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VERSION: 1 (19/05/2023 17:58 (SGT))

## **SINGAPORE ACCIDENT STATEMENT**

IMPORTANT NOTICE

Reported by

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
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 instance companies in the archiving factors and acceptance of this Form by instance Companies in the standard companies of the Standard Control of Singapore (GIA) for archiving 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

#### 19/05/2023 17:58 (SGT) Date of Submission **Actual Driver** 18/05/2023 12:47 (SGT) Date of Accident Exact Location of Accident Singapore MITSUBISHI ELECTRIC, 307 ALEXANDRA ROAD 159943 Additional Location Information Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

**GBE6917R** Vehicle Registration Number

#### INSURED/POLICYHOLDER

Is company? JIAXING HOLDINGS PTE LTD Name Of Registered Owner Company Reg No ..... 2XXXXXX104W **Email Address** jiaxingacc@gmail.com Mobile Phone No (Phone) +65-86131018 Alternative Phone No

### VEHICLE PARTICULARS

Toyota Manufacturer Hiace Model ..... Variant ..... Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to your vehicle? Yes Commercial vehicle Vehicle Category ..... Manual Transmission ..... 2982 

#### **INSURANCE COMPANY**

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company ..... Policy Number / Cover Note Number ..... 2070054890-03

#### DRIVER

LIFENG GXXXX466X Passport No/FIN ..... Date Of Birth ..... 20/05/1981 Occupation ..... Outdoor



Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	17/01/2019 4 YEARS AND 4 MONTHS Male (Phone) +65-86458730 - jiaxingacc@gmail.com 626 HOUGANG AVENUE 8 # 04-164 530626 No OWNER No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) 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	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED STATEMENT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver	SJQ5010E Private car
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

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 withholding 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. 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.
- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknow ledge, 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

A= GBE 6917R B = S.TQ 5010E Carpork of Mitsubishi Electric, 307 Alexandra Rand 159943.

Delibe Circumstance of the Accident
I was toying to exit the carpark but accidentally & hit the
Vehicle B front right potion. There was no one inside the vehicle B so i
I was toying to exit the carpark but accidentally stand hit the vehicle B front right portion. There was no one inside the vehicle B so i left the area and come to made a report.
The area and come to have
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I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

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

## **IDAC ACCIDENT STATEMENT**

DATE OF ACCIDENT: 18/05/2023 (Thursday)	TIME OF ACCIDENT: 12:47 pm
VEHICLE NO: GBE 6917 R	TRANSMISION: AUTO / MANUAL
MAKE & MODEL: Toyota Hiace Van	LOCATION: mitsubishi Electric, 307 Alexandra Road 159943.
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE: OD THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY: AIG	POLICY NO: 2070054890 - 03
TYPE OF COVERAGE:  COMPREHENSIVE THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : ( SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE )
NAME OF OWNER : JIAXING HOLDINGS PTE LTD	NRIC: 201510104W
ADDRESS: Shun Li Industrial Park, 89 Kaki Bukit Avenue 1 #02-00 (5)	CONTACT NO: 8613 1018 (Office)
EMAIL ADDRESS: Jiaxingacc @ gmail · com	VIDEO RECORDING : YES ( NO
NAME OF DRIVER : AS ABOVE / IF NO :	FIN G 380 4466X CONTACT NO: 8645 8730
DRIVER OWNER RELATIONSHIOP: Employee	PASSENGER: MALE( ) FEMALE ( )  DRIVER ONLY.
DATE OF BIRTH: 20 / 05 / 1981	DRIVING PASSING DATE: 17/01 / 2019
	ADDRECC .
OCCUPATION: INDOOR / OUTDOOR	#04-164 Singapore 530626
ANY INJURIES: NO IF YES:	#04-164 Singapore 530626  POLICE REPORT: NOY IF YES WHERE?
	#04-164 Singapore 530626
ANY INJURIES: NO IF YES:	#04-164 Singapore 530626  POLICE REPORT: NOV IF YES WHERE?
ANY INJURIES: NO IF YES:  WEATHER CONDITION: CLEAR / RAINING / OTHERS	#04-164 Singapore 530 626  POLICE REPORT: NOV IF YES WHERE?  ROAD SURFACE: DRY WET / OTHERS
ANY INJURIES: NO IF YES:  WEATHER CONDITION: CLEAR / RAINING / OTHERS  VEHICLE B REG NO: SJO 5010E	#04-164 Singapore 530 626  POLICE REPORT: NOY IF YES WHERE?  ROAD SURFACE: DRY WET / OTHERS  VEHICLE C REG NO:
ANY INJURIES: NO IF YES:  WEATHER CONDITION: CLEAR / RAINING / OTHERS  VEHICLE B REG NO: STOL 5010E  DRIVER NAME:	#04-164 Singapore 530 626  POLICE REPORT: NOV IF YES WHERE?  ROAD SURFACE: DRY WET / OTHERS  VEHICLE C REG NO:  DRIVER NAME:
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ANY INJURIES: NO IF YES:  WEATHER CONDITION: CLEAR / RAINING / OTHERS  VEHICLE B REG NO: STO 5010E  DRIVER NAME:  NRIC:  CONTACT:  VEHICLE D REG NO:	#04-164 Singapore 530 626  POLICE REPORT: NOV IF YES WHERE?  ROAD SURFACE: DRY WET / OTHERS  VEHICLE C REG NO:  DRIVER NAME:  NRIC:  CONTACT:  ANY WITNESS? NO, IF YES:
ANY INJURIES: NO IF YES:  WEATHER CONDITION: CLEAR / RAINING / OTHERS  VEHICLE B REG NO: STO 5010E  DRIVER NAME:  NRIC:  CONTACT:  VEHICLE D REG NO:  DRIVER NAME:	#04-164 Singapore 530 626  POLICE REPORT: NOV IF YES WHERE?  ROAD SURFACE: DRY WET / OTHERS  VEHICLE C REG NO:  DRIVER NAME:  CONTACT:  ANY WITNESS? NO, IF YES:  NAME:
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## CERTIFICATE OF INSURANCE

## COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : JIAXING HOLDINGS PTE LTD Period of Insurance : 17 Apr 2023 To 16 Apr 2024

Engine No. : 1KD2547353

Chassis No. : KDH2010181883 Vehicle No.

: GBE6917R

Policy No.

: 2070054890-03

Endorsement No.

Issued Date

: 22 Feb 2023 11:58

## ABOUT THE COVER

Make/Model : TOYOTA HIACE VAN 1.4 ton [Van]

Engine Capacity/Tonnage : 1.4 Tonnage Sum Insured : Market Value First Year of Registration : 2016 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

a) Any person who is driving on the Policyholder's order or with their permission.
 b) 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 \$\$\$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

Limitation as to use*

1) Use in connection with the Policyholder's business.
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's busines
3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving to trailer except the towing (other than for reward) of any one disabled mechanically proposed vehicle; and c) use lity trial or speed-testing; b) use whilst drawing

* 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**

Fire - S0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

# APPROVED REPORTING CENTRES/AUTHORISED REPAIRES (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AiG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AiG with the 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, 1967 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

504236000 ISTRADE MANAGEMENT PTE LTD

IG BUILDING 78 SHENTON WAY #09-16 NGAPORE 079120

derwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. This computer generated document does not require a signature.