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 21/11/2022 16:49 (SGT) Reported by Driver Date of Accident 20/11/2022 16:23 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIIE TOWARDS CHANGI Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Auto

3882

Vehicle Registration Number SNF3882D

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SINGAPORE ELECTRIC VEHICLES PTE. LTD. Company Reg No 199803133G Email Address BRIAN.HENG@SEV.COM.SG Mobile Phone No (Phone) +65-81576008 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Byd Model E6 Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5127157425

DRIVER

CC

Name of Driver TAN KIM HUAT NRIC No S7032744I Date Of Birth 26/09/1970 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	11/11/2002 20 YEARS Male (Phone) +65-98750686 - MAX.TAN2826@GMAIL.COM BLK 466C SEMBAWANG DRIVE #21-339 753466 No Hirer No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) 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	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN ATTACHED	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	FBS7166K Motorcycle

Name of Driver
Contact Number

Address			
Address complement			
Postcode		 	 <u>-</u>
Insurance Company Name			<u>-</u>
Nature Of Damage			
Details of property damaged in a	accident	 	<u>-</u>
No. Of Passenger (Including Dri	ver)		 -

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 wilful 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 Singayore, for one or more of the above Purposes.

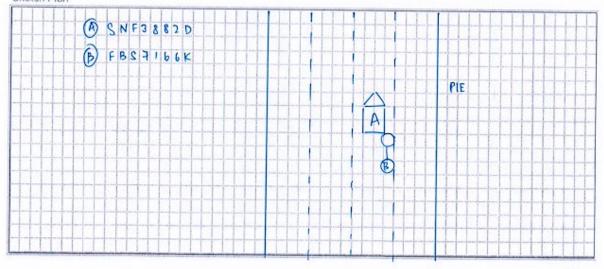
THICK O

Policyholder's Signature / Date & 7

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

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

Sketch Plan

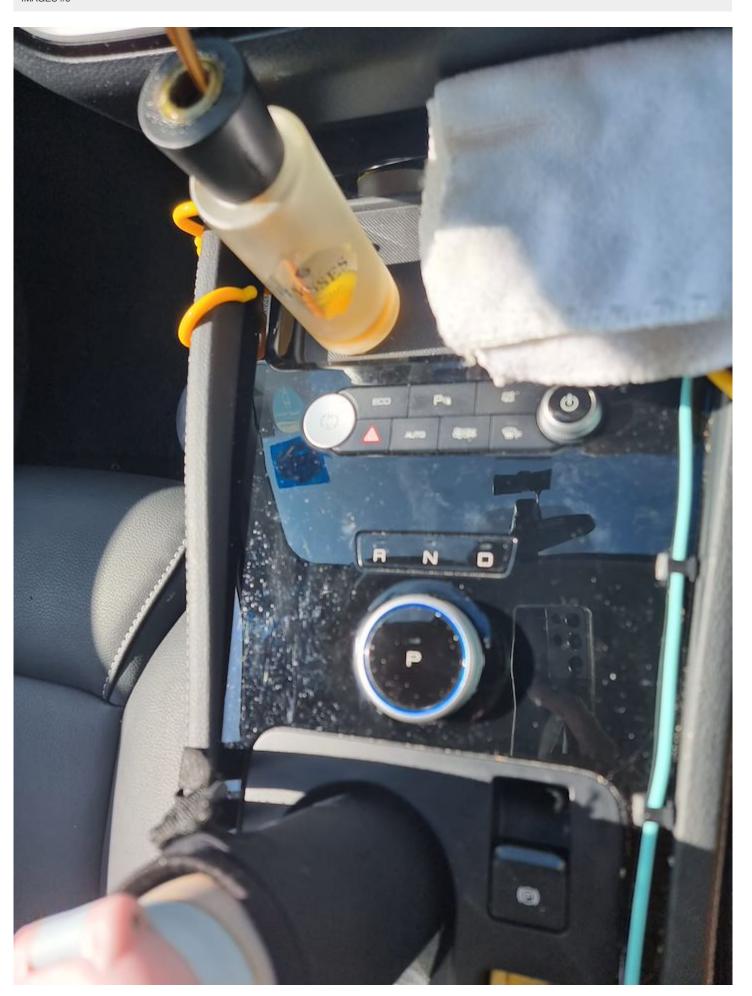


1

I WAS TRAVELU	ING ALONG PIE TOW	mrds changi	ON LANE I.	
I CHECKED MY	BLINDSPOT AND LIC	NACYED TO CHA	NGE LANE	
TO LANE 2. AS	I WAS ABOUT TO E	NTER THE LANE	, А ИОТОКЫКС	
COLLIDEN ONTO	M VEHICLE, NO I	NJUFIES ON BO	n paptes.	
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	A			
ation fare the foregoing particulars are true in	n every respect.			CE
View Very			1000	eg. No. m 18885/G
1300	1994.		1. 6	* 5
ler's signature Date Time Driver's 8 Time	Signature (if driver is not the police		Witnessed by Reporting Centre Pers Name as in NRIC/ID card)	onnel





















Certificate of Insurance

Cover : drivo PREMIUM

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5127157425-000040

: SNF3882D

1. Index mark and Registration Number of Vehicle

