	The same of the sa				
MONAL Appearment Centre		12/41) SM (6)	o Completed /	Done by	
: 4 10: 1 15/96/2025 16: 70	Jeb description		0 40 410		
1 NO: NBA1(1D200605914	SAS e-Illing			A Little on the latest of the	1
to Not SUK STODC	E-incli futfaln this,			<u>-</u> ,	
D.A: 12/06/2023 15/20	1-Motor Claim Yo	מווים הווים	T .	man , manufacture and the second seco	
warming were well and hardestoned official or work and	hylotor W/O (W.	inter OD Inco, Tr (1997)	* *** ****	و ما الما الما الما الما الما الما الما	
C (79) Repensing Only	1. Photo Uploude:	3	-ALIEN-	the state of the s	
The second state of the se	Assessment/Surve	Report !		entropentale district page 8 +41 A 4	. pe F + + 1
P (aspiret)	Ass't Report by Er	AK CHand to Owner/SV		the state of the framework of the state of t	
Jorna Web Like Design Mkap I CM: (	ac paragraphic and a large and	T¢!	AND THE PERSON NAMED IN POST OF THE PERSON NAMED IN POST O	17.5	
THE CONTRACTOR OF THE PARTY OF	8819.4	, INC( , )/ Non-	inc(),	-	1
· · · · · · · · · · · · · · · · · · ·	3 9 Secretary	Tel:	Mile & Alleganistics of American School Springers and Associated		Samuel Section of the last
Owner / Drivers (	ied: (	) Cover 1)	ALC 201 00 00 00 00 00 00 00 00 00 00 00 00 0	418	
Confirmed by t'	THE RESIDENCE OF COLUMN PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS O	Dates	Timer to on	111014	
thoused Oriver Liability: ( 93) (	Note-list States (WC	): • 14: 0-3014, F: 21	1.79%. Pt 50		
Year of Registration (	Warrenty: YES (	)/40( )		-	
Excess: (5 ) Looding: Sl,	000( )/52,000(	)	Steady and 1835		
the state of the s	2011年18年16年	MARCH TO THE SECOND	MONTH OF THE PROPERTY OF THE PARTY OF THE PA	To a see a see	The state of the s
Savette in Customers in	primation strictly Conf	idouries & andis 110	I stat of tobers	NAME OF THE PARTY OF	
) Total Loss Case : to c-mail Ensu	er URGENTLY.	and an activity and their all a specific	deliberation 4 - bearing Chantle and 4	the company of the party of the last of th	)
) 1 Cital Dans Charles and American	AND THE PARTY OF T				
naturale ( ) Towes-In ( ) Invoi	:: YES( )/N	O( )   Towing C	Andrew - Contract	Table to the same of the same	I THE PERSON AND PERSO
The state of the s	e; YES ( ) / I'	O( )   Towns C	and Complete	The Tar Done	67
DAVE-07 ( )	YES ( ) / IV	O())   Towns C	Andrew - Contract	The Constitutions	C
Antaples to United to Transport Allowance ( )	YES ( ) / IV	O()   Towns C	Andrew - Contract	Silvana Done	The second secon
Antapis well (INC Follows to Transport Allowance ( )/	Courtesy Car (	O()   Towns C	Andrew - Contract	Wanga A Done	
Antapis well (INC Follows to Transport Allowance ( )/	Courtesy Car (	O()   Towns C	Andrew - Contract	THE PROPERTY OF THE PARTY OF TH	2
Antaphs (2000) (INC Holling to The (615)  Apply for Transport Allowance ( )	Courtesy Car (		Andrew - Contract	A Pone	by
Amaples and NUMC Holling to Transport Signature ( ).  Apply for Transport Allowance ( ).  CC Check / Peri Repute Inspection  Upland Resurvey Photo (Repair Costs)  Injury:	Courtiny Car ( ) \$3000] (		Andrew - Contract	The second secon	S. S
Amaples and NUMC Holling to Transport Signature ( ).  Apply for Transport Allowance ( ).  CC Check / Peri Repute Inspection  Upland Resurvey Photo (Repair Costs)  Injury:	Courtiny Car ( ) \$3000] (		Andrew - Contract	A Pone	Sy
Amaples and AUNC Bolling 107 88:0015) Apply for Transport Allowance ( ) CC Check / Peri Repute Inspection ) Uplacd Resurvey Photo (Repair Cost >  Injury)	Courtiny Car ( ) \$3000] (		Andrew - Contract	The state of the s	
Amapis and Mark Edition 107 88:0015)  Apply for Transport Allowance ( )  CC Check / Peri Repute Inspection  Uplacd Resurvey Photo (Repair Cost >  Injury :  Delactive Cost   Cost	Courtiny Car ( ) \$3000] (		Andrew - Contract	The state of the s	
