SD08237C0007 / Ding Auto Pte Ltd ENTRY DATE & TIME: 12/07/2023 18:27 (SGT) SUBMITTED BY: Lynn Yap VERSION: 1 (12/07/2023 18:27 (SGT))

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 12/07/2023 18:27 (SGT) Reported by **Actual Driver** Date of Accident 09/07/2023 12:20 (SGT) Exact Location of Accident Singapore Additional Location Information CROSS JUNCTION OF LUTHERAN ROAD & QUEEN'S ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Employment

Vehicle Registration Number SLJ8831X

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CAR4LEASE PTE LTD Company Reg No 2XXXXX688R Email Address HUILI@ALLSWELLMOTOR.COM.SG Mobile Phone No (Phone) +65-95892417 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Vezel 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?

Yes Vehicle Category Private hire Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2005760554

DRIVER

Name of Driver **TAY SIEW CHOO** NRIC No SXXXX969I Date Of Birth 26/09/1962 Occupation Outdoor

Date Of Driving Pass 11/07/1983 Driving experience 40 YEARS Gender Female Mobile Number (Phone) +65-98761163 Alt. Phone Number Email Address HUILI@ALLSWELLMOTOR.COM.SG Address 63 CHAI CHEE ROAD Address complement #08-808 Postcode 460063 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHED POLICE REPORT. 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

SLG231X

Official Accident report SD08237C0007

Vehicle Manufacturer 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

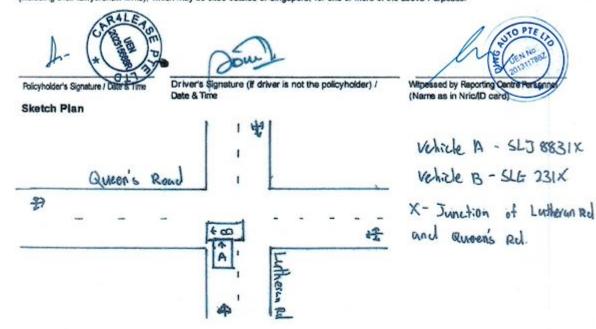
- Rease report correctly the details of the accident to speed up the claims process.
- 2 This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow 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.
- 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 (POPA)

f understand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GtA") 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 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.



escribe Circumstances of the	Accident
	Reter police Report
	realer holice hellows
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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Sighature Bate & Time

