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.

- 4. The issue and acceptance of this is form by instrained 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 19/06/2023 17:55 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 18/06/2023 18:45 (SGT) Exact Location of Accident Near 1 Sin Ming Ave, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Kia

1591

Vehicle Registration Number SMF1097D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHUA HOCK BENG TIMOTHY NRIC No SXXXX860Z Email Address TIMOTHY@JHSMATERIAL.COM.SG Mobile Phone No (Phone) +65-96821884 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Cerato Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SI22V13517/VPL/R02

DRIVER

CC

Name of Driver CHUA HOCK BENG TIMOTHY NRIC No SXXXX860Z Date Of Birth 26/03/1951 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	29/11/1969 53 YEARS AND 7 MONTHS Male (Phone) +65-96821884 - TIMOTHY@JHSMATERIAL.COM.SG 102 FLORA ROAD #03-70 S 509744 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear 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	- -
PASSENGER 1	
Name Gender	MATTHEW TAN Male
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	
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	SNA9326E - -

Vehicle Model
Vehicle Variant

Vehicle Colour	_
Vehicle Category	Private car
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)	-

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.
- 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 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 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")

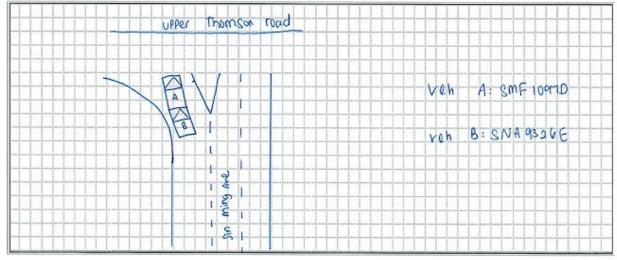
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the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

Policyholder's Signature / Date & Time

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

Jar Wir No.
Witnessed by Reporting Centre Personnel
(Name as in NRICIID card)

Sketch Plan



1

Describe Circumstance of the Accident
I was driving along Sin Ming Ave with a passenger in my car. I stopped at the Slip Road toward Upper Thomson Rd as there were a lot of vehicles driving along Upper Thomson Rd toward Braddel/Thomson Roads around 6.45 pm on Sunday 18 June 2023. Suddenly, an Audi car Licence Plate No. SNA 93216 E slammed out to the bumper of my ear. Both myself and the other male driver came out of our cars and examined the damages to the bumper of my car. There were a dent and tears on the bumper and subser strip below the bumper.
1 was arriving along sin in grant the my the car.
I stopped at the Slip Koal toward Upper Thomson Rd as
the last of the walling to the last the seld
there were a lot of vertices arriving world the Monton No
toward Braddel/Thomson Roads around 6.45 pm on Sunday 18 June
and eller as Alice lines Pet 11 and azzare
1023. Judgerly, are fluit car livence Hote No.) NA 43 468
slammed ofto the bunger of my ear. Both musell and the
- War and driver a L. D. Court at a Court of the
other made ariver came out of our cars and examined the
damaged to the bumper of my car. There were a dent and
tears on the bumper and tubber strip below the bumper.

Declaration

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

Policyholder's Signature / Date & Time

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

1a Win

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

2





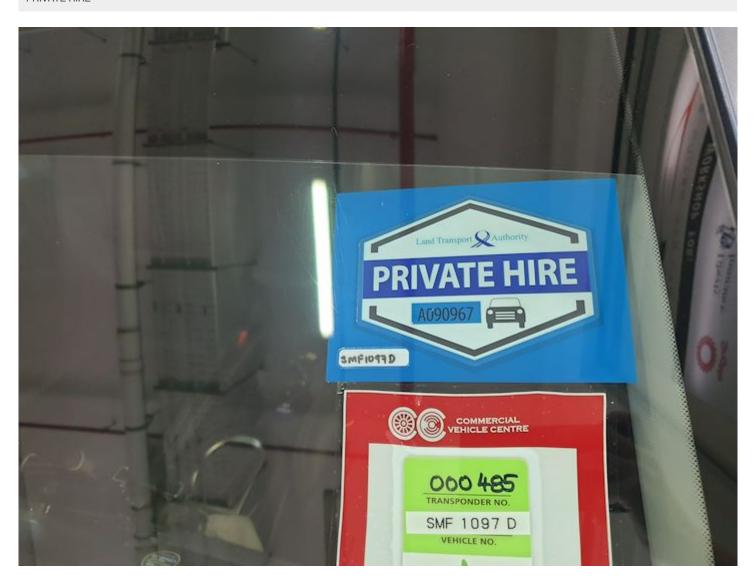
















Liberty Insurance Pte Ltd Registration no.199002791D 51 Club Street 51 Club Street #03-00 Liberty House Singapore 069428 Tel: (65) 6221 8611 Website: http:// www.libertyinsurance.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 ROAD TRANSPORT (AMENDMENT) ACT 2019 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

SI22V13517/VPL/R02 Certificate No MZ400B Form Date of Issue: 05-Oct-2022 LIndex Mark and Registration No. of Vehicle: SMF1097D 2.Chassis number of Vehicle: KNAF1416MK5016481 3.Name of Policyholder: CHUA HOCK BENG TIMOTHY 4. Effective date of Commencement of Insurance 29-OCT-2022 00:00 for the purpose of the Act: 5.Date of Expiry of Insurance: 28-OCT-2023 23:59 6.Persons or Classes of Persons CHUA HOCK BENG TIMOTHY entitled to drive*:

7.Limitations as to use":

For Private Hire Vehicle (PHV) Usage:

A) Use for carriage of passengers or goods in connection with the Policyholder's business.

B) Use for social, domestic and pleasure purposes.

8. 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.

*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 are not to be included under these headings.

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.

For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers



Authorised Signature

For Information only:

COVERAGE:

Comprehensive, Unlimited Windscreen, PHV Extension (Geographical Area: Singapore only)

SUM INSURED (\$\$): EXCESS (SS):

Section I (Singapore) \$2,500.00, Section I (Outside Singapore) \$5,500.00, Section II (Singapore) \$2,000.00, Section II (Outside Singapore) \$4,000.00, Windscreen Excess \$100.00

MARKET VALUE AT THE TIME OF LOSS

FINANCE COMPANY:

PRODUCER NAME:

AAS INSURANCE AGENCY PTE. LTD.

A1481-21/B2BAAMT/05102022 Oct 5, 2022 4:09 PM

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