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 22/05/2023 11:14 (SGT) Reported by **Actual Driver** Date of Accident 21/05/2023 20:31 (SGT) Exact Location of Accident Singapore Additional Location Information PEOPLE'S PARK COMPLEX MSCP LEVEL 2 AND LEVEL 1 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

Vehicle Registration Number SMJ15B

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **QUEK BOON SIM** NRIC No S1613605J Email Address edward@cleanforte.com.sg Mobile Phone No (Phone) +65-97478555 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model S320L (R19 LED) 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? No - Claiming third party Vehicle Category Private car Transmission Auto CC 2996

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1800013719-05

DRIVER

Name of Driver QUEK CHIN CHUAN, EDWARD (GUO ZHENCHUAN) NRIC No S8728190F Date Of Birth 14/09/1987 Occupation Indoor

Date Of Driving Pass 04/10/2012 Driving experience 10 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-97923377 Alt. Phone Number Email Address edward@cleanforte.com.sg Address 4 JALAN HUSSEIN SINGAPORE 419398 Address complement Postcode Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child 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 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 PASSENGER 1 Name **PASSENGER** Gender PASSENGER 2 Name **PASSENGER** Gender Male PASSENGER 3 Name **PASSENGER** Gender Male 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 WITH ATTACHED. ATTACHMENT(S)

Yes

Are accident photos available for attachment?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer	SJE8900E
	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM SIEW MING
Contact Number	(Phone) +65-98339595
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.
- 2. This Formmust 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 Formby 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)

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 insurers) 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;
- (ii) 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

Co. Reg. No 22146800F

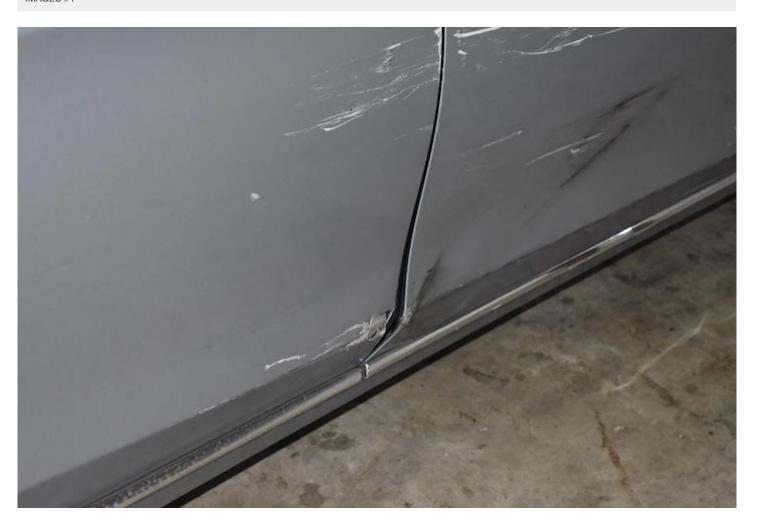
Sketch Plan

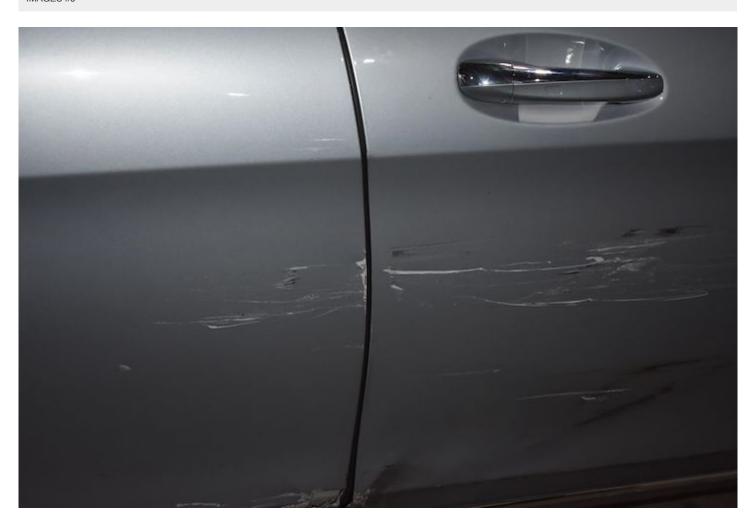
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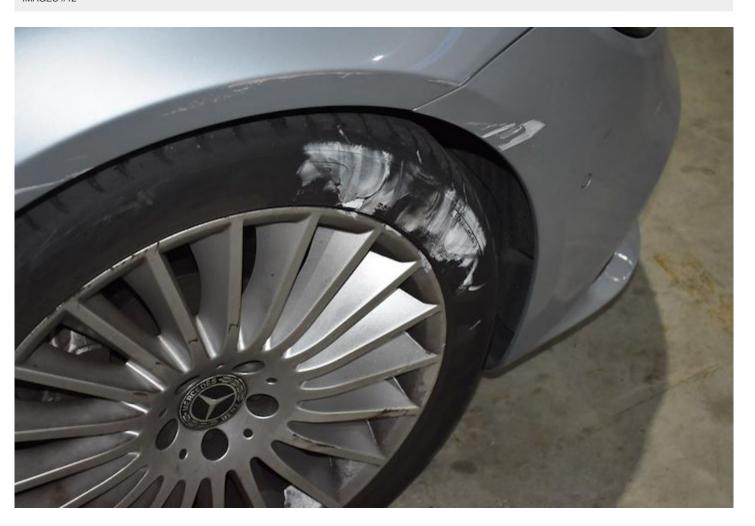




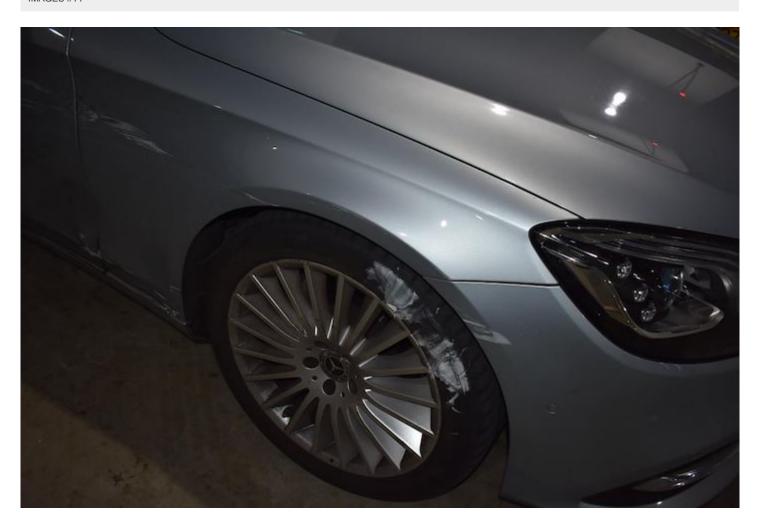


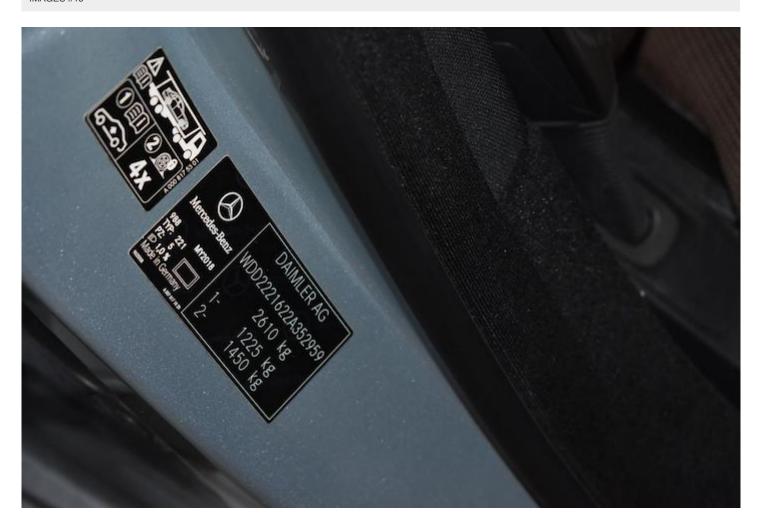




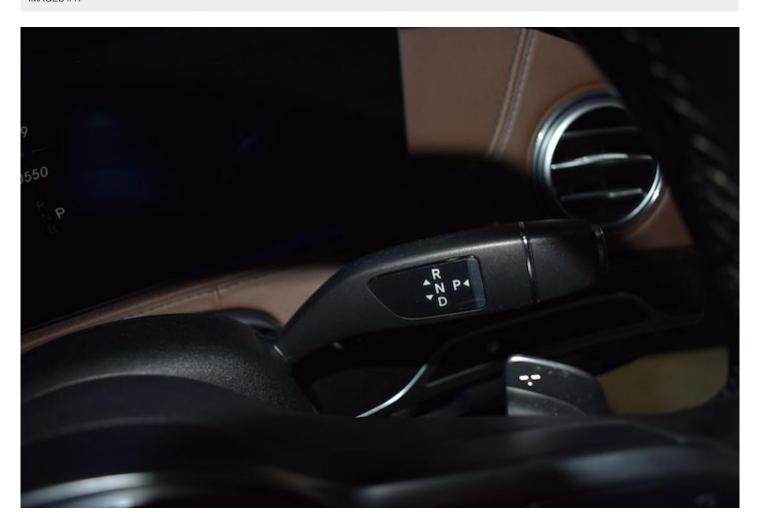








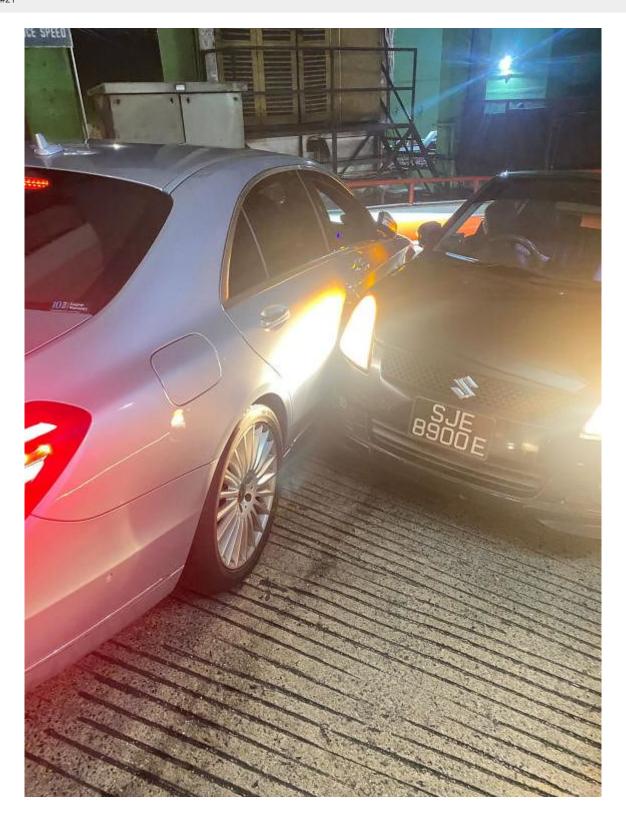
















CERTIFICATE OF INSURANCE

MERCEDES-BENZ MOTOR INSURANCE PRIVATE VEHICLE

Name of Policyholder : QUEK BOON SIM

: 09 Feb 2023 To 08 Feb 2024

Period of Insurance : 09 Feb 2020 : 27682430699886

Chassis No. : WDD2221622A352959 Vehicle No. : SMJ15B

Policy No. : 1800013719-05 Endorsement No. :

Issued Date : 08 Feb 2023 11:07

ABOUT THE COVER

Make/Model : MERCEDES Benz S320L Sedan

Engine Capacity/Tonnage : 2,996.00 CC Sum Insured : Market Value First Year of Registration : 2018 Off Peak Car : No Insuring with COE/PARF : Yes Driver Restriction : NA

Person 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.
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$\$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$800

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

QUEK BOON SIM - \$800 (Own Damage), \$800 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS).

1.Cycle & Carriage Euros Service Center (For accident reporting only). Add: 330 Ubi Road 3 Singapore 408650 62061818 2.Cycle & Carriage Pandan Loop Service Center - Body Care & Repair Add: 188 Pandan Loop Singapore 128378 62061818

For other. Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.alg.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Apple App Store or Google Play Store.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Mercedes-Benz Financial Services Singapore Ltd.

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504612242

CYCLE & CARRIAGE - SEEMHP

239 ALEXANDRA ROAD SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

SSPDAC