SC1K223S000G / ComfortDelGro Engineering Pte Ltd [579701] ENTRY DATE & TIME: 31/03/2022 12:49 (SGT) SUBMITTED BY: Brenda Ng VERSION: 1 (31/03/2022 12:49 (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 Authorised 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 31/03/2022 12:49 (SGT) Date of Accident 28/03/2022 09:26 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE TOWARDS CHANGI Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SI X5749Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner PREZTIGEZ ASIA PRIVATE LIMITED Company Reg No 201114133R **Email Address** lydia.chong@preztigezasia.com Mobile Phone No (Phone) +65-63867687 Alternative Phone No +65-63867687

VEHICLE PARTICULARS

Manufacturer **BMW** Model X2 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 your vehicle? Yes Motor trade Vehicle Category Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DMTTHQ21-00044 Cover Note Number

DRIVER

Name of Driver **GAN TIEN WEI** NRIC No S8602317B

Date Of Birth 13/01/1986 Occupation Indoor Date Of Driving Pass 23/07/2010 Driving experience 11 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-97831644 Alt. Phone Number Email Address lydia.chong@preztigezasia.com Address 639 CHOA CHU KANG ST 64 #12-21 Address complement Postcode 680639 Is the driver the policyholder? Nο 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 **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SKS1159P Volvo S60
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) -

SKETCH PLAN

IMPORTANT NOTICE

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- 2. This Formmust be completed by the Policyholder and/or the Authorised 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>.
- 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. The 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.
- 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)

Lunderstand, 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' 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, 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

(c) (De Hay)

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

old Police Academy

PIE towards (Magi

(or B = SLX STUGY

Describe Circumstances of the Accident
I (SLX5749Y) was travelling along PIE towards Changi on lone one, when the coninfront of the (SKS1159P) suddenly stopped: I could not stop in time and rear ended the coninfront (SKS1159P)
I have the considerat of any (every read and deliver stranged) on the office
ends se con simal de me CZEZ (Pet h.) 2000 ping Z solkio. I (ONIO MOLZ LOL)
in tive and rear ended the con intront (SKGISTP)
HEADER SHOWN AND AND AND AND AND AND AND AND AND AN

Declaration

We declare the foregoing particulars are true in every respect.

to to the state of the state of

Policyholder's Signature / Date & Time

Sil 28/3/22

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

AP (Yiying)

Witnessed by Reporting Centre Personnel EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg rea no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA) THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

> Form: MIND Excess:

Section 1

Section 1

Section 2

Section 2

(REPUBLIC OF SINGAPORE) THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

MOTOR TRADE Comprehensive

Certificate No.: DMTTH021-000044

1. Index Mark and Registration Number of Vehicles

2. Engine No. and Chassis No. NOT APPLICABLE / NOT APPLICABLE

3. Name of Policyholder PREZTIGEZ ASIA PRIVATE LIMITED

4. Effective Date of the Commencement of Insurance for the purpose of the Act 07/11/2021

5. Date of Expiry of Insurance 05/11/2022

6. Person or Classes of Persons entitled to drive* The specific person(s) whose name is lodged in the Policy

Motor Trade Vehicle

THE MOTOR VEHICLE

Motor Vehicles belonging to the Policyholder's customer and at the time of accident are being held in trust by the Policyholder for the purpose of repairing, test driving and/or tow.

*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 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 has not been cancelled at the time of accident loss or damage,

7. Limitations as to use*

Use only for Motor Trade Purposes. THE POLICY DOES NOT COVER use for hire or reward racing pace-making reliability trial or speed-testing.

N.B. Use solely for "breakdown" purposes is not deemed to be use for hire or

*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) or and Amendment, Act or Acts passed in substitution thereof.

misjb/HO/A000317/PF Risk Management P

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited



Sum Insured/MktValue SGDS00,000.00

EQI Motor Accident

Hotline

6311 3211

SGD5,000.00

SGD8,000.00

SGD5,000.00

SGD8,000.00



AUTHORIZATION LETTER

Date: 28/3/22	
To Whom It May Concern:	TIMESON POR ASSESSION OF STREET OF STREET
, Prextigez Asia Pte Ltd	, Company Reg No 2011/4133R
hereby like to authorized Gan Tien Wei Son	nc <u>S86022178</u>
to make accident report behalf of company .	

Your Sincerely

Co. 800 7 100114(12m) 7 1 412 NUS

Signature / Company Stamp