Amaples and AUNC Bolling 107383.0016) Apply for Transport Allowance ( ) CC Check / Peri Repute Inspection ) Upland Resurvey Photo (Repair Cost >  Injury)	Courtiny Car ( ) \$3000] (		Andrew - Contract	The Part of the Pa	by a second seco
Amaples and AUNC Bolling 107 88:0015) Apply for Transport Allowance ( ) CC Check / Peri Repute Inspection ) Uplacd Resurvey Photo (Repair Cost >  Injury)	Courtiny Car ( ) \$3000] (			A Pons	Sy San
Amaples and AUNC Bolling 107383.0016) Apply for Transport Allowance ( ) CC Check / Peri Repute Inspection ) Upland Resurvey Photo (Repair Cost >  Injury)	Courtiny Car ( ) \$3000] (	invice: Fennau	on Chronical		5y
Apply for Transport Allowance ( )  Apply for Transport Allowance ( )  CC Check / Pevi Repute Inspection  Uplaced Resurvey Photo Respoir Cost =   ///www.	Courtiny Car ( ) \$3000] (	Invoice Preparati	on Chronical	NEC (356)	Sy Samuel State of the State of
Amapis and Mark Louisia and Assemble ()  Apply (or Transport Allowance ())  CC Check / Peri Reputs Inspection  ) Uplack Resurvey Photo (Repair Cost =   //////////////////////////////////	Courtiny Car ( ) \$3000] (	Invuice Propagation of the Control o	ON Chr History  (13 Chr)  (14 Chr)  (15 Chr)  (16 Chr)  (17 Chr)  (18 Chr)  (18 Chr)  (18 Chr)  (18 Chr)	100 (156) 5107514 5107514 5107514 5107514	
Amapis and MUNIC Bolling 107 88:0015)  Apply (or Transport Allowance ( )  Co Check / Peri Repute Inspection  Diploed Resurvey Photo (Respair Costs  ////  ////  ///  ///  ///  ///  //	Courtiny Car ( ) \$3000] (	Invites Proprietal  Invite	ON Chr History  (13 Chr)  (14 Chr)  (15 Chr)  (16 Chr)  (17 Chr)  (18 Chr)  (18 Chr)  (18 Chr)  (18 Chr)	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
Amapis and Manic Louisia 107 8810016)  Apply to: Transport Allowance ( )  Co Check / Peri Repute Inspection  Typical Resurvey Photo Mepair Cost =   Injury:  The Thought Actions  AMASSITH	Courtiny Car ( ) \$3000] (	Invuice Preparation  Invuice P	ON CRANGE	100 (156) 5107514 5107514 5107514 5107514	
Antapis well Manic Bolling to 1885 (615)  Apply for Transport Allowance ( )  Oc Check / Peri Repute Inspection  Oplosed Resorvey Photo (Repair Cost = Injury)  Manic Turnit Manic Manic Barrier Barrie	Courtiny Car ( ) \$3000] (	Invites Promisal  Invites Prom	ON CRANGE	1	Sy
Antapissed AUNC Bolling 1071886016)  Apply Or Transport Allowance ( )  CC Check / Peri Repute Inspection  Uploed Resurvey Photo (Repair Cost >  Injury /  In	Courtiny Car ( ) \$3000] (	Invite Prepared  Invite	OTHER CAMPAGE  OTHER	STATE OF THE STATE	Sy
Antapissed AUNC Bolling 1071886016)  Apply Or Transport Allowance ( )  CC Check / Peri Repute Inspection  Uploed Resurvey Photo (Repair Cost >  Injury /  In	Courtiny Car ( ) \$3000] (	Description of the property of	OTT CITY (LETTER)  OTT CITY (LETTER)  OTT CITY (LETTER)  S. MY  G. MY (LETTER)  TEL Allowance  Leaven	1	
Antapis well MUNIC Bolling to Presidents)  Apply for Transport Allowance (  ) GC Check / Peri Repute Inspection  ) Uploed Resurvey Photo (Repair Cost =  ////  ////  ///  ///  ///  ///  ///	Courtiny Car ( ) \$3000] (	Invuice: Proping attention of the control of the co	Christian Carry (Eastern)  5.1717  5.1717  5.1717  6.1	STATE	Sy
Apply of Transport Allowance ( )  CC Check / Pevi Repair Inspection  Distry :  MARCHARD Resurvey Photo (Repair Cost >  Mistry :  Mistry	Courtiny Car ( ) \$3000] (	Invested Feeding Variable Administration of the State Control	OTH CIRCLES CONTROL OF STATE O	NNC (356) \$1,000 \$1,	
Apply of Transport Allowance ( )  Apply of Transport Allowance ( )  CC Check / Peri Repair Inspection  Diplaced Resurvey Photo (Repair Cost >  Injury /  Peri Transport Aggregation  Description of the poir Cost >  Injury /  Peri Transport Aggregation  Transport Aggregation  Transport No:  Tr	Courtiny Car ( ) \$3000] (	Invuice: Proping attention of the control of the co	OTT CHE HIGH	STATE	