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

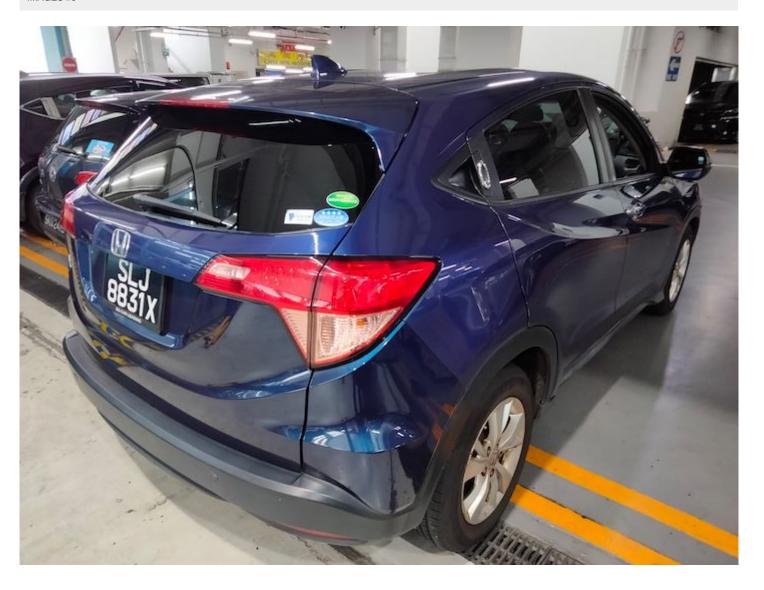
Witnessed by Reporting Centres













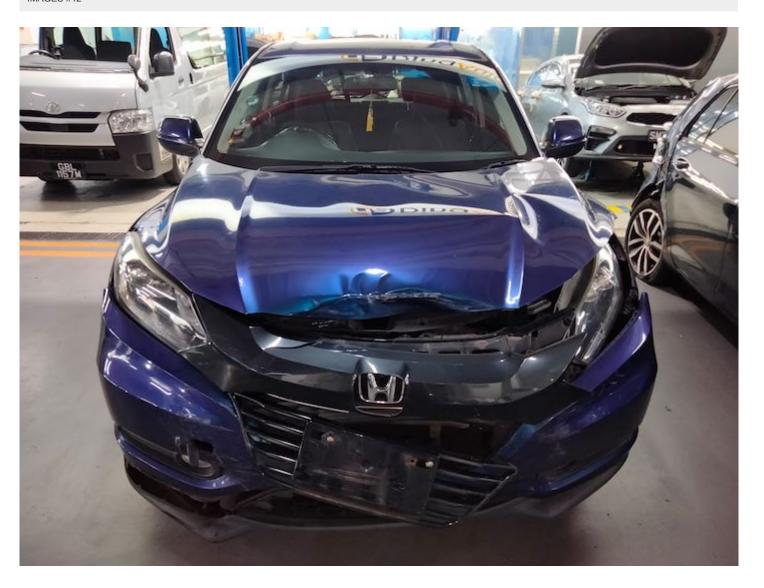
















Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230709/7038

REPORT OF A TRAFFIC ACCIDENT

09/07/202		fade:	Vide Report No.: E/20230709/0114	Station Diary No.:		
Informan	t's Partice	ulars				
Name of Informant: TAY SIEW CHOO			Address: 63 CHAI CHEE ROAD #08-808 PING-AN GARDENS SINGAPORE 460063			
ID Type / NRIC NO		691	Contact No.: Home/Office:	Mobile: 98761163		
Nationality		EN	Email: alvina1031@gmail.com			
Sex: Female	Age: 60	Date of Birth: 26/09/1962	Type of Informant: Driver			
Race: Chinese			Language: English			
Occupation: Private-hire car driver		er	Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/07/2023 12:20	Type of Location X-Junction
Location: QUEEN'S RO)AD	Road Surface:		
Cloudy Traffic Flow: Two Way	*	Traffic Control: Not Controlled		Fraffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model		Conditio	No of
SLG231X	Car	HONDA	vezel	Blue	Slightly Damaged	1
SLJ8831X	Car	HONDA	vezel	Blue	Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20230709/7038

CONTINUATION OF REPORT

Details of Perso	n Involved			Marine Service		
Any Pedestrian Ir	volved: No			Name and Address of the Owner, where the Owner, which is the Owner, whic	-	
No. of Pedestrian	s Injured: NIL		Use of Pe	edestrian C	rossi	na: NA
Driver	Real Property Carlo		5 ST 12 1		000	THE PARTY OF SECTION
Name	LIM YAN, GWEN			ID No.	T	S8111204E
Related Vehicle	SLG231X (Car)			Contact	No.	NIL
Hospital/Clinic	NIL			Class of Driving Licence Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		IL	
No. of Days gran	ted Medical Leave	NIL	Degree o		IIL	
Passenger		W-100 500	Service and the	SEASON SERVICE	200	
Name	UNKNOWN			ID No.		NIL
Related Vehicle	SLG231X (Car)			Contact	No.	NIL
Hospital/Clinic	NIL			Class of Driving Licence Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		IIL	
	ted Medical Leave	NIL	Degree o			*
Driver	2. 11 10 10 10 10 10 10 10 10 10 10 10 10			Catholina I	ALC: N	A TENNING THE
Name	TAY SIEW CHOO		ID No.		S1538969I	
Related Vehicle	SLJ8831X (Car)			Contact No.		98761163
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date		VIL.	
No. of Days gran	ted Medical Leave	NIL	Degree o		VIL	

Brief Details.

Reference to E/20230709/0114. On the above-mentioned date at the above-mentioned time, while i was traveling near the junction suddenly A car (SLG231X) pass by the junction of Queen's road and Lutheran road very fast. After the accident my car (SLJ8831X) stopped at the junction in between Lutheran Road and Queen's Road while the other vehicle fell into the canal. The front side of my vehicle was damaged. Ambulance and police attended to my incident.



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



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Report No. T/20230709/7038

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/07/2023 15:25
Officer In Charge Of Case: TP / TPHQ / MUHAMMAD SHAKIR LIM BIN MUHAMMAD SHARIZAL LIM Contact No.: 98171042	Classification Of Case:

NP168

This report is lodged at Bukit Timah NPC Kiosk 1





Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number

SP2005760554

Date of Issue

: 09 May 2023

Coverage

: COMPREHENSIVE - EXCLUSIVE AUTHORISED WORKSHOP

Policyholder

CAR4LEASE PTE, LTD.

Finance Company

: CASHWELL CREDIT PTE, LTD.

Period of Insurance Registration Number : 08 May 2023 To 07 May 2024 (both dates inclusive)

: SU8831X

Chassis Number of Vehicle

+ RU11207651

Persons 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 or to whom the
- Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cop 276) (Republic of Singapore) and such registration has not been concelled at the time of accident loss or damage.

Limitation as to Use^:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
- (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
- (c) Use for the carriage of passengers for hire or reward under Private Hire Vehicle (PHV) by any person to whom the vehicle is hired and for use within Singapore only.
- Limitation rendered inoperative by Section 8 of 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.

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

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 (Malaysia).

09 May 2023

Issue Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000156 GENRIVER FINANCIAL PTE LTD

Excess

: Section 1: Own Domage Section 1: Windscreen

Section 2: Liabilities To Third Parties

Comprehensive - Exclusive Workshop Per Policy Schedule

Allianz Insurance Singapore Pte, Ltd. 1918/1/2019039136

79 Robinson Road #09-01 [Singapore 068697 | Tell +c5 6714 1369 | Website www.oli triving.