SW0E232M0003 / WAH HONG MOTORS & CREDIT PTE LTD ENTRY DATE & TIME: 22/02/2023 09:32 (SGT) SUBMITTED BY: Suzana BTE Edros VERSION: 1 (22/02/2023 09:32 (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.

 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 22/02/2023 09:32 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 21/01/2023 13:45 (SGT) Exact Location of Accident Near 10 Bukit Panjang Rd, Singapore 679897 Additional Location Information ALONG BUKIT TIMAH ROAD NEAR BUKIT PANJANG MRT STATION TOWARDS PETIR ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGR4884L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LEE CHEE FONG NRIC No S2010332I Email Address LACAY@LIVE.COM Mobile Phone No (Phone) +65-96191950 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model 220e Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Private car Transmission Auto CC 1991

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00063892201

DRIVER

Name of Driver YAK HUI JOO NRIC No S1195327A Date Of Birth 23/03/1956

Occupation	Indoor
Date Of Driving Pass	26/06/1978
Driving experience	44 YEARS AND 7 MONTHS
Gender Mahila Nusahar	Female
Mobile Number Alt. Phone Number	(Phone) +65-96262169
Email Address	- LACAVALIVE COM
Address	LACAY@LIVE.COM BLK 549A SEGAR ROAD
Address complement	#05-662
Postcode	671549
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Side Swipe
Weather Conditions	Raining
Road Surface	Wet
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)	2
Has the driver been approached by unknown person(s)	
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	LEE CHEE FONG
Gender	Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No No
If yes, against whom?	No
n yes, against whom:	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO SUMMARY AND SKETCH PLAN	
ATTACHMENT(O)	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
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DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SHB5815C
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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.
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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

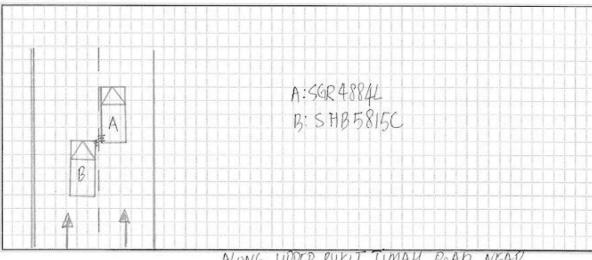
Driver's Signature (if driver is not the policyholder) / Date & Time

yole sper goo

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

SUZANA RIE EDROS

Sketch Plan



ALONG UPPER BUKIT TIMAH ROAD, NEAR BUKIT PANJANG TOWARDS PETIR ROAD

Describe Circumstance of the Accident	
I was making a U turned its upper Bt. Timah Ray ON THE right side lane. A taxi SHB 5815 came (ran B behind and scratch my rear (lift & left side). My car only suffer a niner scratch. THE TAXI had a slight school at the right 5 da above the front wheel.	ate (

Declaration

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

Policyholder's Signature / Date & Time

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

yale Mar Joo

SUZANA BIE EDROS

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







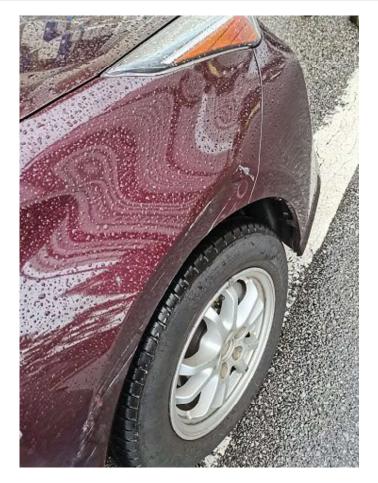
















中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1E

R SN

CERTIFICATE OF INSURANCE

stor Vehicles (Third-Party Risks and Compensation) Act (Chapter 18 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Mataysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

AN0714A Cov. Type:C

CERTIFICATE No.

DMPCSNW00063892201

Engine No.: 27492030539324 Cha. No.:WDD2120342B277479

1. Index Mark and Registration

SGR4884L

AUTOSAFE

Number of Vehicle

4. Date of Expiry of Insurance

2. Name of Policy Holder

LEE CHEE FONG

15/04/2022

Named Drivers Ex Sect. I

S\$750.00

Effective date of the Commencement of Insurance for the purposes of the Regulations. (00:00:00) Ordinance or Enactment

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 \$\$3,000.00

28/09/2023

Ex Sect. I - Age >= 28

\$\$500.00

* Age as at date of accident

EX ON WINDSCREEN . 5\$100.00

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 permission.

Provided that the person driving is permitted in accordance with the licensing or other taws 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:*

Use for social, domestic and pleasure purposes and for the Policyholder's business. Ose for social, domestic and pleasure purposes and for the Prolegyinder's dustries, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Walver of Excess for the first \$\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: TOKYO CENTURY LEASING (S) PTE LTD

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 (Malaysia), 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 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

Issued By: UNIVERSAL ALLIANZE PRIVATE LIMITED Authorised Officer

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 👚 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

₱6222 1033

www.sg.cntaiping.com