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 Actual 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 10/10/2022 13:02 (SGT) Reported by Date of Accident 09/10/2022 20:35 (SGT) Exact Location of Accident Singapore Additional Location Information LOYANG AVENUE Country/State of Loss Singapore **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJG8121B INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TEO PEI JUN (ZHAO PEIJUN) NRIC No S8518836D Email Address teopeijun85@gmail.com Mobile Phone No (Phone) +65-92475120

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Allion 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 - Reporting only your vehicle? Vehicle Category Private car

Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number D22MTPV01000375

DRIVER

Name of Driver TEO PEI JUN (ZHAO PEIJUN) NRIC No S8518836D Date Of Birth 03/07/1985 Occupation Indoor

Date Of Driving Pass 29/01/2010 Driving experience 12 YEARS AND 9 MONTHS Gender Female Mobile Number (Phone) +65-92475120 Alt. Phone Number Email Address teopeijun85@gmail.com Address BLK 486 PASIR RIS DRIVE 4 Address complement #06-483 Postcode 510486 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 Collision - Head to Rear 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? No 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? No Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT SEE ATTACHED SKETCH PLAN AND PHOTO

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **EW929R** Vehicle Manufacturer Hyundai Vehicle Model Elantra Vehicle Variant Vehicle Colour Gray Vehicle Category Private car Name of Driver NG KWAI MENG NRIC No S0072563C

 Contact Number
 (Phone) +65-94388862

 Address
 7 JALAN PARI DEDAP

 Address complement

 Postcode
 488608

 Insurance Company Name

 Nature Of Damage

 Details of property damaged in accident

 No. Of Passenger (Including Driver)

SKETCH PLAN

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- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
-)) 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 Purpose N INDUSTRIAL PTE LTD

Suffer to 10 2:22, 12'570m

Driver's Signature (if driver is not the policyholder) / Date & Time 19 UBI ROAD 4 SINGAPORE 408628 TEL: 6490 9666 FAX: 6846 7483

itnessed by Reporting Centre Personnel lame as in NRIC/ID card)

GIXXXXXXXIL

CACcident report SA1R22AA0002

Sketch Plan

off po	10/2022. 8:35 pm, white dway along boyang way.
vechi	e A stop @ the yellow Box while his is turny out.
VCli	e B wable to Stop in time and hit against refule if
Vechi	e B tred to Jam Bale but still not in the and the speal relible B is less than 60 km/h.
Bo	In paties alight to check on both redn'tes and exchange Documents hile H would like to claim under insurance company for the
Ve	hile H would like to plain under ruswance company for the
	awaye.

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

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

AUTOLUTION INDUSTRIAL PTE LTD
19 UBL ROAD
INGAPORE 408623
FEL: 6490 9666 FAX: 68467483

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) E7M FIR AL FOR So

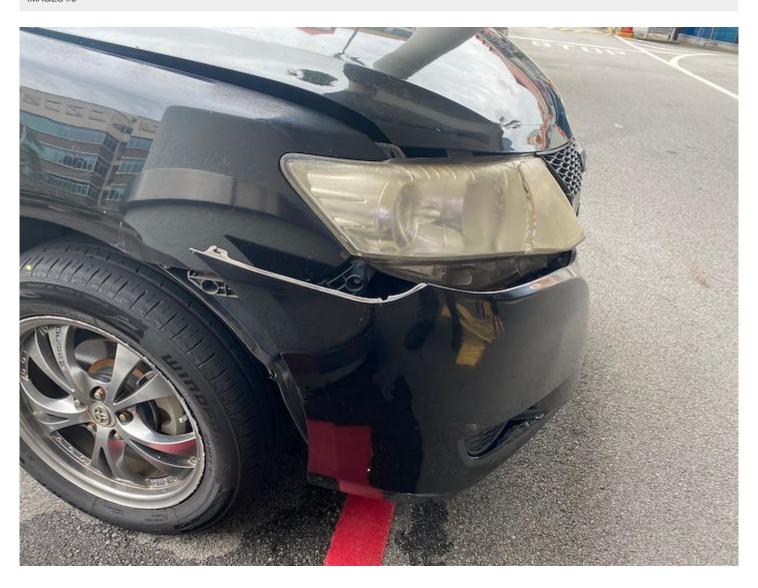
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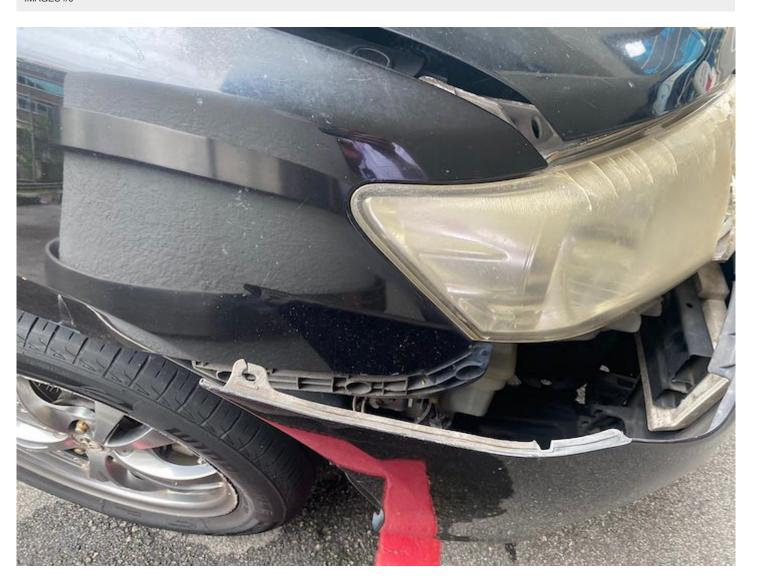


