SS2X233O000S / SME MOTOR PTE LTD ENTRY DATE & TIME: 24/03/2023 17:25 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (24/03/2023 17:25 (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.

- 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 24/03/2023 17:25 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 23/03/2023 19:30 (SGT) Exact Location of Accident 845 Geylang Rd, Singapore 400845 Additional Location Information CARPARK OF TANJONG KATONG COMPLEX Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mazda

Vehicle Registration Number SKW8543X

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHAN BOON KWANG VICTOR NRIC No S1817088D Email Address VICTOR98@SINGNET.COM.SG Mobile Phone No (Phone) +65-94873040 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model 3 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1500

INSURANCE COMPANY

Name of Insurance Company Singapore Life Ltd Policy Number / Cover Note Number 11092019

DRIVER

Name of Driver CHAN YU HAN GARETH NRIC No S9802803Z Date Of Birth 21/01/1998 Occupation Indoor

Date Of Driving Pass 21/06/2021 Driving experience 1 YEAR AND 9 MONTHS Gender Mobile Number (Phone) +65-81572237 Alt. Phone Number Email Address VICTOR98@SINGNET.COM.SG Address BLK 133 GEYLANG EAST AVE 1 #09-201 Address complement Postcode 380133 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 Hit and run / Vandalism / Damaged whilst parked 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 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 23/03/2023 ABOUT 7.30PM, MY VEHICLE PARKED AT CARPARK OF TANJONG KATONG COMPLEX. AFTER I CAME TO TAKE MY VEHICLE, I SAW A NOTE ON MY CAR AND LEFT FRONT PORTION HAVE DAMAGES. THE NOTE WROTE, THE DRIVER IS MR CHUA. HE COLLIDED WITH MY VEHICLE AND CALL HIS CONTACT NUMBER. 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 Registration Number GB.I9421H

Commercial vehicle

Vehicle Model

Vehicle Manufacturer

Vehicle Variant
Vehicle Colour
Vehicle Category

Name of Driver	_
Contact Number	(Phone) +65-96549710
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (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 Authorised 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.
- 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' law yers/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.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Carpark of Tanjong Katong Complex A= SKW 8543X B= GBJ 94211

Describe	Sircumstances of the Accident	
	On 23.03.2023 about 7:30 pm. My vehicle park	ed
art	arpark of Tanjong Kationg Complex. After I come to	
my u	nicle I saw have a note on my car and left f	ront
portio	have damage. The note write, the driver is mr	. chy
He	collided with my vehicle and call his contact numb	er
9650	1710.	
		2 - 3

