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.

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 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 19/12/2022 19:25 (SGT) Reported by Date of Accident 17/12/2022 22:10 (SGT) Exact Location of Accident Singapore Additional Location Information BUANGKOK E DR B4 UPP SERANGOON RD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

No - Claiming third party

Vehicle Registration Number SJX3827S

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHNG BING SHEN, KELVIN NRIC No S8731912A Email Address kelvinchngbs@gmail.com Mobile Phone No (Phone) +65-93893453 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Fortuner Variant Exact purpose for which vehicle was being used at time of accident Private use

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Private car Transmission Auto CC 2694

INSURANCE COMPANY

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number D22MTPV01009149

DRIVER

Name of Driver CHNG BING SHEN, KELVIN NRIC No S8731912A Date Of Birth 06/10/1987 Occupation Indoor

Date Of Driving Pass	24/12/2000
Driving experience	24/12/2009 13 YEARS
Gender	Male
Mobile Number	(Phone) +65-93893453
Alt. Phone Number	-
Email Address	kelvinchngbs@gmail.com
Address	768 YISHUN AVE 3
Address complement	#03-321
Postcode	760768
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry
	51,9
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	3
Has the driver been approached by unknown person(s)	N.
soliciting/offering accident claims assistance? Translator's name	No -
Translator's ID	
Translator's phone number	
Translator's email	
Original language used in the statement	-
PASSENGER 1	
Name	TAN YAN RU
Gender	Female
PASSENGER 2	
Name Gender	ENG HONG MIN
Gender	Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	INO -
, cc, egac.	
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN	
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 Manufacturer - Vehicle Model - Vehicle Variant - Vehicle Colour - Vehicle Category Private car 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) -	Vehicle Registration Number	SLN7343U
Vehicle Variant - Vehicle Colour - Vehicle Category Private car Name of Driver - Contact Number - Address - Address - Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident -	Vehicle Manufacturer	-
Vehicle Colour-Vehicle CategoryPrivate carName of Driver-Contact Number-Address-Address complement-Postcode-Insurance Company Name-Nature Of Damage-Details of property damaged in accident-	Vehicle Model	-
Vehicle CategoryPrivate carName of Driver-Contact Number-Address-Address complement-Postcode-Insurance Company Name-Nature Of Damage-Details of property damaged in accident-	Vehicle Variant	-
Name of Driver - Contact Number - Address - Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident -	Vehicle Colour	-
Contact Number - Address Address complement Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident	Vehicle Category	Private car
Address - Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident	Name of Driver	-
Address complement - Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident	Contact Number	-
Postcode - Insurance Company Name - Nature Of Damage - Details of property damaged in accident	Address	-
Insurance Company Name - Nature Of Damage - Details of property damaged in accident	Address complement	-
Nature Of Damage - Details of property damaged in accident -	Postcode	-
Details of property damaged in accident -	Insurance Company Name	-
· · · · · · · · · · · · · · · · · · ·	Nature Of Damage	-
No. Of Passenger (Including Driver)	Details of property damaged in accident	-
	No. Of Passenger (Including Driver)	-

SKETCH PLAN

Insurer: Sompo Ins Vunicle: SJx 3827S

MPORTANT NOTICE

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8. Consent under the Personal Data Protection Act (PDPA)

lunderstand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General insurance Association of Singapore ("GIA") maylars permitted to collect, use, disclose and/or process my personal data/personal information set out in the form) and any other personal information provided by the 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 histories 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, handing and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to

(ii) Investigating the accident and/or my claims;

(ii) carrying out and/or dealing with my instructions or responding to any enquiries by mic

(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/mall packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

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

Sketch Plan

Policyholder's Signature / Date &

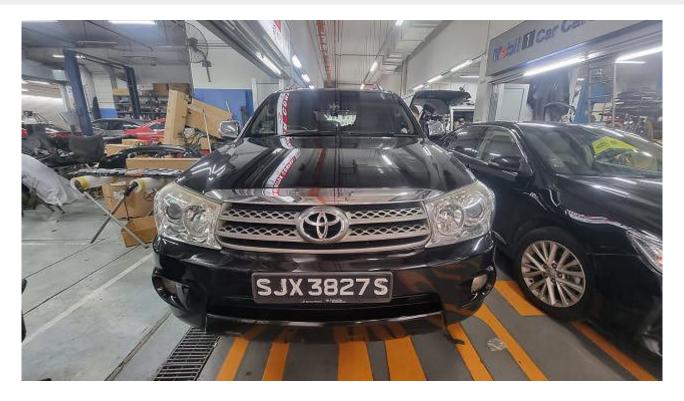
Driver's Signature (if driver is not the policyholder) / Date & Time

