1 1 1 1 1 1 1 1 2 1 1 2 1 1 2 1 1 1 1 1	Services unitari	SU10928/00006	and a second sec
ATTONAL Assessment Centre	A deb description	Die Whine Completed	Done by
201140: NRN 1M198005949	SAS e-illing		I Committee of the Comm
The state of the s	E-mail (which there wie this)		
Vali No. 65C 97KS 2	1-Motor Claim Form	1 11 11	1 11 1, 1
D.D.A: 11/06/9025 US.20	1- Nicor NI/O (Wins: OD 1	71. 77 (61.2)	
OD (7) / Repending Only	1. Photo Uplouded	A bit has separate de service de	1 1000
	Vesseitment/gntack general		the second secon
TP laseren	Ass't Report by Fax / Han		
Protorred Wkop I INC Assign Wkap / QW: (17 may 2 man 17 mm 1	Tol:	Fax:
The second secon	247/91/- INC	()/ Non-INC()	
*	The state of the s	Tel:	A District of the Control of the Con
Overner / Drivers (Policy No. () P	eriod: (CoverType: (S Production of a production o
Confirmed by A. C.	Dates	Timer	>
insured/Oriver Liability: (93)	(Note-Use Status (WO): 180	0.3014, F: 21.7090. F: 30	0-140N)
Year of Regiantition ()	Warrenty: YES () 180 (and promote the second
Excess: (S) Loading: S1	,000()/52,000()	The second secon	
General Kemberts & St. Coversion	《探答》的《探答》的《	The state of the s	A Contract of the Contract of
() Walk-in Customar I Customers in	formation strictly Confidential i	Shidili 110 Intol of tabett	PT.
() Total Loss Case : to c-mail East	wer URGENTLY.	AND THE RESIDENCE AND THE PARTY OF THE PARTY	syland y supremum assessment source or and it
Drive-In()/ Towes-In(): Invo		Towing Corl	The second secon
Rentaplis Control No. 10 Tax Co. 15.		The District of Equipment	B (Prince Paperson)
1) Apply for Transport Allowance ()	/ Courtmy Car()	March - March 1 2 brings propriet desired and articles of the second of	The same of the sa
2) GC Check / Peri Repair Inspection	()	The second secon	
The state of the s	to destruction of the second and		
3) Uplacd Resurvey Photo [Repair Cost=	\$3000] ()	1	1
3) Uplace Resurvey Photo (Repair Cost >	\$3000] ()	The second secon	4
Jujury :	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3) Uplaced Resurvey Photo (Repair Cost >	\$3000] ()		
July 1 Water Manual Control of the C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3) Uplaced Resurvey Photo Respoir Cost > Injury s Sees Thom Control Control	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
July 1 Water Manual Control of the C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Juliary:			
Injury:		- Woods ton Chr. 1919	
July 19 Mary 1 Mary Photo Mepair Cost 2 July 19 19 19 19 19 19 19 19 19 19 19 19 19		Aceldent Part (St. (530)) Donage Assessment (5100);	11 (156)
MA230174	Investigation of the second of	Accident Pares (the (\$100)) Damage Angeleman (\$100)) Jowing Fee Bollows Person & Service	10 (15 (15 (15 (15 (15 (15 (15 (15 (15 (15
New Transport Photo Repair Costs Injury: New Two Washington Addition of the Costs New Two Washington Additions of the Costs New Two Washington Additions of the Costs New York Costs New		Accident Parasishe (380); Doinage Austrianasa (3160); Towlog Fee Fellow Three 58 S. 1717 Fellow Three	110 (15 (15 (15 (15 (15 (15 (15 (15 (15 (15
MANSOI II	TOTAL STATE OF THE	Acel Sent Parrecise (\$3.0); Derrage Assessment (\$1.00); Towing Fee Fellows through S. 1949 Internationary S. 1949 United through S. 1947 United t	110 110 110 110 110 110 110 110
MANSOI THE STREET STREE		Accident Parriche (330); Dentage Agreement (3100); Toulog Fee Fellow-There go S. 1717 Real Septendent Fellow-There go S. 1717 Real Septendent Fellow-There go S. 1717 Fellow-T	175 - 215) 216 - 215) 216 - 215) 216 - 215) 217 - 215) 218 - 215) 218 - 215) 218 - 215)
MA2301 14 Massing Resurvey Photo (Repoir Costs) MA2301 14 Massing Resurvey Photo (Repoir Costs) MA2301 14 Massing Resurvey Photo (Repoir Costs)	INVESTIGATION OF THE PROPERTY	Accident Parriche (330)) Derrage Assessment (3100)) Towles Fee Fellow-Through S. 1949 United Through S. 1949 TO Administ Feel Feel Through S. 1947 The Administ Feel Feel Through S. 1947 The Administ Feel Feel Through S. 1947 The Administration of the Samuel Through S. 1947 Through	100 (150) 100 (150)
MASSOI 14 Manual Carticuling Manual Carticul		Accident Paragraphs (330)) Derrage Assessment (3100)) Towled Fee Fellow-Three 36 S. 1919 International S. 1919 United Paragraphs (1200) International Paragraphs International Paragraphs International Paragraphs International Paragraphs International Paragraphs	
Mary: Ma		Accident Parriche (330); Derrage Agreemand (3100); Toulog Fee Fellow-There, as S. 1717 Fellow-Th	100 (100 (100 (100 (100 (100 (100 (100
MANSOI THE PARTICULAR TO THE PARTY OF THE PA	1) All 1)	Accident Parriche (330); Derrage Agreement (3100); Towley Fee Fellow-Through S. 1919 Fellow-Through Testion Fellow-Through Fellow-Throu	100 (350) 110 (350)

