TIONAL Aspassment Centre Services		
ST COS 3 C IS (STO III I I I I I I I I I I I I I I I I I	1 Date & Time Completed Done by	
100/100		CONTRACTOR OF THE PROPERTY OF
WARDING LIVE TO THE	Transaction of the second	
1 No. 6150 6850 Z E-inell (within 8)		
3.4 - 81 10 20 22 -15:15 1-Motor Claim		!
	(Wints-OD Interference)	- 1
Int more explose	the state of the s	-
A sectiment/Str		*****
F interes: Ass't Report b;	y Fax : Reed to Ounce White	- 1 M AT
elerred Wxsp / INO Assign Wksp / GW: (1971	
Particularse Yeli Not GY 2841C	. 1707	
Owner / Driver: (Tel: / / / / / / / / / / / / / / / / / / /	
Folley Nor() Period: (271	
Confirmed by a (MO): 11: 0-2011, P- 21-7930. P: 80-10010)	
VEC/)/ NO (
Year of Registrations () Warrenty: YES (
Excess: (\$) Loading: \$1,000()/\$2,000	The state of the s	-
mend Remarks: 5, 300.	11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
) Walk-in Chytomar : Customers Information strictly Co	יייייייייייייייייייייייייייייייייייייי	
) Total Less Case : to e-mail Insurer URGENTLY.		1
Drive-in ()/ Towel-in (); Invoice: YES ()/	NO(): Towing Coil	
am return of RONG Horlines, 6783, 66157 To., or all and Silven	With The Complete of the Compl	y
		-
Apply to: Transport Allowance () / Courtssy Car ()	
CO Cheek / Post Repair (aspection ()	
CO Check / Post Repair (aspection ()	
CO Check / Post Repuir Inspection () Upload Resurvey Photo [Repair Cost > \$3000] (
CO Check / Post Repuir Inspection () Upload Resurvey Photo [Repair Cost > \$3000] (
) CO Check / Post Repair (aspection () Upload Resurvey Photo [Repair Cost > \$3000] (
() CO Check / Post Repair Inspection () Uplacd Resurvey Photo (Repair Cost > \$3000) () () Injury :		
() CO Check / Post Repair Inspection () Uplaced Resurvey Photo [Repair Cost > \$3000] () () Injury :		
() CO Check / Post Repair Inspection () Uplaced Resurvey Photo [Repair Cost > \$3000] () () Injury :		
CO Check / Fost Repair Inspection () Upload Resurvey Photo [Repair Cost > \$3000] (Insury :		
CO Check / Fost Repair Inspection () Uplaced Resurvey Photo [Repair Cost > \$3000] (Injury : att Tuan : Action Acti	Invoice Preparation Checklist 2000 - 187 (5)	
Ma222962	Involce Propagation Checking St. A. St. St.	
CO Check / Fost Repair Inspection () Uplaced Resurvey Photo [Repair Cost > \$3000] (Injury : att Tuan : Action Acti	Involce Proparation Checking States The States of States and State	
Ma222962	Involve Propagation Checklist on the part of the part	
MA222962 Manual Results (Repair Cost > \$3000) Manual Actions Manual Results (Repair Cost > \$3000)	Invoice Propagation Checklist Science (1995) 1) AR Action Passeing (1996) 2) DA Dampe Assumed (1997) INC (1997) 3) YFT Towing Fit (1997) INC (1997) 4) FFT Fellow Though Science (1997) INC (1997) DATE Fillow Though Science (1997) INC (1997) Enable Science (1997) INC (1997) INC (1997) Towing Science (1997) INC (1997) Towing Science (1997) INC (19	
MA2202962 Linuary: Alti Turas: Agriculty. Linuary: L	Involce Preparation Chrishist School Street Involce Preparation Chrishist School Street I) AR: Accident Passering Glob NC (350) 5) Tr. Towing Zu Street 4) Yr. Fellow Through Serviz Street I) Fr. Fellow Through Serviz (Expansis) Six Street Experimental Street 5) TR. Are operation Street TON 1: He of Day Street Serviz Street TON 1: He of A Street Service Street TON 1: He of A Street Service Service Street TON 1: He of A Street Service Service Service Street TON 1: He of A Street Service Service Service Service Service Street TON 1: He of A Street Service Se	
MA222962 Manual Results (Repair Cost > \$3000) Manual Actions Manual Results (Repair Cost > \$3000)	Involve Propagation Checklist and Control of State of Sta	
MA222962 Minutes Macon Maria (Content of the Content of the Cont	Involte Preparation Chrishist School (1975) Involte Preparation Chrishist School (1975) I) AR Accident Passering (1962) I) The Accident Passering (1962) I) The County Annument (1962) I) The County Annument (1962) I) The Fellow Theory School (Extension) I) Free Fellow Theory School (Extension) I) Free Fellow Theory School (Extension) I) The County Christian County (Inc. (1962) I) NIUC Administration III (1962)	
MA2222962 Injury: Als Tunis (Action) Injury:	Involve Propagation Checkliston (2002) [1] JAR: Accident Parecast (1302) [2] DA: Damps Antisprest (1402); NC (351) [3] PT: Fellow Through Survey (Parecast) [4] PT: Fellow Through Survey (Parecast) [5] Printing Parecast (1402) [6] TR: An operator [7] T) N1: Parecast (1402) [8] Printing DA: Shift Survey [9] TN: Content Sarvey [9] Printing Content (1402)	
MA2202962 Main Turns (Actions) Manual Results (Repair Cost > \$3000) Manual (Actions) Manual Results (Repair Cost > \$3000) Manual Results (Rep	Invoice Propagation Chacklist School (2) (5) In Art Accident Passaciant (130) Di Art Damays Automest (130) NTF: Tewins 7:: 4) PT: Fellow Theologis Survey Spring Territory Survey (Passacia) Spring Territory Survey (Passacia) (5) TR: Re-especial (150) (6) TR: Re-especial (150) (7) N1: Idea DA + OMET Survey (8) NIUC Admitted Territory (150) (9) PT: Policy Construction (150) (10) Propagation (150) (10)	NAME OF BUILDING
MA222962 Injury: All Tunes (Actions and Tunes (Experience Cost > \$3000) Injury: All Tunes (Actions and Tunes (Experience Cost > \$3000) Injury:	Invoice Proparation Checklist School Che	
MA2202962 Main Turns (Actions) Manual Results (Repair Cost > \$3000) Manual (Actions) Manual Results (Repair Cost > \$3000) Manual Results (Rep	Invoice Propagation Checklist School of Control of Cont	They are

