SS2X22BA0008 / SME MOTOR PTE LTD ENTRY DATE & TIME: 10/11/2022 14:54 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (10/11/2022 14:54 (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 10/11/2022 14:54 (SGT) Reported by Driver Date of Accident 09/11/2022 12:50 (SGT) Exact Location of Accident 26 Kallang Pl, Singapore 339157 Additional Location Information CARPARK ENTRANCE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Manual

1994

Vehicle Registration Number GBE7631H

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **FATTY HOE CATERING SERVICES** Company Reg No 53149869K Email Address JASONKOH2302@YAHOO.COM.SG Mobile Phone No (Phone) +65-81243063 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

INSURANCE COMPANY

Name of Insurance Company United Overseas Insurance Ltd Policy Number / Cover Note Number DHOM110177572101

DRIVER

CC

Name of Driver KOH GUAN HUAT NRIC No S7306853C Date Of Birth 23/02/1973 Occupation Outdoor

Date Of Driving Pass 11/08/1993 Driving experience 29 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-81243063 Alt. Phone Number Email Address JASONKOH2302@YAHOO.COM.SG Address BLK 224 SIMEI STREET 4 #11-94 Address complement Postcode 520224 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? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20221109/7058. 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 SHC5208A Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	LIM CHEOW SEONG
Contact Number	(Phone) +65-96155838
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

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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:
- (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.

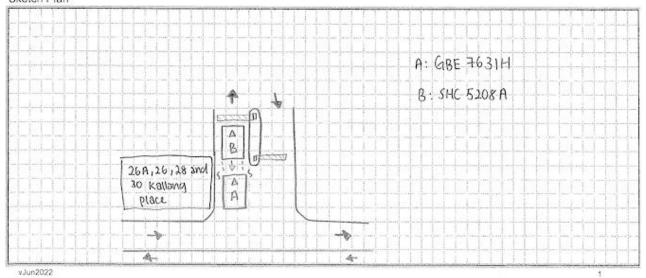


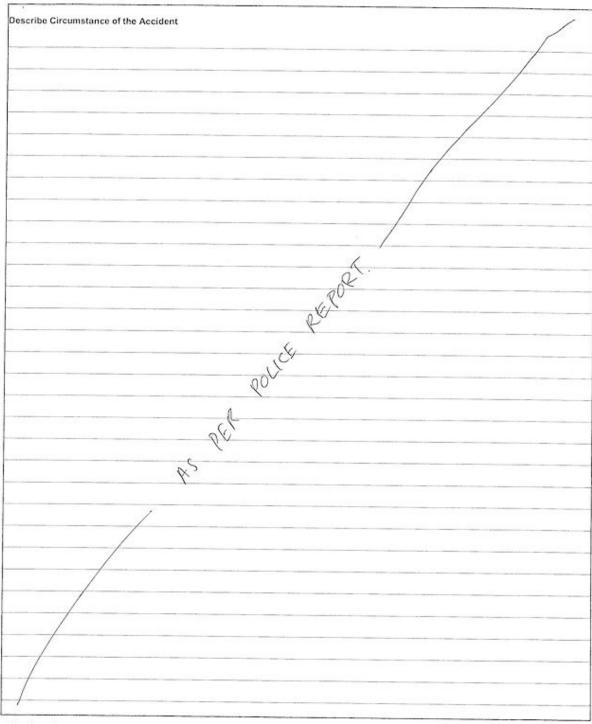
Policyholder's Signature / Date & Time

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





Declaration

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



Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vJun2022

2















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20221109/7058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/11/2022 17:43		Vide Report No.:	Station Diary No.	
Informa	nt's Partic	ulars		
Name of Informant: KOH GUAN HUAT		Address: 224 SIMEI STREET 4 #11-94 SINGAPORE 520224		
ID Type / ID No.: NRIC NO / S7306853C			Contact No.: Home/Office:	Mobile: 81243063
Nationality: SINGAPORE CITIZEN		Email: jasonkoh2302@yahoo.com.sg		
Sex: Male	Age: 49	Date of Birth: 23/02/1973	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: Driver		Driving Licence Information: Class: Date of Expiry:		