.

SN08236F0004-01 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 15/06/2023 16:20 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 2 (03/07/2023 19:30 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

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

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.

The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 Any false reporting may be referred to the Police for investigation.
 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.
 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

15/06/2023 16:20 (SGT) **Actual Driver** 13/06/2023 15:30 (SGT) Ubi Rd 1, Singapore JUNCTION WITH UBI AVENUE 2 Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

**SNK5566C** 

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes SG GLOBAL HOLDINGS PTE. LTD. 2XXXXX520C shawn.z@thesgglobal.com (Phone) +65-92285358

VEHICLE PARTICULARS

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of accident your vehicle?

Bentley Continental

Are you claiming under your own insurance policy for repair to

Vehicle Category Transmission CC

Private use

No - Claiming third party Commercial vehicle Auto 5998

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd. DMPCSNW00193062200

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

**ZHANG SHUNDA** SXXXX410J 29/03/1989 Indoor

Date Of Driving Pass 27/07/2016 Driving experience 6 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-92285358 Alt, Phone Number Email Address shawn.z@thesgglobal.com Address 21, TERRASSE LANE Address complement Postcode 544774 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured DIRECTOR 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 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) 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 PLEASE REFER TO SKETCH PLAN 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 YN8819H Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver Contact Number

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 Phone No Address Address Complement Post Code	ZHANG SHUNDA Male (Phone) +65-92285358
Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	SLIGHT INJURY SNK5566C Yes No

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 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 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.
- Any false reporting may be referred to the Traffic Police Department for investigation.
- 6. 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:

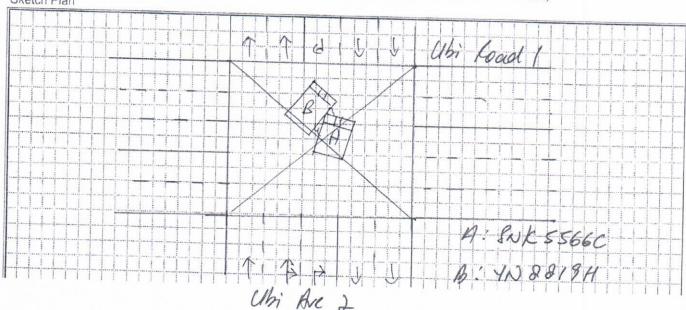
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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
- (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 ers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes. OLDING.

OS Policyholder's Signature / Date & Time

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

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

#### Sketch Plan



Describe Circumstance of the Accident
on the stated date and time, I was turning
right to Ubi Rd 1 from Ubi Ave 2. Suddenly,
I felt a unge impact from the lott side of
my vehicle. When I got off, I realised
vehicle is had not into my ( are while
turning hence colliding onto my vehicle.