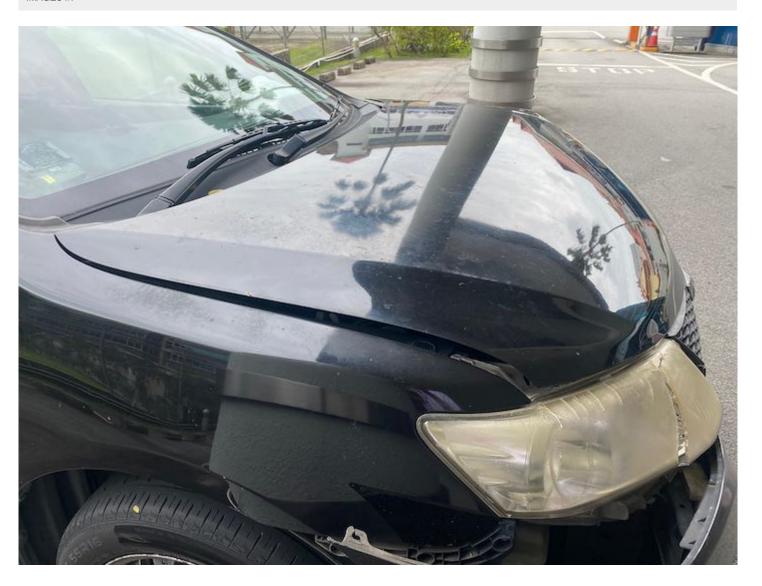


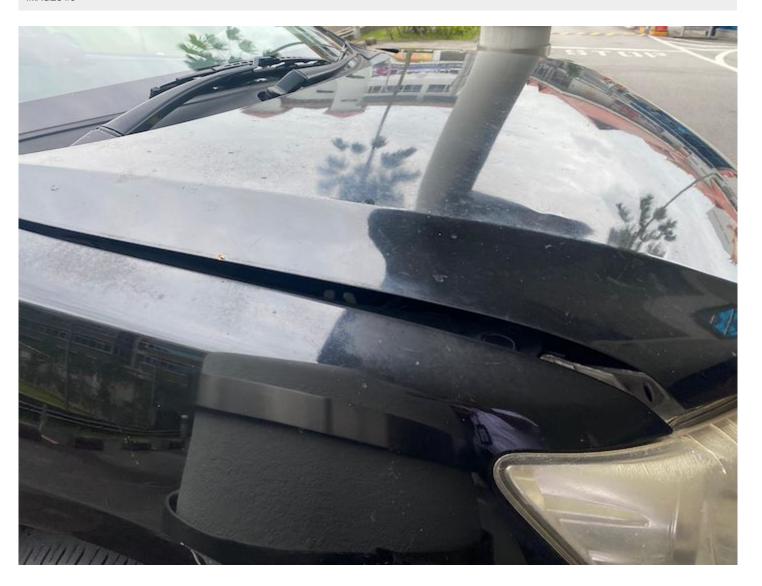


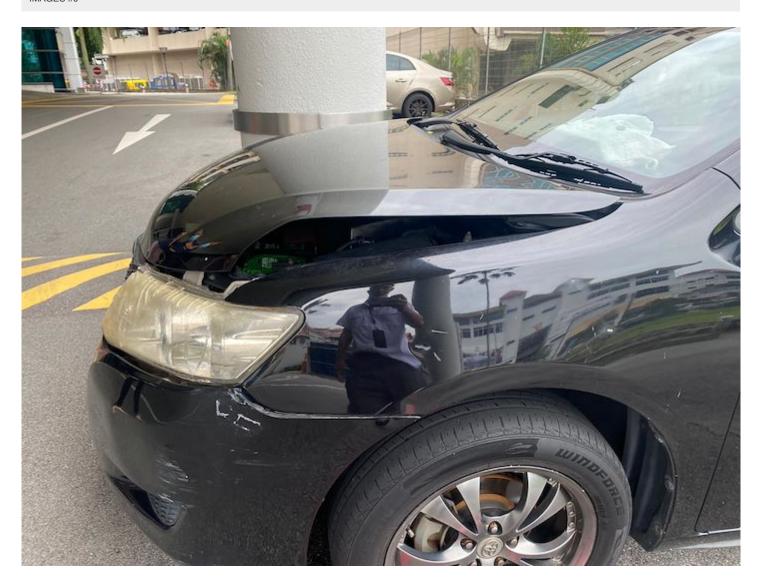






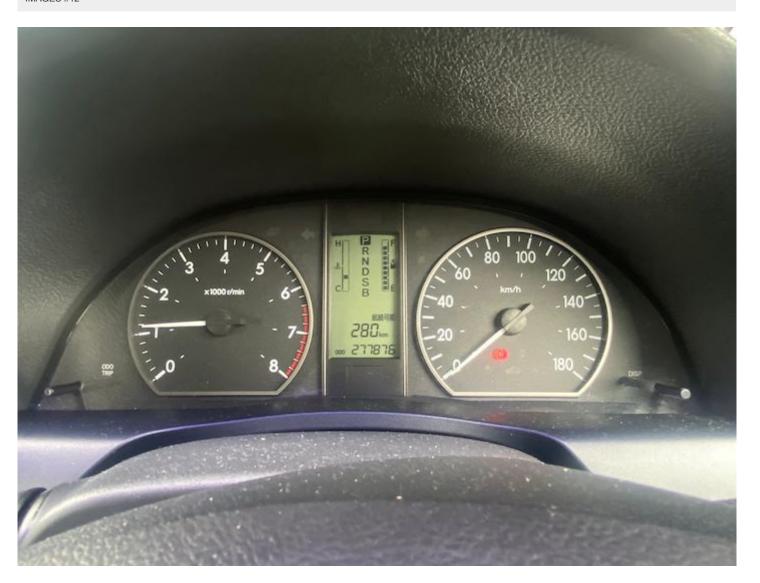














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Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #03-03 Singapore Land Tower, Singapore 048823 Tel: 6468 6555 | Fax: 6221 3302 | www.akmpo.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M20090396

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
ROAD TRANSPORT ACT 1987 (MALAYSIA) ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No.

: D22MTPV01000375

: TEO PEI JUN (ZHAO PEIJUN)

Motor Vehicle (Registration No.): SJG8121B Coverage

: Third Party

Policy Commencement Date : 16 JANUARY 2022 00:00

Policy Expiry Date Maximum Liability (Section I) : Third Party

: 15 JANUARY 2023 23:59

Excess*

: Not Applicable

Voluntary Excess*

: N.A

Windscreen Excess*

: N.A

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

- 1. The Insured.
- Any other person who is driving on the Insured's order or with his permission.
- a. any member of the leasth of the insured,
 a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
 b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn but the Insured.
 - withdrawn by the Insured.

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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

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

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6461 6555.

I/We HERBBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP_30

Sompo Insurance Singapore Pte. Ltd.



Authorised Signatory

Date/Time of Issue: 13 DECEMBER 2021 14:09

IMPORTANT NOTICE

- Keep the Certificate in your Motor Vehicle;
 Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a stability declaration to that effect must be made. Failure to comply with this obligation is an effecte under the Motor Vehicles of Third-Party Risks and Compensation) Act (Chapter 189);
 This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicles.

Intermediary Code & Name: 11E07804 & ENSURE PTE, LTD. CI Code: 22A DJNDZZV4R0YDBHPA