SN0822AP0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 25/10/2022 12:00 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (25/10/2022 12:00 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.

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

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 Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

25/10/2022 12:00 (SGT) 21/10/2022 15:15 (SGT) PIE, Singapore (CHANGI) BEFORE BEDOK RESERVOIR ROAD EXIT Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBD6852Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No Fmail Address Mobile Phone No Alternative Phone No

Yes TS CHOICE D'COR & TRADING 5XXXX732K abc8627e@gmail.com (Phone) +65-91478201

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission CC

Dyna

Toyota

Employment

No - Claiming third party Commercial vehicle Manual 2982

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number AIG Asia Pacific Insurance Pte. Ltd. 7210023608-01

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

CHIA TECK SOON SXXXX647G 14/09/1961 Outdoor

02/08/1982 Date Of Driving Pass 40 YEARS AND 2 MONTHS Driving experience Male Gender (Phone) +65-91478201 Mobile Number Alt. Phone Number abc8627e@gmail.com Email Address BLK 402 BEDOK NORTH AVENUE 3 #10-281 Address Address complement 460402 Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured OWNER No 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 Side Swipe Type of Accident Raining Weather Conditions Wet Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 2 Yes Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes 1 Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Yes Was the accident reported to the police? Traffic Police Police Station Name (Phone) +65-65470000 Police Station Phone No (Fax) +65-65474900 Alt. Police Station Phone No 10 Ubi Avenue 3 Singapore 408865 Police Station Address No Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEAS REFER TO POLICE REPORT T/20221021/7053 (TYPE OF COLLISION IS HEAD TO SIDE) ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GY2841L
Vehicle Manufacturer Vehicle Model Vehicle Variant -