General Infor	mation of the Accide	ent		
Type of Accident:	of Non-Injury		Date/Time of Accident: 09/11/2022 12:50	Type of Location Straight Road
KALLANG PL Weather:	.ACE	Road Surface:		Road Speed Limit:
\$0.570 (\$7.0) \$1.00 (\$1		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collis Moving Vehic	sion: le Against - Others	1		Anyone conveyed by ambulance: No

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBE7631H	Lorry					0
SHC5208A	Car					0

Details of Person Involved		
Any Pedestrian Involved: No		
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA	





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20221109/7058

CONTINUATION OF REPORT

Driver				AND MILE	
Name	KOH GUAN HUAT			ID No.	S7306853C
Related Vehicle	GBE7631H (Lorry)			Contact No.	81243063
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL Date			NIL	
No. of Days granted Medical Leave NIL			Degree of	NIL	

Brief Details.

I was travelling along 26 kallang place carpark entrance on 09/11/2022 at about 12.50pm with my company vehicle bearing car plate number GBE7631H. My vehicle was stationary as I was waiting for vehicle bearing car plate number SHC5208A (Transcab taxi) to enter the gantry, suddenly Vehicle SHC5208A reversed and collided onto my vehicle front portion. We alighted, SHC5208A driver Mr Lim Cheow Seong said that he didn't want to pay the repair cost of my vehicle, so we exchanged particulars and left the scene.

I am doing this report for insurance purpose and to request from the carpark gantry company for video footage as the accident happened at the gantry area.

There is no injury for this accident.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20221109/7058

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/11/2022 17:43
Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168



Certificate of Insurance

Motor various (Tood Party Risks and Compensation) Act (Chapter 169) stotor Value as , Tood Party Risks and Compensation) Roles 1990. Rose Transport Act, 1687 (Malaysia)

Worse Setacles (Third Carty Right) Rules (1959 (Malayson))

ORIGINAL

CERTIFICATE NO. DROM110127572101 Type of Cover

COMPREHENSIVE

Excess: \$800; SICTION 1 \$3000; APPL 10 <25 YES & OR <3YRS EXP \$100; WINDSCREEN DAMAGE CLAIM

Vehicle Number

G88.7631H

Name of Insured

FATTY BOE CATERING SERVICES

Restricted Driver(s) 101 APPLICABLE

Period of Insurance 20 April 2022 to 19 April 2023

Engine# 1KD2579801

Hire Purchase MY AUTO CAPITAL PIE LID

Chassis# KPV2318023673

Goods corrying - Private Type [M7 300]

Any person who is driving on the Insured's order or with their politication

- (IMITATIONS AS TO USE

 (*) Use in connection with the Insured's business

 (2) Use for the carriage of passangers (after than the file or rewards in connection with the Insured's

(3) Use for social domestic and pleasure perposes

Def Po for 3005 MOT COVER

(1) Use for hire or reward or for racing paid making reliability trial or speed testing

(2) One entire drawing a trailer occupt the towing of any disabled mechanically propelled rehicle

Provided that the person is perintted in accordance with the numbing or other laws or regulations to drive the Motor Vehicle or has been to permitted and is not disquarted by order of a Court of Fow or by realizing of any exactly entire or regulation in that behalf from driving the Motor

Tentance rendered expensive by Section 6 of the Meto: Vehicles (Third Party Raks and Congression) Act (Chapter 169) and Section 95 of the Road Transport Act (1987 (Millayva)), size not to be included under these lendings

IWE HEREBY CERTIFY that the Policy to which this Continues relates as exceed in accordance with the provisions of the Motor Verscless Find Party Make and Compression Act (Chapter 189) and part to of the Read Trainport Act (1997 (Makeysia)).

UNITED OVERSEAS INSURANCE LTD

For the Company