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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of withouting of material facts may allow insurance companies to reputial 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 27/03/2023 18:25 (SGT) Reported by Actual Driver Date of Accident 26/03/2023 11:50 (SGT) Exact Location of Accident Singapore Additional Location Information FERNWOOD TERRACE & EAST COAST AVE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XE4126J

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner 800 SUPER WASTE MANAGEMENT PTE LTD Company Reg No 198601155H Email Address enquiries@800super.com.sg Mobile Phone No (Phone) +65-63663800 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Man Model TGS 26.320 6X4 BB 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? No - Reporting only Vehicle Category Commercial vehicle Transmission Auto 10518

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2002102115

DRIVER

Name of Driver **ZULAIMI BIN KARIM** NRIC No S7029095B Date Of Birth 24/08/1970 Occupation Outdoor

Date Of Driving Pass 01/02/2016 Driving experience 7 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-80233269 Alt. Phone Number Email Address Ike@800super.com.sg Address BLK 774 YISHUN AVE 3 #03-203 Address complement Postcode 760774 Is the driver the policyholder? Nο If No, Relationship of the Driver with the Insured Employee Does Driver Own Other Vehicles? 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 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER ATTACHED ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SKT607P Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Private car

S8131408Z

NG TIONG GEE

Vehicle Category

Name of Driver

NRIC No

Contact Number	(Phone) +65-98753191
Address	<u>-</u>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

VEH NO: XE41263

INSURER : Allianz

DATE OF ACC 26 03 23 11-50 am

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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 refevant 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")

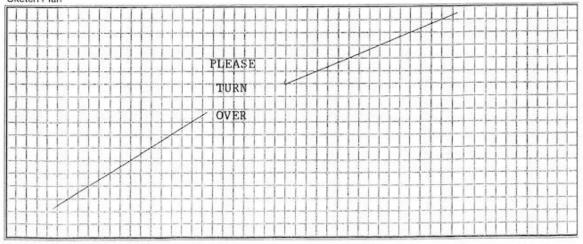
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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 (YS) ag 27 03 23 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



1

	Claim Own Policy	(ensive policy. Pls check y) Claim Third party	97 A YES	eporting Onlly
) etch P	Claim OD/ TP at other	er work	shop (
	Eas	Terribond Terribus	as+ Ave		A: XE4126 J B: SKT607 P Ng Trong Gee S8131408Z HP: 98753191 X: Park Vehicle
L_wa	odjusting	my	vehicle to go		7:26 03 23 (1.50 a) Teccore de had
si.+	onto Oncomino) Ve	hicie SKT607P.		

Policyholder's Signature / Date & Time

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

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

2

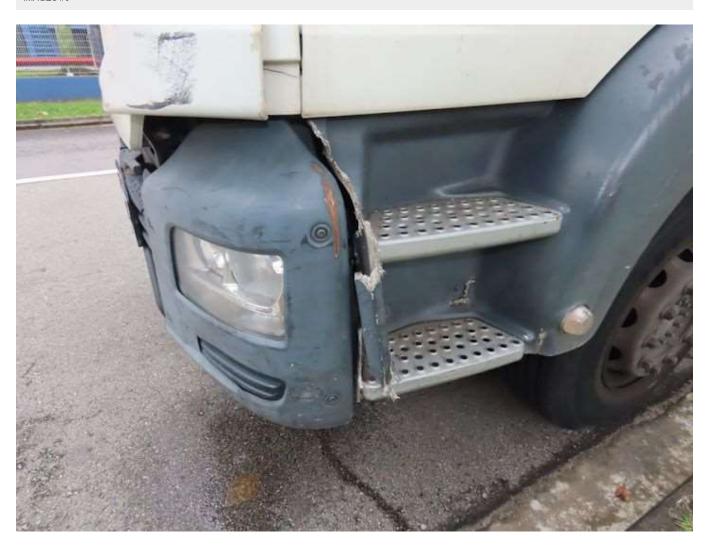












Date :27	7/03/23			
To : Acciden	t Reporting Centre (ARC)		
I / We hereb	y approve (driver's	name)ZU	LAIMI BIN KARIM	
NRIC/FIN	S7029095B	_, our employe	ee / employee of	800 Super Waste
Managemer	nt Pte Ltd	_ to drive our	m/vehicle no	XE4126J
and to file th	e accident report (T	hird Party clai	ms/Own Damage	Claims/Reporting
Only) which	occurred on (date)_	26/03/23	@ (time)	11.50am
along (location	on)_Fernwood Terrac	e & East Coast	Ave	
Thank you.	of SUPE	ē.,		
	* LN2TO	THE WAY		
* SIGN & STA	MP at the above *			
Name of Own	er: 800 Super Wa	ste Manageme	ent Pte Ltd	
NRIC / ROC :_	198601155H			
Contact No : _	63663800			
Email : enquiri	es@800super.com.sg			



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

NOAD THANSPORT ACLISS! (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) OF MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1956 (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1950 (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2002102115

Date of Issue : 22 June 2022 Coverage : COMPREHENSIVE

Policyholder : 800 SUPER WASTE MANAGEMENT PTE LTD

Finance Company

Period of Insurance : 01 July 2022 To 30 June 2023 (both dates inclusive)

: XE4126J Registration Number

Chassis Number of Vehicle : WMA26SZZ7JM772352

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/her permission or to whom the
- Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use^:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
- (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is
- Limitation rendered inoperative by Section 8 of 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.

Policy does not cover

- (a) Use for racing, pace-making, reliability trials or speed-testing.
- (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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).

22 June 2022

Issue Date

Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code 0000236 IVAN INSURANCE BROKERS PTE LTD

Section 1: Own Damage

Section 1: Windscreen

2,000.00 300.00

Section 2: Liabilities to Third Parties

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

79 Robinson Road #09-01 | Singapore 058897 | Tet. +65.6714 3369 | Website: www.artainz.sg