Vehicle Colour	10-1 10 -1
Vehicle Category	Commercial vehicle
Name of Driver	
Contact Number	17 521
Address	328
Address complement	01 SE
Postcode	Andrew Cal
Insurance Company Name	411—1111111100 (1 .2 0)
Nature Of Damage	2 - 2
Details of property damaged in accident	
No. Of Passenger (Including Driver)	•

INJURED PERSONS DETAILS

INJURED 1

CHIA TECK SOON Name of injured person Male Gender (Phone) +65-91478201 Phone No Address Address Complement Post Code Approximate Age Years Old SLIGHT INJURY Injuries Sustained GBD6852Z Injured person in which vehicle? Yes Were seat belts worn? Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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' law yers/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")

Road Shoukler

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Personnel

Sketch Plan

PLE CCHONGI

BEFORE BELOOK R

RASHEVOIR

VEM A'- GRDG8527 Veh B'- GY 1841 L

Describe Circumstances of the Accident		
		A.
		X
	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	02
		001
		KA
		12
		7)
		\
		No.
	1.2	
	7 00	
		3
	10	10
	(3)	
	2	
	10	
(Jack L	
COM	11 1	West of the second seco
X		
70		
¥		
and the second s		
/		

Declaration

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



Policyholder's Signature / Date & Time

A des

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

Witnessed by Reporting Centre Personnel





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20221021/7053

DEDODT	AE A	TDAEEIC	ACCIDENT	r

Date/Time Report Made: 21/10/2022 20:49		lade:	Vide Report No.:	Station Diary No.:
Informar	nt's Particu	ilars		
	Informant: CK SOON		Address: 402 BEDOK NORTH AVENU 460402	E 3 #10-281 SINGAPORE
ID Type	ID No.: 0 / S151264	47G	Contact No.: Home/Office:	Mobile: 91478201
Nationali	ty: ORE CITIZ	EN	Email: aaroniu3088@gmail.com	
Sex: Male	Age: 61	Date of Birth: 14/09/1961	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupat Driver	ion:		Driving Licence Information: Class:	Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/10/2022 15:15	Type of Location Straight Road
Weather:	ERVOIR ROAD	Road Surface: Wet		Road Speed Limit: 80 Km/h
Raining Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis	sion: ving Vehicles - Hea			Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBD6852Z	Lorry				Seriously Damaged	0
GY2841L	Van				Seriously Damaged	0





2 of 3

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Report No. T/20221021/7053

Any Pedestrian Ir	volved: No				
No. of Pedestrians Injured: NIL Use of P		Use of Pe	destrian Crossing: NA		
Driver				The Heavy of	A NOTE OF THE PARTY.
Name	CHIA TECK SOON		ID No.	S1512647G	
Related Vehicle	GBD6852Z (Lorry)		Contact N	No. 91478201	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	21/10/2022		Date	21	1/10/2022
No. of Days gran	ted Medical Leave	04	Degree o	f SI	light

Brief Details.

