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SN09232D000A / National Assessment Centre Services [408933] ENTRY DATE & TIME: 13/02/2023 17:41 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (13/02/2023 17:41 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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 Form by insurance companies is not an admission of policy hability 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 13/02/2023 17:41 (SGT) Reported by Date of Accident 11/02/2023 13:55 (SGT) **Exact Location of Accident** Cairnhill Rd, Singapore Additional Location Information TOWARDS SCOTTS ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH5571U

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner IN-EXPAT CONSULTANT PTE. LTD. Company Reg No 2XXXXX612C **Email Address** sajalrahman86@gmail.com Mobile Phone No (Phone) +65-92771714 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Variant Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

Employment

No - Claiming third party Commercial vehicle Manual 2982

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

Tokio Marine Insurance Singapore Ltd 22-MQ002852-R01

DRIVER

Name of Driver Passport No/FIN Date Of Birth Occupation

RAHMAN SAJAL GXXXX537M 15/05/1994 Outdoor

Date Of Driving Pass	17/01/2019
Driving experience	4 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-81721954
Alt. Phone Number	-
Email Address	sajalrahman86@gmail.com
Address	11 CHANGI SOUTH STREET 2
Address complement	_
Postcode	_
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	
Vollidio Hogiculation Hamber of Outer Femilies Office 27 2 mon	
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	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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number	SMP9847A
Vehicle Manufacturer	or come face 100.00
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	
Makinto Catalana	

Private car

Vehicle Category 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)	-
accorder (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 Actual 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>.
- 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:

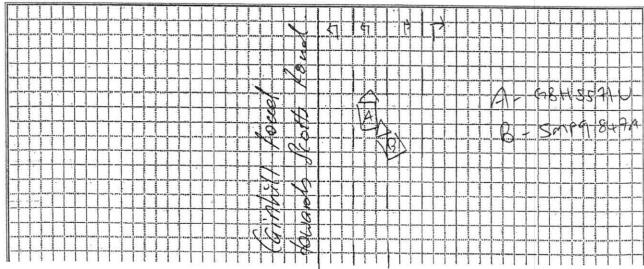
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

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

Sketch Plan





Date of Accident	: 11/02/2023 Accident Time: 13 55 (24-HR-FORMAT)			
Accident Place	· Cairne Hill Road toward, Scotts and			
Vehicle Reg. No (Car plate No.)	: GBH 5571 U CC: 3000 Vehicle Make/Model: To 701a Dyna			
Insurance Company	tokio marine Policy No 27 - MOROZ DEC			
Name of Registered Owner	: Company/Individual In- Expot Consultant Pte Ltd			
ID of Registered Owner OWNER EMAIL ADDRESS:	: Co Reg No: 2013 04612 C Owner's NRIC No:			
Info@Inexpat.com.sg	: Co Contact No: 92771714 Owner's Contact No:			
DRIVER'S Name	: Rahman Sajal DRIVER'S NRIC No: G 2384 537 M			
DRIVER'S Date of Birth	15 /05 / 1994 DRIVER'S License Pass Date 17/01/2019			
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others:			
DRIVER'S Address	: 11 Chargi South Street 2			
DRIVER'S Contact No./ Alt No.	:1) 81721954 2)			
DRIVER'S Occupation	: INDOOR \OUTDOOR (eg. working inside or outside of an ofc)			
Email Address	: SAJALRAHMAN 86 @gmail. com			
Weather & Road Surface	: CLEAK & DRY \ RAINING & WET \AFTER RAIN & WET			
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance			
Number of Passengers (including Driver): Name & Gender; Was the accident reported to the police? YES \NO Was there any video Captured by car camera: YES \NO Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose Any injuries, if yes(name of the injured person)				
Other	Party Driver's Particulars (if any)			
Vehicle Reg No: SMP 9847A	Vehicle Reg No:			
Vehicle Make\Model:	Vehicle Make\Model:			
Name DRIVER:	Name DRIVER:			
IC No. DRIVER:	IC No. DRIVER:			
DRIVER'S Contact & add:	DRIVER'S Contact & add:			
REPORT FORM EXPLAINED IN : ENGLISH /	CHINESE / MALAY / TAMIL OTHERS:			
WHO REPORTED THE ACCIDENT : OWNER	R/DRIVER/BOTH			

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



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

Policy No.: 22-MQ002852-R01 (Comm Vehicle Carry Own Goods)

1. Index Mark and Registration Number of Vehicle

GBH5571U

Chassis No.: JTFAT35Y10K210520

2. Name of Policyholder

IN-EXPAT CONSULTANT PTE. LTD.

3. Effective date of the Commencement of Insurance for the purposes of the Act

05/07/2022

4. Date of Expiry of Insurance

04/07/2023

5. Persons or Class of Persons entitled to drive*

Any person who is driving on the policyholder's order or with their 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. 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. 6. Limitations as to use*
 - 1) Use in connection with the policyholder's business.
 - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.

The policy does not cover:-

- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- * 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

Account: 3188DDA

Insurance Plan: Limit for total loss or theft:

Policy Excess:

Comprehensive Approved Workshop Plan Prevailing Market Value Own Damage Claims

Financial Interest:

SGD 2,000 Windscreen Excess

DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: TMIS Direct from TM Onli

Printed 17/06/2022