Declaration

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

Policyholder's Gjod-Sure / Date & Time

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

Witnessed by Reporting Centre Personnel

10 Sin Ming Drive Singapore 575701 www.lta.gov.sg

24 Mar 2023

Our ref 2403230203N061150323

SG GLOBAL HOLDINGS PTE. LTD. BLK 60 UBI CRESCENT #01-03 SINGAPORE 408569

Dear Sir/Madam

## You Have Successfully Replaced Vehicle Registration No. SNB7454B With SNK5566C

You have successfully replaced your vehicle registration number. The vehicle, whose previous number was SNB7454B, now has the number SNK5566C.

The vehicle details after the transaction are:

Transaction No.

: 20230324150045761023

Vehicle Registration

: SNK5566C (Previously SNB7454B)

No.

Vehicle Make

: BENTLEY

Vehicle Model

: CONTINENTAL GT 6.0 A

Chassis No.

: SCBCE63W38C059011

Engine No./ Motor

: BWR019561 /-

No.

Please change the number plates on this vehicle to show SNK5566C by 27 Mar 2023. Otherwise, it is an offence and the penalty is a fine of up to \$2,000 or imprisonment of up to 6 months, or both.

What You Need To Do:

You must show the new number SNK5566C on your vehicle by 27 Mar 2023.

Date of Accident	: 13/06 2023 · Accident Time: (530 · (24-HR-FORMAT)
Accident Place	: Junction of upi Rd 1 x lubi Avo >
Vehicle Reg. No (Car plate No.)	:SNK55bbc c: 6.0. Vehicle Make/Model: Bentley Continental.
Insurance Company	: china Taiping. Policy No. DMPCSNW00193062200.
Name of Registered Owner	: Conffany/Individual S& Colobal Holdings Pte Ltd.
ID of Registered Owner OWNER EMAIL ADDRESS:	: Co Reg No: 201543520 C Owner's NRIC No:
Strawn Z@thesqqlobal.a	an: Co Contact No: 92285358 'Owner's Contact No:
DRIVER'S Name	: Zhang Shunda . DRIVER'S NRIC No: \$8975410].
DRIVER'S Date of Birth	: 29/03/1989 DRIVER'S License Pass Date 27/07/2016.
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others: Director .
DRIVER'S Address	21, Terrasse come, 402-07, S(544774).
DRIVER'S Contact No./ Alt No.	(1) 92285358 . 2)
DRIVER'S Occupation	: INDOOR (OUTDOOR (eg. working inside or outside of an ofc)
Email Address	Shawn. 2 1 the sgglobal - com.
Weather & Road Surface	: CLEAR & DRY   RAINING & WET   AFTER RAIN & WET
Reporting Type	Reporting Only   Claim Oher Party   Claim Own Insurance
Number of Passengers (including Down Was the accident reported to the pol Was there any video Captured by ca Exact purpose for which vehicle was Any injuries, if yes(name of the in	river): Name & Gender;
Other	Party Driver's Particulars (if any)
Vehicle Reg No: YN 8819 H .	Vehicle Reg No:
Vehicle Make\Model:	Vehicle Make\Model:
Name DRIVER:	
IC No. DRIVER:	IC No. DRIVER:
DRIVER'S Contact & add:	DRIVER'S Contact & add:
REPORT FORM EXPLAINED IN FINANCIAL	/ CHINESE / MALAY / TAMIL OTHERS:
WHO REPORTED THE ACCIDENT : OWNE	



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: SUCS 26 4000 Y	Vehicle Registration No: 24k5566C
Name (as shown in NRIC): Zhany Struet	NRIC/FIN/Passport No: SXXX Y/OJ
(*Vehicle Driver/Policyholder) (*) Please delete as	appropriate
Address:	Singapore (
Contact (Tel):	Mobile No.:97285358
Email Address:	15.30
Place of Accident: UBI ROPO   Ju	Time of Accident: 15:80
Insurance Company: Compa John Mig	
ADDITIONAL INFORMATION /AMENDMENTS:	
I have made a report on the above-mentioned accimake the following amendments:	dent and would like to include additional information o
FUGUERO VERHCLER RELEMBAR	2 70 SNK 5566C
	musee 103/07/2013
Policyholder / Actual Driver's Signature Date:	Reporting Centre Personnel's Signature Name (as in NRIC/ID card):

Date:

Date: