YAHOO.COM.SG Mobile Phone No (Phone) +65-96870620 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Yaris Variant YARIS E AUTO

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

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number GA570916/1

DRIVER

CC

Name of Driver ANG AH TONG NRIC No SXXXX951D Date Of Birth 06/06/1943 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather-Conditions Road Surface

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

PASSENGER 1 Name Gender

DETAILS OF POLICE ACTION Was the accident reported to the police?

Original language used in the statement

Was notice of intended Prosecution given? If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE SKETCH PLAN BY DRIVER

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Yes Yes

30/11/1972

Male

#02-04

596290

Parent

Clear

Dry

No

No

Yes

2

No

SIK AI GIK

Female

No

No

2

No

Nο

49 YEARS AND 8 MONTHS

ANGLAYCHIAN@YAHOO.COM.SG

(Phone) +65-81012952

Collision - Head to Rear

11 TOH TUCK RD

WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model

SLM7580K

Accident report SA1C227I000N

1	
Vehicle Variant	(4)
Vehicle Colour	
Vehicle Category	Private hire
Name of Driver	=
Contact Number	-
Address	-
Address complement	2
Postcode	E
Insurance Company Name	· · · · · · · · · · · · · · · · · · ·
Nature Of Damage	- 유 - 설
Details of property damaged in accident	2
No. Of Passenger (Including Driver)	= -
(5

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 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.
- 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.
- 7. By the lodgment 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)
 - Funderstand, 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)
 - (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 administecing, processing, handling and/or dealing with my claims.(coilectively the "Purposes"
 - 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
 - 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.
 - my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection. investigation and management in present and all future claims.
 - (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (iii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 18 Jul 22

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting ntre Personnel's Signature

Name: NRIC/FIN No .:

COMPLETED

KETCH PLAN	Vehicle B: SCM7580 K Vehicle C: -
4-SKA 6250L	
B-54M7580K	BOED WAR
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SCRIBE CIRCUMSTANCES O	DF THE ACCIDENT
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the same or all the	The state of the s
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down, Honda	vesel was behind.
the second secon	
☐ Claim OD/TP at Ah Lim	n Motor
Remarks: Please forward a	n Motor
Remarks : Please forward a My workshop :	
Remarks : Please forward a My workshop : Email address :	
Remarks: Please forward a My workshop : Email address : & myself :	
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Remarks: Please forward a My workshop : Email address : & myself : Email address : Mote: Please take note that you own policy. Kindly check	copy of my efile accident report to : your insurer have 14 days timeframe for you to submit own damage claim under k with your own insurer for more information.
My workshop : Email address : & myself : Email address : Mote: Please take note that	copy of my efile accident report to : your insurer have 14 days timeframe for you to submit own damage claim under k with your own insurer for more information.
Remarks: Please forward a My workshop : Email address : & myself : Email address : Email address : Note: Please take note that you own policy. Kindly check	copy of my efile accident report to: your insurer have 14 days timeframe for you to submit own damage claim under k with your own insurer for more information.
Remarks: Please forward a My workshop : Email address : & myself : Email address : Mote: Please take note that you own policy. Kindly check	copy of my efile accident report to : your insurer have 14 days timeframe for you to submit own damage claim under k with your own insurer for more information.
Remarks: Please forward a My workshop : Email address : & myself : Email address : Mote: Please take note that you own policy. Kindly check	copy of my efile accident report to: your insurer have 14 days timeframe for you to submit own damage claim under k with your own insurer for more information.



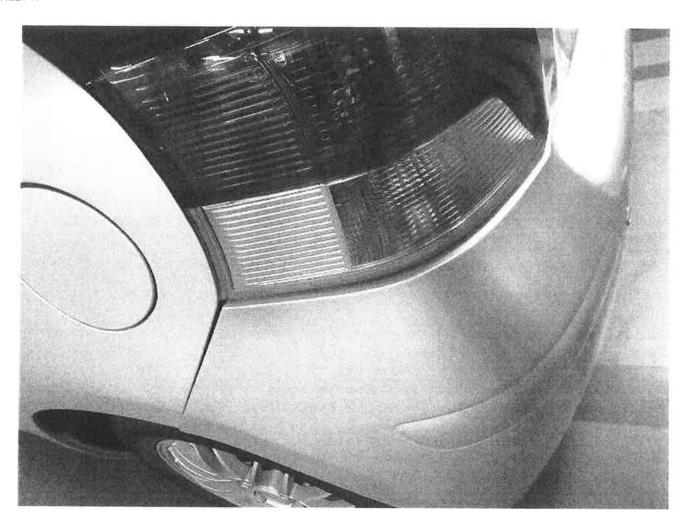


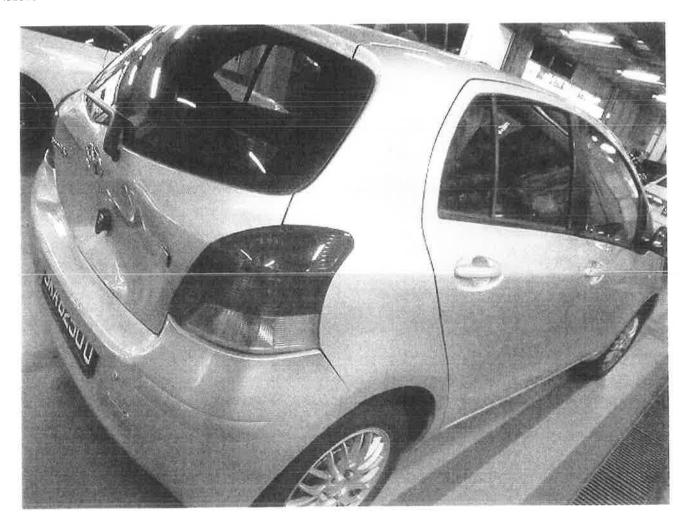


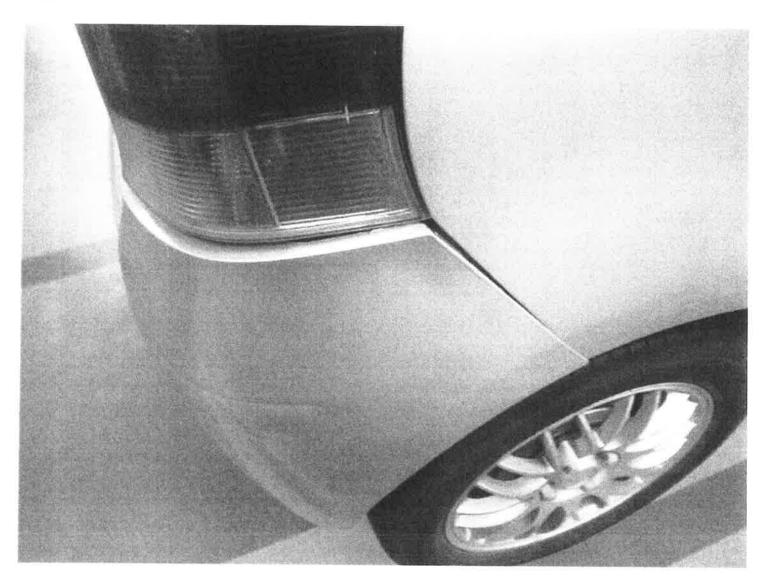


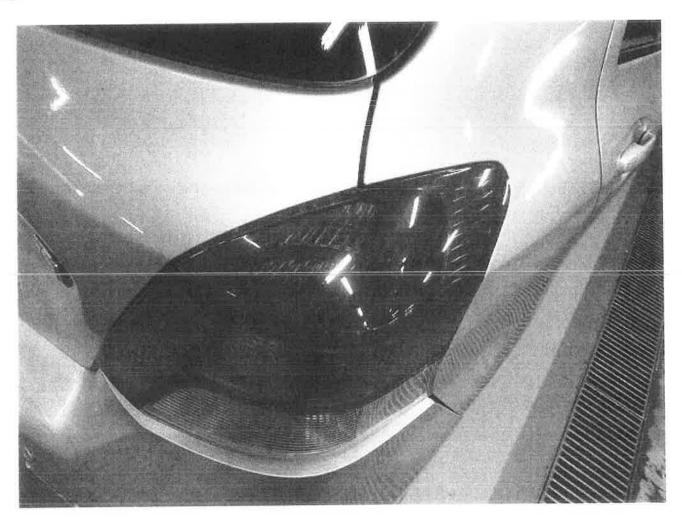






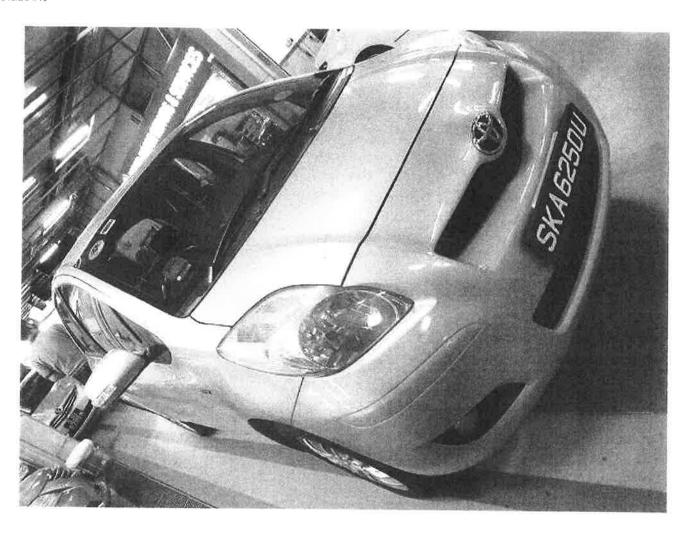














IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: _ Vehicle Registration No: SKA6210 U an _NRIC/FIN/Passport No: SKKKK811D Original Report No: SAIC 1271 000 N Name (as shown in NRIC): Ang Lay Chian NRIC/FI
(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate Address: Contact (Tel):_ Date of Accident: Insurance Company: (B) ADDITIONAL INFORMATION / AMENDMENTS: I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments: Policyholder / Driver's Signature Reporting Centre Personnel's Signature Date: 26 Jul22 Name: NRIC/FIN No.: Date:

GIAMISC Addendum Form

	To Whom It May Concern,
	Accident involving my vehicle no. SKA67.904 on 12/07/22 (date) with SLM 3580K (other vehicle no) along PIE 8x 12 TO UPPER BURL TIMES (or.
	Owner of vehicle no. Signal Source am aware of the accident of my vehicle on 12/27/2 [Date] while car was driven by Aria Aria and Torical
Χ	Nric No
ر	To fill in if there is a OD claim I am aware of the circumstances and agreeable to claim my own insurance for the above accident.
X	Name Date:



POLICYHOLDER ACKNOWLEDGEMENT FORM CRAGLION Date: To: Owner of Vehicle Number: The following has been advised to you via your workshop, AH LIM MOTOR COMPANY through their staff, Eileen Zila Mul Hong. Wei Jie . Please tick the applicable box if you had been advised on any of the following: You had been advised by the workshop that in the case that you wish to claim against your own policy, there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. (-) You had been advised by the workshop on the liability and merits of the case accordingly. You had been advised by the workshop on the claims procedure for the type of claim that you will be making (due to this accident. if fire damage and you claim under your own insurance, any applicable excess will be waived, However, there will be no recovery prospect and NCD will be affected. if fire damage and you are claiming against the Third Party, your NCD will not be affected. However, the recovery is not guaranteed, and AXA will not be held responsible. (You have agreed to let AXA assign a workshop for your vehicle repairs. In the process, your vehicle might be lowed out to another workshop assigned by AXA. In return, you will get: \$200 off on your Basic Own Damage Excess or \$200 as a benefit if your policy has \$0 excess and no Loss of Use benefit or Additional \$200 on top of existing Loss of Use Benefit if your policy has \$0 excess and existing Loss of Use benefit There will be delay to your vehicle repair due to the unavailability of spare parts locally and there is no other option except to indent it from overseas. There will be no cancellation/withdrawal of the Own Damage claim once the order of spare parts have been placed. If you wish to cancel/withdraw the daim, you shall bear all costs, expenses &/or related charges incurred directly &/or indirectly to the procurement of the spare parts. The estimated waiting time for the spare parts to arrive is The estimated arrival time does not include the repair period. You will be driving the vehicle out despite being advised by the workshop mechanic/ personnel that the vehicle may not be road worthy. For vehicles below three (3) years old or under warranty with a local distributor, your insurance company will use only original parts to repair your vehicle. For vehicles above three (3) years old and no longer under warranty with a local distributor, your insurance company will be carrying out repairs where any damaged part that can be repaired will be repaired and any part that needs to be replaced will be replaced using any combination of original parts and/or original equipment manufacturer (OEM) parts and/or second-hand parts. You had been advised by the workshop of the Twelve (12) months warranty for Own Damage repairs on workmanship related to the accident. For vehicles that are under warranty with a local distributor, you have been advised by the workshop to check with your local distributor on any effect to your warranty prior to making this Own Damage claim. CGITTING Others. Signed and acknowledged by: Name and signature of policyholder/ authorized driver* and company stamp (where applicable) authorized driver to either the named drivers as per motor insurance policy or in the case of commercial vehicles, permitted drivers who are permitted to drive the insured Vehicle Zila Name and signature of workshop personnel including company stamp or Company





AXA Insurance Pto Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

customer.care@axa.com.sg

What are comes

Certificate of Insurance

account number 04963

GA570916 / 1

1NZYZY1906

MRQ54HY9304087688

-Motor Vehicles (Third-Party Arch and Georgenseken) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980 (Acid Transport Act. 1987 (Malaysia) -Motor Vehicles (Tourd Party Risks | Rules, 1959 (Malaysia)

Policy details

Policyholder name Cover

Plan name **RCO** applicable Vehicle registration number

Period of Insurance

Finance form company

ARG LAY CREAN Certificate number Comprehensive Chassis number

Engine number Essentiat

SMAG250IJ

from 16/04/2022 to 15/04/2023 (both dates inclusive)

Persons or classes of persons entitled to drive*

50%

(a) The Policyholder

(b) Any Named Driver as stated in the Policy:

1, ANG AN TONG

2. KONG ELLENGIJIANG YILINI

(c) Any person who is driving on the Pokeyholder's older or with their permission

Provided that the person driving is permitted in accordance with the Beensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disquatified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitation as to use*

tise only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, 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 mater trade; or witten the Meter Car, whether stationary, in use or otherwise, is in or on. a racing track, circuit, route, course or any other roads by whatever name calked that are typically used for racing, pace-making or such similar purposes.

* Einstations rendered inoperative by Soution 8 of the Motor Vehicles (Third-Rosty Ricks and Compensation) Act. (Chapter 189) and Section 95 of the Road Transport Act. 1987 (Malaysia), one had to be included under these peakings.

FXCESS

Basic Own Damage Excess

Windscreen Excess

SGD 300,00 SGD 100.00

An Additional Excess is applicable as follows:

- 1. \$\$500 for unnamed Authorised Criver
- 2, \$\$500 for declared Young and mexperienced Driver
- 3. \$\$5,000 for undectared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

I/We hereby certify that the policy to which this Cardicate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Comparisation) Act. (Chapter 189) and Part IV of the Road Transport Act, 1967 (Malaysia).

AXA Insurance Pte Ltd

Authorised signature

important note

Palaxyholiders are warried that on the sale of a motor vehicle they must currender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutery Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle Canada Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the elemium to be paid in full within a specific cered failing which there would be no habety under the policy, renewal certificate. andersenant ele.

AXA Ensurance Pto Ltd (199903512M) 8 Shenton Way, //24-01, AXA Tower, Singapore 068811 Customer Centre, NB1-01

1 of 2