Chassis Number : LCOCE4DC1N0065080

: SINGAPORE ELECTRIC VEHICLES PTE. LTD. 2. Name of Policyholder : 24 May 2022 3. Effective Date of Insurance

: 23 May 2023 4. Expiry Date of Insurance

- 5. Persons or Classes of Persons entitled to drive#
 - (a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission. 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.

- 6. Limitations as to Use#
 - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1) EXCESS (SECTION 2) : \$\$100 WINDSCREEN EXCESS ADDITIONAL EXCESS : N/A REPAIR AT OWNER'S PREFERRED WORKSHOP : YES : YES INSURE WITH COF : NO NCD PROTECTION : NO TRANSPORT ALLOWANCE **EXCESS WAIVER** : NO : N/A PRIMARY DRIVER NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A : VINCAR PTE, LTD. HIRE PURCHASE COMPANY

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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 (Malaysia)

: VINCAR PTE LTD (00000614250) Agency Date of Issue : 04 May 2022 09:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive

Contract No.

Singapore Electric Vehicles Pte Ltd.

152 Ubi Avenue 4 #01-01 Singapore 408820 Company Registration No.: 199803133G GST Reg No.: 199803133G



Hirer Name

Identification Type
Identification No.

Mobile Number
Registered Address

Email Address

TAN KIM HUAT

ITAN KIM HUAT

INRIC

S70327441
Date of Birth
Date of B

: SEV/RAC/22-0206

Particulars of Vehicle SNF3882D Vehicle No. BYD / E6 ME-2 Brand / Model 23RD SEPTEMBER 2022 TO 26TH NOVEMBER 2022 Date of Rental Contract As per LTA's Vehicle Registration Detail Information. Other particulars of Vehicle 5127157425-000040 Insurance Policy No As attached Insurance Cover Note NTUC Income Insurer As attached Decal label ODO Meter Reading at the time of renting out Routine servicing schedule : As attached Rental vehicle condition report Takeover contract SEV/RAC/22-0103 of Ong Swee Heng Remarks

Pursuant to the execution of rental agreement dated , I/we acknowledge having taken the physical possession of electric vehicle registration number with above mentioned particulars. Name and IC of Hirer Singapore Electric Vehicles Pte Ltd (Hirer) Signature Authorised signatory Pursuant to the expiry/termination of rental agreement dated , we acknowledge having taken back physical possession of electric vehicle registration number with above mentioned particulars. Date and time of taking back the possession of electric vehicle ODO Meter Reading Rental vehicle condition report Remarks Name and IC of Hirer Singapore Electric Vehicles Pte Ltd (Hirer) (Owner) Signature Authorised signatory