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 09/11/2022 17:13 (SGT) Reported by Driver Date of Accident 08/11/2022 07:04 (SGT) Exact Location of Accident Outram Park, Singapore Additional Location Information **NEAR TO NEW OUTRAM & MRT STATION** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF789C

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner C & P RENT-A-CAR PTE LTD Company Reg No 197900477H Email Address claims@cartimes.com.sg Mobile Phone No (Phone) +65-81267188 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Nv200 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 CC 1461

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SD22V01367/VCZ/R09

DRIVER

Name of Driver GANESAN ANBALAGAN Work Permit No G5109461T Date Of Birth 02/05/1987 Occupation Outdoor

Date Of Driving Pass 10/01/2019 Driving experience 3 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-81267188 Alt. Phone Number Email Address claims@cartimes.com.sg Address BLK 714 CLEMENTI WEST ST 2 #08-141 Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **LEASING** Does Driver Own Other Vehicles? Nο 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 Collided into Parked Vehicle 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? Yes Police Station Name Clementi Neighbourhood Police Centre Police Station Phone No (Phone) +65-18008729999 Alt. Police Station Phone No (Fax) +65-68728039 Police Station Address No. Singapore 129858 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT. 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 XE4680A Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	WANG GUODONG
Work Permit No	G2503369N
Contact Number	(Phone) +65-86202133
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	PC8445S -
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
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 Authorised Driver.
- 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.
- 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.
- 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.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

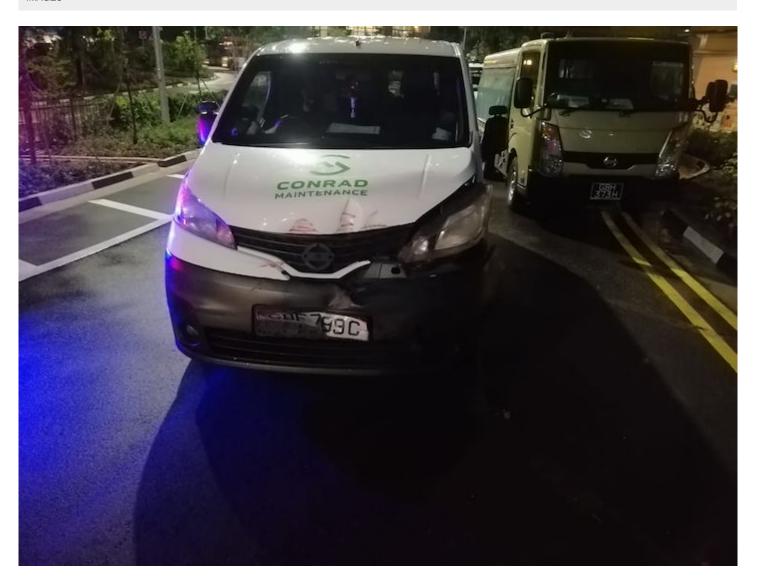
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Purposes.
- (d) 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

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

Reporting Centre Personnel's Signature Name: NRIC/FIN No.

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	PC8445	ou mrs	tram station
	ANCES OF THE ACCIDENT		
State	ment Refer to	Police F	* Pepart
			1 SOLUE
DECLARATION I/We declare the foregol	ng particulars are true in every respect.		Reg. No. 2



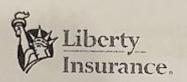














Liberty Insurance Pte Ltd

Registration no.199002791D 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Website: http://www.libertyinsurance.com.sg

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
ROAD TRANSPORT (AMENDMENT) ACT 2019
THE MOTOR VEHICLES (THIRD-PARTY RISKS RULLES, 1959)

THE MOTOR VEHICLES	(THIRD-PARTY RISKS) RULES, 1959
Certificate No	SD22V01367 /VCZ /R09
Form	MZ407
Date Of Issue	21-JAN-2022
1.Index Mark and Registration No. of Vehicle:	GBF789C
2.Chassis number of Vehicle:	VSKYBAM20Z0125389
3.Name of Policyholder:	C & P RENT-A-CAR (PTE) LTD
4.Effective date of Commencement of Insurance for the purpose of the Act:	01-FEB-2022 00:00 AM
5.Date of Expiry of Insurance:	31-JAN-2023 23:59 PM
o.bate of Expiry of histifatice:	31-JAN-2023 23.33 FW

6.Persons or Classes of Persons

entitled to drive*:

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

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

- A) Use for carriage of passengers or goods in connection with the Policyholder's business.
- B) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.

8.Policy does not cover:

- A) Use for racing, pace-making, reliability trials or speed-testing.
- B) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- C) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

*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 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.

For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers

Authorised Signature

For Information only:

COVERAGE: Third Party Only, Jurong Island, Windscreen Limit S\$500/-, Airside

SUM INSURED: EXCESS:

Section II S\$1000,Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S

\$2000, Windscreen Excess \$\$100

FINANCE COMPANY: DBS BANK LTD

PRODUCER NAME: H TEAM INSURANCE AGENCY PTE. LTD.

PLFM-/19-FEB-22

S1_CI_T1_T3_OE_Template2-Ver1.

19-FEB-22

Feb 19, 2022, 4:49 PM



Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport

/Company Cert

197900477H

No.:

Owner ID Type: Company

Owner Name: C & P RENT-A-CAR (PTE.) LTD.

Registered Address:

41 PANDAN ROAD SINGAPORE 609283

Mailing Address: Birth Date: -

Vehicle Particulars

Vehicle No.: GBF789C

Previous Vehicle

No.:

Effective Date of Ownership:

20 Jun 2016

Original Regn Date: 20 Jun 2016 Registration Date: 20 Jun 2016

Year of

Manufacture:

2016

Vehicle Type: Goods (Closed) Van/Van Panel (Delivery)

Vehicle Scheme: -

Vehicle Attachment 1:

No Attachment

Vehicle

Attachment 2:

Vehicle

Attachment 3:

Vehicle Make:

NISSAN

Vehicle Model: NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC

Primary Colour: White

Secondary Colour: -

Passenger

Capacity:

1

Chassis No.: VSKYBAM20Z0125389

Engine No.: K9KC400D055506

Engine Capacity

/Power Rating:

1461 cc/-

Maximum Power

Output:

Propellant: Diesel

	41.6	P Rent-A-Car (Pte) t Pandan Road	ld			RENTAL AC	REEMENT NUI	MBER
		Papore 609283				RACLT2003	15 .	
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	GST	No.: M20033732		IX: 6 349 385 DC No.: 19790047		RA Status	CheckOut	
	CON	PANYIDRIVER				REGN NO.	GBF789C	
Name R	EFER TO HIRF	R FOR DRIVER'S DE	SIDETA	ILS	ariat in the	MAKE	NISSAN	
Address		OK DRIVERS DE	TAILS			MODEL	NV200 1.5L MT RED	
Country				Postal Code		DATE	02/09/2020	01/09/2021
Office No.		Home No.		Mobile No.		TIME	10:00	23:59
Driving Licence	TBA	Expiry Date		Place of issue		FUEL	8/8	
CONTRACTOR AND TO A	hielipiananion-	Date of Birth:		Nationality		KM	162658	0
Account Name: C	CC	MPANY/BILLING	DETAILS		建模型的	KM DRIVEN	0	mandada (ministra)
racount Name: C	ONRAD MAINTE	NANCE SERVICES	PTE LTD	Cust Code:	DC0007	VEHI	CLE RETURN DE	Color of the same of the
Contact Person: FI	NANCE DEPT			Sales ID:	MISCHEL-N	DUE TO DETU	DATE	TIME
	5618992	Home No.		Mobile No.		EXTENDED TO	IN 01/09/2021 05/11/2020	
		ADDITIONAL DE	IVER		NOTE THE WATER	-0000000000000000000000000000000000000	ENTAL CHARGE	God Taken anderen
Name			- AND STATE OF		OFF TENEDRICH STATES	RATE PLAN CO	MINERON CONTRACTOR OF THE PROPERTY OF THE PARTY OF THE PA	MATERIAL STATE OF STA
Address Country						RENTAL CHAR		
Office No.		Nome No		Postal Code		12 Months	@\$ 1,150.00	13,800.00
Driving Licence		Home No. Expiry:		Mobile No.		TOTAL CHARG	ES -	13,800.00
Discon contract and		Date of Birth:		Place of Issue: Nationality		LESS: DISCOUN	NT ALLOWED	0.00
THE REAL PROPERTY.	Talenta Co	PAYMENT MO	DE		MARCHARIAN CO.	TOTAL CHARG	ES w/DIS	13,800.00
HEREBY AUTHORISE CAP R NOT COVERED WITHIN THE	TERMS OF THIS AGRE	TO CHARGE MY VISAAWE.	CMC/DINERS	FOR ANY EXTENSION O	F HIRE OR DAMAGES	CDW @ S0 Per		0.00
Card No.			Exp	iry Date		CDWM @ S0Per		0.00
Name of Cardholder. Issuing Bank				tion Code		PAI @ S0 Per M	onth	0.00
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Signature Of Hirer		x						
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gnature Of Hirer	Prerege - EERO	х				PRORATE		0.00
AVE READ AND AGREE TO T	HE TERMS AND COM	ACKNOWLE	CYLLEAGUE			GRAND TOTAL	_	13,887.14
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HE EVENT THAT DAMAGE T HIRER'S CREDIT CARD, PARKING, TRAFFIC INFRIN HAVE PRESENTED A CHARG THE CHARTER OR CREDIT O	GEMENTS AND LATE	RETURN CHARGE HAVE	E eu locae			GRAND TOTAL	w/GST	14,859.2
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VEHICLES ARE SUPPLIED WI FUEL CHARGE WILL BE CHA	al management		Little	OKINIELINO	E)	The second second	SCHOOL STATE	NAME OF TAXABLE PARTY.





1/20221108/2119

l of 3 Report No. T/20221108/2119

Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999

REPORT OF A TRAFFIC ACCIDENT

	me Report N 022 22:32	Made:	Vide Report No.: A/20221108/0102	Station Diary No.: 176
Informa	nt's Partic	ulars	0.44 No. 10 (10 (10 (10 (10 (10 (10 (10 (10 (10	TO THE WAY TO SEE THE SECOND S
	f Informant: AN ANBAL		Address: APT BLK 714 CLEMENTI WE SINGAPORE 120714	EST STREET 2 #08-141
	/ ID No.: / G5109461	IT	Contact No.: Home/Office:	Mobile: 81267188
Nationa INDIAN	lity:		Email:	
Sex: Male	Age: 35	Date of Birth: 02/05/1987	Type of Informant: Driver	
Race: Indian			Language: English	Institution / School Name:
Occupat OPERA	tion: TION SUPE	RVISOR	Driving Licence Information: Class: 2B,3 Date of Expiry: 09/08/	

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/11/2022 19:20	Type of Location:
Location:				
OUTRAM PA	RK			
Lamp Post Nu	imber: 3A			
Manthau		Road Surface:		Dood Coord Limits
SERVICE TRANSPORT		Wet	State of the last	Road Speed Limit:
Weather: Clear Traffic Flow:	A CONTRACTOR STATE OF THE STATE	The state of the s		Traffic Volume:

Details of V	talls of Vehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBF789C	Van				Slightly Damaged	0
PC8445S	Van				Slightly Damaged	0
XE4680A	Trailer				Slightly Damaged	0





Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999 CONTINUATION OF REPORT

2 of 3 Report No. T/20221108/2119

Any Pedestrian In No. of Pedestrian			Use of Ped	destrian (Crossi	ng: NA
Driver						G5109461T
Name	GANESAN ANBALAGA	AN		ID No.		G51094011
Related Vehicle	GBF789C (Van)			Contac	t No.	81267188
Hospital/Clinic	NIL			Class of Driving Licence Expiry	е&	Class: 2B,3 Date of Expiry: 09/08/2026
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	erve artisect appropriation and
Driver		a desirable		I D N		G2503369N
Name	WANG GUODONG			ID No.		G2505309N
Related Vehicle	XE4680A (Trailer)			Contact No.		86202133
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Dis		NIL	
No of Davis gran	ted Medical Leave	NIL	Degree of	of Injury	NIL	

Brief Details.

On the above-mentioned date, time and location, I parked my vehicle (GBF789C) along the Outram Park. I parked there as I was doing maintenance work for about 4 hours. The main contractor is namely Mr Ramesh (HP: 89292572) dedicated a spot for me to park the vehicle when conducting maintenance work.

When I was doing maintenance work, I received a call Mr Ramesh. Mr Ramesh informed me that my vehicle got hit by a trailer and my vehicle also collided with Mr Slamat (HP:96322387) vehicle (PC8445S). I then immediately and make a check on the accident.

There was damage on my left front bumper and rear bumper. There was nobody injured.

After that, police resources attended to the accident.





Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999 CONTINUATION OF REPORT

3 of 3 Report No. T/20221108/2119

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 Recordin	g The Report:
SGT 2 NG WEI JIN	h.
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / GIT /	
INSP (1) THABAGESH JEYA Contact No.: 65476178	THESH
NP168	

	M
ate/Time: 8/11/2022 22:32	
Classification Of Case:	