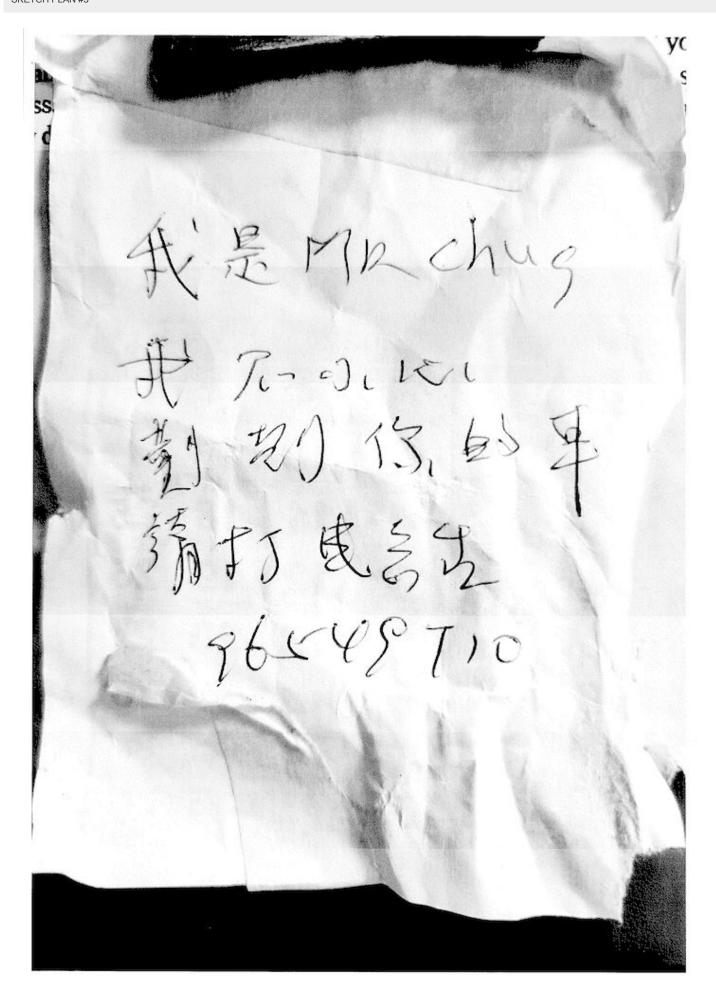
Declaration

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

Policyholder's Signature / Date & Time

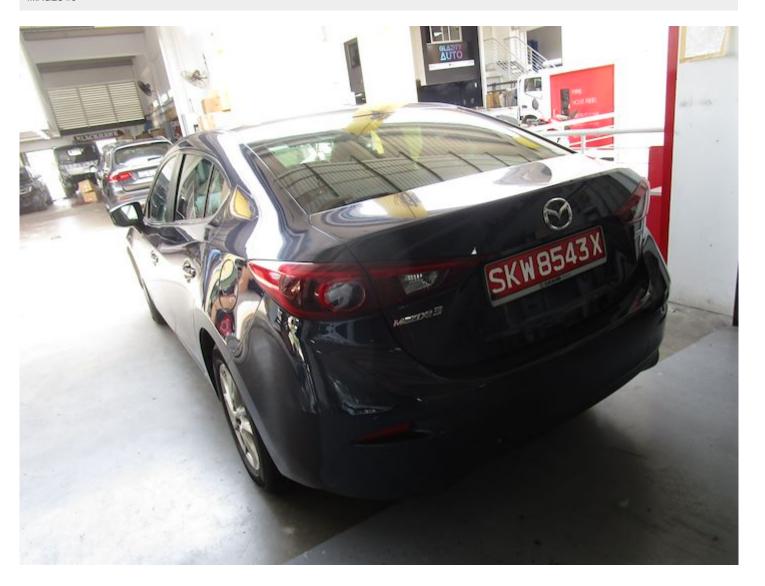
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel



















CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THERD PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THERD PARTY RISKS AND COMPENSATION) ACT 1960
(REPUBLIC OF SENCAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

CERTIFICATE NUMBER, 11092019

1) VEHICLE REGISTRATION NO.

SKW8543X

2) NAME OF INSURED

FAMILY NAME GIVEN NAME

CHAN

Boon Kwang Victor

3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT

18-Nov-2022 00:00hours

4) DATE OF EXPIRY OF INSURANCE

17-Nov-2023 23:59hours

5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

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 any reason of any exactment 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 canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

6) LIMITATIONS AS TO USE*

Use only for social, doinestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, nution or draving tests, racing, pace-making, reliability trials, speed-testing or 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.

Limitations residend inoperative by Section 8 of the Moter Vehicles (Third-Party Risks and Compensation) Act 1960 and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

NAMED DRIVER

7) FINANCE COMPANY

OCBC BANK LIMITED

1 / 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 1960 and Part IV of the Road Transport Act, 1987 (Malaysia), or any amendment, act or acts passed in substitution thereof.

Issued in Singapore: 06-Nov-2022 at 16:26hours

Singapore Life Ltd.

IMPORTANT NOTE:

- · If you want to cancel your policy at any time, you will need to return the certificate to us.
- You must report all accidents to Us within 24 hours of the occurrence or by the next working day at our accident reporting centre regardless of whether you intend to claim on your own policy or not, or whether your car is damaged or not. Should you fail to do so, Your NCD could be affected and your claim may be prejudiced.

For the list of our accident repeting centres, please visit https://singlife.com/CarRepairers. Alternatively, you may call us at 6333 2222 for assistance (including assistance on windscreen damage).

Pearlyn Phau Chief Executive Officer

In case of vehicle breakdown, accident or windscreen damage, please call 6333 2222 (24 hours) immediately.

Singapore Life Ltd. 4 Shenton Way #01-01 SGX Centre 2 Singapore 068807 singlife.com Company Reg. No. 196900499K GST Reg. No. MR-8500166-8