A: SJX 3827 S B: SLN 74744

Witnessed by Reporting C Personnel

AHELIM MOSOR CORRENY

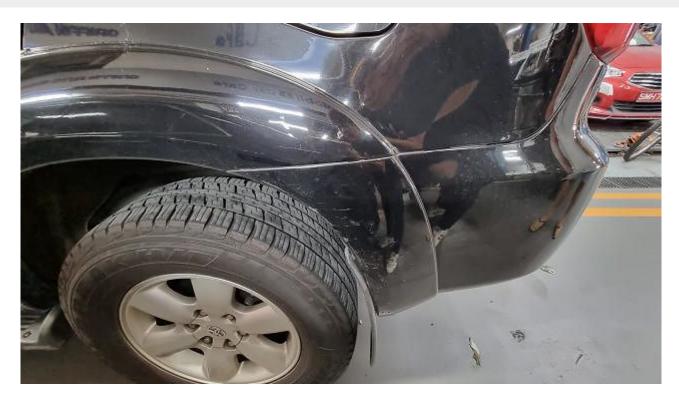
Date of accident: 17/12/2022 Time: 22 : 10 Location Rd My Vehicle A: SJX 3827 S Vehicle B: SLN 7434 U Vehicle C:	oon
KETCH PLAN escribe Circumstances of the Accident	
On the Stocked dute I trie, I was voweley strught t	eric-
on love I when I check that, signabled and father who have	2
after about I seconds, I trough on love I sudding hold	2007
impost on my left. Vehal B later sent may me his sides	
showing that I was roughly strought in my lane. Though his	
camera is a wide less which show thru the connex leve as	
though I was cutting be love, it the later part of the vio	leo
Shows turn my which was straight in lune in 1:36 seconds of	he
rider on wheels were stronght & Vehicle B mention he has	\dashv
rear new comera but refuse to send me. I what Upon	\neg
viewy the conson I soligh to add that while B vers	-
brouchey in between 2 lanes. My style alignment feel off,	Her
ou occidul.	
ote: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under	
u own policy. Kindly check with your own insurer for more information.	
Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only de declare the foregoing particulars are true in every respect.	10
Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel	1







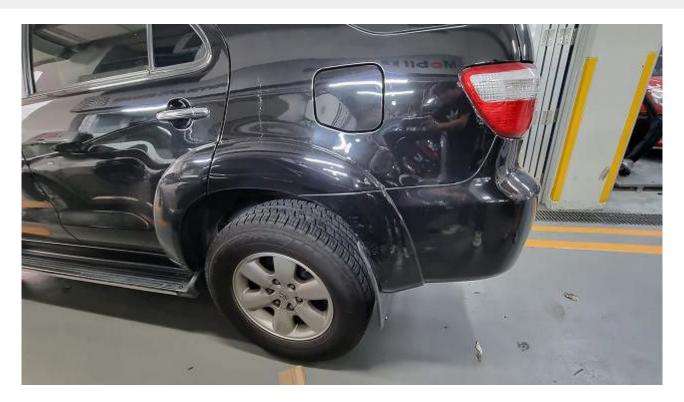














Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #03-03 Singapore Land Tower, Singapore 049523 Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) ROAD TRANSPORT ACT 1987 (MALAYSIA) ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No. : D22MTPV01009149

: CHNG BING SHEN KELVIN Insured

Motor Vehicle (Registration No.): SJX3827S

: Comprehensive - ExcelDrive GOLD Coverage

: 09 JUNE 2022 00:00 Policy Commencement Date Policy Expiry Date : 08 JUNE 2023 23:59 Maximum Liability (Section I) : Market value at time of loss

: \$700 - Section I Excess* : Buy Up: \$300 - Section I Voluntary Excess*

Windscreen Excess* : S\$100.00 for each and every applicable claim.

* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

- The Insured.
- Any other person who is driving on the Insured's order or with his permission.
- 3. In the event of the death of the Insured,
 - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
- b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

 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 (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP:30

Sompo Insurance Singapore Pte. Ltd.

Dui 20

Authorised Signatory

Date/Time of Issue: 30 MAY 2022 09:30

IMPORTANT NOTICE

- Keep the Certificate in your Motor Vehicle;
 Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a
 Motor Vehicle without a valid policy of insurance under the Act;
 On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to
 the insurance company, if the Certificate of Insurance has been lost or destroyed, a stability declaration to that effect must be made. Failure to comply with this obligation
 is an offence under the Motor Vehicle; (Third-Party Risks and Compensation) Act (Chapter 189);
 This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name: 11A14086 & ACCORD INSURANCE AGENCY CI Code: 22A DADBZJ4IKD1LWKA8