On the stated time and venue, I was driving my vehicle GBD6852Z along PIE towards Changi Airport just before Bedok Reservior Exit on lane 3. Suddenly a van (GY2841L) on lane 2 skidded and spun out of control and swerve to my lane colliding onto my vehicle. The impact was so huge, my vehicle veered to the left road shoulder. I alighted and took photos of the accident, EMAS and LTA came to the scene. The van (GY2841L)driver admitted that his van lose control and skidded onto my lorry (GBD6852Z). A few hours after the accident I felt pain and discomfort and consulted a doctor at clinic and was given 4 days mc.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20221021/7053

CONTINUATION OF REPORT

Sko	tch	Plan
Ove	CULL	ridii

Informant is not able to provide sketch

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 21/10/2022 20:49
Classification Of Case:



SINGAPORE ACCIDENT STATEMENT

Accident Date: 21 (1/2) Time: 15 15 (bb)	mm) 24 hr form
Accident Date: 21 (1/2) Time: 15 15 (hh: Location PIE (chang) Before Bedok Reservoir Rd	min) 24 in format
y spor Restroit ra	
Vehicle Number GBD68527	
Insured Name TS Choice DICCH & Trading	
NRIC/FIN 5290 7314	
NRIC/FIN 52991732k Contact Number 914 Make Tryota Model Dyna	78201
Are you claiming under your pure	
Are you claiming under your own insurance policy for repair to your vehicle () Yes If No,Pls select: () Third Party () Reporting	?
Insurance Company A/G	
Type of Policy () Complete () The complete ()	
Type of Policy () Comphensive () Third Party Fire & Theft	() TP Only
Policy Number 7210013608-01	
Name of Driver Chin Teck Soon ()Same as Insured
NRIC/FIN S15126476 Contact Number 915	
	7 8201
Date of Birth 14/9/1961	
Driving Pass Date 62 68 1982	
Occupation () Indoor () Outdoor	
Gender () Malc () Female	
Email Address abcylla e@gmail.com ()NO EMAII
Address of Driver PSK 402 Bedok Nuft Ave 3 710-2	61 (c) 46,460
	01 -11-00 02
Was driver an employee of the Insured's Company? () Yes (No	
If No, Relationship of the Driver with the Insured	
(Owner () Spouse () Friend () Relative () Children (\ Cilclina
Does the Driver Own Any Other Vehicle? () Yes () No) Storing
If Yes , Vehicle Registration Number of Driver's Own Vehicle	
Insurance Company of Driver's Own Vehicle	
Weather Conditions () Clear () Raining () Others	
Well Others	
Was any foreign vehicle involved in this accident? () Yes (\times \times)	
Was anybody injured in the accident? () Yes () No	
If yes, injured detail Driver (GBD(95))	
Was there any video captured by Car Camera? () Yes () No	
Was the Accident reported to the Police? (Yes (No Hares	attach police report
OF FAILS OF Parity Name See	Cost, a
Veh B GY 1841L	S. William S.
Veh C	
Veh D	
Veh E	
Veh F	
Part I	



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder

: TS CHOICE D'COR & TRADING

Period of Insurance

: 24 Mar 2022 To 23 Mar 2023

Engine No.

Chassis No.

: 1KD2475069 : JTFAT35Y80K204181 Vehicle No.

: GBD6852Z

Policy No.

: 7210023608-01

Endorsement No.

Issued Date

: 24 Feb 2022

ABOUT THE COVER

Make/Model

: TOYOTA DYNA 150 1.8 ton [Lorry]

Engine Capacity/Tonnage : 1.8 Tonnage

Sum Insured : Market Value

First Year of Registration : 2015

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) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$\$\$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

Age Condition

: All Age Condition

Limitation as to use* :

1) Use in connection with the Policyholder's business.

Use for the carnage of passenger (other than for hire or reward) in connection with the Policyholder's business.
 Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tution, driving test, racing, pace-making, reliability that or speed-testing; b) use whitst drawing a traiter 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.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 96 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

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 REPAIRES (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 hotline 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: Daimler Financial Services Africa & Asia Pacific Ltd

I/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. 169). Part IV of the Road Transport Act. 1987 [Malaysia]. Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

COWELL INSURANCE (AGENCY) P L

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.

B BURN ROAD #09-09 TRIVEX

SINGAPORE 369977 ANSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

Kn Ling Lim