SS2X22AD000B / SME MOTOR PTE LTD ENTRY DATE & TIME: 13/10/2022 16:28 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (13/10/2022 16:28 (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 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.

- 4. The issue and acceptance of this is form by instrained 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 13/10/2022 16:28 (SGT) Reported by Driver Date of Accident 12/10/2022 18:55 (SGT) Exact Location of Accident Commonwealth Ave, Singapore Additional Location Information TWDS CLEMENTI AVE 2 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

2755

Vehicle Registration Number **GBH7056C**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner YURI LANDSCAPE AND CONSTRUCTION Company Reg No 52816992X Email Address YURILANDSCAPE@HOTMAIL.COM Mobile Phone No (Phone) +65-98183211 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Variant Exact purpose for which vehicle was being used at time of

accident **Employment**

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 2070118367

DRIVER

CC

Name of Driver **CHIA TECK LENG** NRIC No S1121319G Date Of Birth 24/01/1959 Occupation Outdoor

Date Of Driving Pass 18/05/1978 Driving experience 44 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-98183211 Alt. Phone Number Email Address YURILANDSCAPE@HOTMAIL.COM Address BLK 257 KIM KEAT AVE #12-50 Address complement Postcode 310257 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS TRAVELLING ALONG COMMONWEALTH AVE TOWARDS CLEMENTI AVE 2 ON 12/10/2022 AT ABOUT 6.55PM. MY VEHICLE WAS STATIONARY AS I WAS WAITING FOR THE TRAFFIC TO BE CLEAR BEFORE TURNING. SUDDENLY, I FELT AN IMPACT FROM THE REAR. I ALIGHTED AND FOUND OUT THAT VEHICLE B COLLIDED ONTO THE REAR RIGHT PORTION OF MY VEHICLE. WE EXCHANGED PARTICULARS AND LEFT THE SCENE. 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 SLD6148E
Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car

Name of Driver NRIC No	WONG JYH SHYONG S1735534A
Contact Number	(Phone) +65-90276888
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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.
- Information provided must be as truthful and accurate as possible. Any willful 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 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:
- (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.

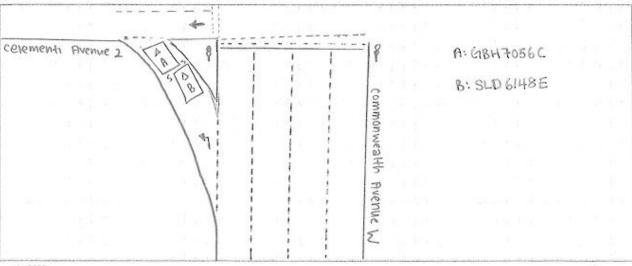


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



vJun2022

Describe Circumstance of the Accident I was travelling along commonwealth Avenue towards Celementi Avenue
2 on 12/10/2022 at about 6.55 pm. My vehicle was stationary as I was
waiting for the traffic to be clear before turning, Suddenly I felt an
impact from the rear. I alighted and found out that vehicle B collided
on to the rear right portion of my vehicle. We exchange particulars
and left Scene.

Declaration

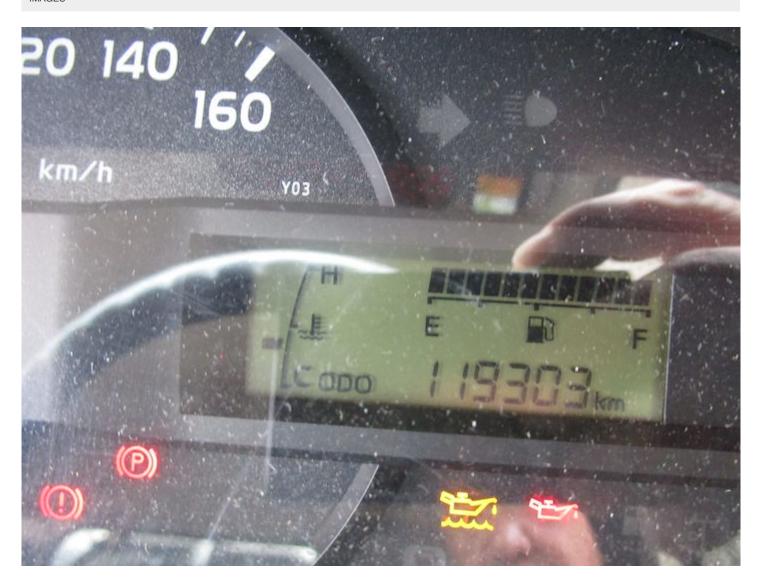
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time Actual Driver

/ Date & Time

Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vJun2022



















CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : Yuri Landscape & Construction Period of Insurance : 03 Sep 2022 To 02 Sep 2023

Engine No. : 1KD2814928

Chassis No. : JTFAT35Y50K211198

: GBH7056C Vehicle No. Policy No. : 2070118367-02

Endorsement No.

Issued Date : 27 Aug 2022 20:45

ABOUT THE COVER

Make/Model : TOYOTA DYNA 150 [Lorry]

Engine Capacity/Tonnage : 1,72 Tonnage Sum Insured : Market Value First Year of Registration : 2018 Driver Restriction : NA Off Peak Car No. Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) Any person who is driving on the Policyholder's order or with their permission.
 b) Triss Policy will indemnify the Policyholder or any authorised driver only if heishe meets the specified age condition.

You have to pay an additional sum of S\$\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

Limitation as to use*

1) Use in connection with the Policyholder's business

1) Use for social, domestic or pleasure purposes is business.

3) Use for the carriage of passenger (officer than for him or reward) in connection with the Policyholder's business.

3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for him or reward, driving fution, driving test, racing, pace-making, reliability trial or speed-testing; b) use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle; and c) use for any purpose in connection with Motor Trade.

Loss Of Use (10 Days) Commercial Auto Cover

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hodine at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg.or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Maybank Singapore Limited

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia).

0504389000

DS INSURANCE AGENCY

131 PASIR RIS GROVE #06-16

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

78 Shenton Way #09-16 AIG Building S079120 | T.+65 6419 3000 | wy