· ;

:

SN09236C0006-01 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 12/06/2023 14:51 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 2 (12/06/2023 15:00 (SĞT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

IMPORTANT NOTICE

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.

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

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

12/06/2023 14:51 (SGT)

Actual Driver

11/06/2023 05:25 (SGT)

Bedok North Ave 3, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBC9215Z

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

YONG HUP HUAT SEAFOOD SUPPLY

5XXXX821C

reporting.gt@gmail.com

(Phone) +65-65835760

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Toyota

Dyna

Employment

No - Claiming third party

Commercial vehicle

Manual

2982

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Tokio Marine Insurance Singapore Ltd MZC00725

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Accident report SN09236C0006

ANG CHEE KIAT SXXXX010E

29/01/1958 Outdoor

Page 1 of 15

Date Of Driving Pass 19/05/1981 Driving experience 42 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-92773581 Alt. Phone Number Email Address yonghuphuat@gmail.com Address BLK 418 PASIR RIS DRIVE 6 #02-191 Address complement Postcode 510418 Is the driver the policyholder? No 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 2 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 1 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 the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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

Contact Number

2	Address
	Address complement Postcode
	Insurance Company Name Nature Of Damage
	Details of property damaged in accident No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	
Gender	ANG CHEE KIAT
Phone No	Male
Address	(Phone) +65-92773581
Address Complement	
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
IIIIIII Dergon in Which was also	
Were seat belts worn?	GBC9215Z
Was this injured conveyed to hospital by ambulance?	Yes
no de de la conveyed la llospital by ambulance?	No

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 Actual Driver.
- 3. 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>.
- 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.
- 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, 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 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

YONG HUP HUAT SEAFOOD SUPPLY
111 North Bridge Road #21-01
Ponincula Plaza Singapore 179098
Tel: 85835760
Policyholde #\$ \$590010 @ @ @ Drivers Singapore 1790

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

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

Sketch Plan

1.30 17.30 41.10 41.110		
		A: GBC 92152
	70	
<u></u>	& Julian Bulling	

escrit	oe Circi	umstance	of the Acc	ident									
		01	STATE	0 01	AT12 A	NO	TIME	7 .	10 C 1-	7 000			
~145	AT	THE	TRAFF	11	147 11	10.7.	,	- W	n) A	KEVE	K NORTH	1 AVE	1 , 2
u PAM	C												
						TEO	AND I	EDUND	OUT	THAT	DEHIELK	(SH	Tiery 1
145	HIT	ONTO	my	VEHICL	-E .						000 11001	()(1	(1817)
						-		_					
		-		-									
											-		
												E-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	-
									-				
					-								
	-												
								-			May and the same of the same o		
TO STORE SAID													
-													

		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7											
		Sur-ut.											
						-							
							\$00 to 1						
										-			
					-								
											The same		
107													
							-						
							-						

Declaration

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

水合發海鮮飲商

YONG HUP HUAT SEAFOOD SUPPLY

111 North Bridge Road #21-01

Peninsula Plaza Singapore 179098

Tel: 65835760

Poliched Calendary Page Time

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

Witnessed by Reporting Centre Personnel



Date of Accident	11/06/2023 Accident Time: 05:25 (24-HR-FORMAT)
Accident Place	: ALONG BEDOK WORTH AVE 3
Vehicle Reg. No (Car plate No.)	: CTBC 92157 CC: 3000 Vehicle Make/Model: TOYOTA / OYNA
Insurance Company	TOKIO MARINE Policy No. MZC 00 725
Name of Registered Owner	: Company / Individual YONG HUP HUAT SEAFOOD SUPPLY
ID of Registered Owner OWNER EMAIL ADDRESS:	: Co Reg No: 52812871C Owner's NRIC No:
reporting. 9+ @ gmeat. com	: Co Contact No: 6583 5760 Owner's Contact No:
DRIVER'S Name	ANG CHEE KIAT DRIVER'S NRIC NO: S1307010E
DRIVER'S Date of Birth	DRIVER'S License Pass Date 19/05/1981
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others:
DRIVER'S Address	: BIK 418 PASIR RIS DRIVE 6 #02-291 SPORE (510418)
DRIVER'S Contact No./ Alt No.	: 1) 9277 35 8] 2)
DRIVER'S Occupation	: INDOOR \OLDOOR (eg. working inside or outside of an ofc)
Email Address	youghup huart @ graind. com
Weather & Road Surface	: CLE R& DRY \ RAINING & WET \AFTER RAIN & WET
Reporting Type	Reporting Only Claim Wiler Party Claim Own Insurance
Number of Passengers (including Dr Was the accident reported to the poli- Was there any video Captured by car Exact purpose for which vehicle was Any injuries, if yes(name of the in	iver): Name & Gender;
Vehicle Reg No: 5H 7181 Y	Party Driver's Particulars (if any)
	Vehicle Reg No:
Vehicle Make\Model:	
Name DRIVER:	
IC No. DRIVER:	
DRIVER'S Contact & add:	DRIVER'S Contact & add:
REPORT FORM EXPLAINED IN : ENGLISH /	CHINESE / MALAY / TAMIL OTHERS:
WHO REPORTED THE ACCIDENT : OWNER	

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046 T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



Certificate of Insurance

FORM MZ300

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: MZC00725 (Commercial Vehicle)

1. Index Mark and Registration Number of Vehicle

GBC9215Z

Chassis No.: JTFAT35Y90K202777

2. Name of Policyholder

YONG HUP HUAT SEAFOOD SUPPLY

3. Effective date of the Commencement of Insurance for the purposes of the Act

26/02/2023 (00:00:00)

4. Date of Expiry of Insurance

25/02/2024

5. Persons or Class of Persons entitled to drive* Any person who is driving on the policyholder's order or with their permission.

- 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 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 and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage. 6. Limitations as to use*
 - 1) Use in connection with the policyholder's business.
 - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.

 3) Use for social domestic and pleasure purposes.

 - 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- * 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles. (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia). Please refer to the Policy Schedule for full details, terms and conditions of the insurance

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio. Manne Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation). Insurance Plan:

Third Party Only

Account No: 3275DDA

Printed: 20-02-2023 11:55 00

Financial Interest:

NIL

Additional Terms:

Notwithstanding anything to the contrary in the policy, the additional excess for YEID is applicable to Sect 1 only

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature



IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

	* .
ADDE	NDUM
PARTICULARS OF PERSON MAKING THE AMENDM	ENTS:
Original Report No: MO9286C0006	Vehicle Registration No: 4BC9215Z NRIC/FIN/Passport No: SXXXXXXX
Name (as shown in NRIC): And the Ke	NRIC/FIN/Passport No: SXXXXXXXX
(*Vehicle Driver/Policyholder) (*) Please delete as	
Address:	Singapore (
Contact (Tel):	Mobile No.:
Email Address:	
Date of Accident: 1106 2013	Time of Accident:
Place of Accident: RUPOK NORM	AM 3
Insurance Company: 10K10 MARWIK	
ADDITIONAL INFORMATION /AMENDMENTS:	
make the following amendments:	dent and would like to include additional information (
RLICY DULLMARK TO MICGOT	22 8
THEY MINISHE TO MIZEGO	
	12/26/2
	feel the to
Policyholder / Actual Driver's Signature Date:	Reporting Centre Personnel's Signature Name (as in NRIC/ID card):

Date: