SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.

Mobile Phone No

Alternative Phone No

- 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 24/07/2023 15:58 (SGT) Reported by **Actual Driver** Date of Accident 21/07/2023 11:00 (SGT) Exact Location of Accident Singapore Additional Location Information SLE TOWARS WOODLANDS Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SME6073U INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner **BIS MOTORING PTE LTD** Company Reg No 2XXXXX055D Email Address KEIFTAN@BISMOTORING.COM.SG

Kia

(Phone) +65-86881311

VEHICLE PARTICULARS

Manufacturer

Model Carens 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 CC 1700

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2002451400

DRIVER

Name of Driver LIM BOON KWANG NRIC No SXXXX669A Date Of Birth 24/11/1960 Occupation Outdoor

Date Of Driving Pass 23/04/1981 Driving experience 42 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-91902838 Alt. Phone Number Email Address LIMBOONKWANG60@GMAIL.COM Address BLK 224D COMPASSVALE WALK Address complement #14-603 Postcode 544224 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 Collision - Change/cross lane 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **GRAB PASSENGER** Gender **Female DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Sengkang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18003438999 Alt. Police Station Phone No (Fax) +65-63438939 Police Station Address 2 Sengkang Square #01-02 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

Reasons for not uploading a video of the accident SD CARD WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	QX1809A
Vehicle Manufacturer	Mazda
Vehicle Model	3
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	ANG PEI JIA
Contact Number	(Phone) +65-96316055
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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>.
- 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.
- 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 lodgment 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.
- 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Lim

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN				
			VEHICLE A.	- COME KNAZ
			VERTICUE A	0000
			VEHICE B	- QX 809/
		/R//		
		151		
	A			
	STE	Towards Woodlands		
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT			
Refer -	to Ponce Report TI	20230771 1907	1.	
	747		1.0	
				1
DECLARATION			אודות	- 6
/We declare the foregoing part	iculars are true in every respect.		Monday	A. C.
	/.		SE KAAR	13/111
	\sqrt{m}	1		101)
olicyholder's Signature	Driver's Signature	Danast	ing Centre Personnel's S	onature
Date & Time:	(If driver is not the policyhol			Bustone
	Date & Time:	NRIC/E		

GIARMC SketchPlanForm_V3

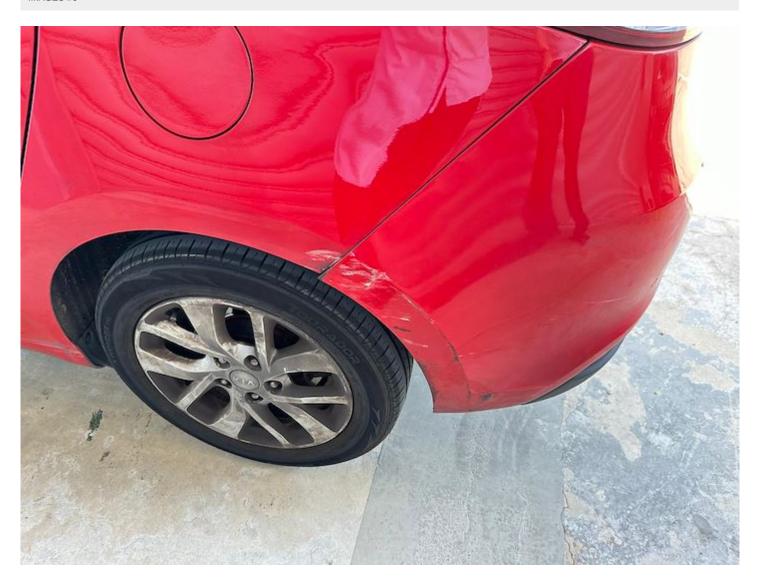


















T/20230721/2071

Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

1 of 3 Report No. T/20230721/2071

Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT

	ne Report N 023 15:59	Made:	Vide Report No.: Station Diary N F/20230721/0071 67		
Informa	nt's Partic	ulars			
Name of Informant: LIM BOON KWANG		Address: APT BLK 224D COMPASSVALE WALK #14-603 SINGAPORE 544224			
ID Type / ID No.: Contact No.: NRIC NO / S1450669A Home/Office: Mobile: 9190		Mobile: 91902838			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 62	Date of Birth: 24/11/1960	Type of Informant: Driver		
Race: Chinese			Language: Mandarin		
Occupat Private I	tion: Hre Driver		Driving Licence Informa Class: 3,4	tion: Date of Expiry:	

	mation of the Accident	I no i i		
Type of Accident:	Non-Injury Attended by Police			Type of Location Straight Road
Location: SELETAR EX Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same				Anyone conveyed by

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
QX1809A	Car	MAZDA	MAZDA3 4DR 1.5 AT M-HYBRID CLASSIC MK	White	Slightly Damaged	0
SME6073U	Car	KIA	CARENS 1.7 DCT DIESEL 5DR FWD		Slightly Damaged	1





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Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

Report No. T/20230721/2071

2 of 3

Tei No: 1800-343 8999

CONTINUATION OF REPORT

Details of Perso	n Involved				Plant -	
Any Pedestrian Ir	volved: No					
No. of Pedestrian	s Injured: NIL		Use of Pe	destrian	Cross	ing: NA
Driver			146			
Name	ANG PEI JIA			ID No.		S7620866J
Related Vehicle	QX1809A (Car)			Contact No.		96316055
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	of Injury	NIL	
Driver			a seed a copy	out-mus		
Name	LIM BOON KWANG	}		ID No	•	S1450669A
Related Vehicle	SME6073U (Car)	n 0	Contact No.		91902838	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Dis	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of Injury NIL			

Brief Details.

On 21/07/2023 at about 1100hrs, I was driving my vehicle alone SLE towards Woodlands direction. I was on lane 1 and I noticed a police vehicle on lane 2, I continued driving forward leaving the police vehicle behind me. Suddenly, my vehicle started jerking hard and I observed my immediate surroundings and noticed that the police vehicle had bumped into me. Both drivers shifted the vehicles to the left of the expressway.

Both drivers came out, I checked with the driver, and he mentioned that he was giddy. I observed the driver to be unsteady, I exchanged particulars with him and I was informed by him that I needed to wait for Traffic Police. The traffic police came shortly after, I was instructed to shift my vehicle to a carpark in woodlands and I provided my version of the story to the officer. The traffic police officer took my in-vehicle camera's memory card. I was given an acknowledgement slip and an accident notice letter between SPF vehicle and private vehicle. The observable damages are scratches to the rear left bumper of my vehicle.





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Report No. T/20230721/2071

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Signature Of Informant:
Lim
Date/Time: 21/07/2023 15:59
Classification Of Case:





Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORTACT 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RSKS) BULES 1959 (FEDERATION OF MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RSKS) 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 : SP2002451400 Date of Issue : 25 July 2022

Coverage : COMPREHENSIVE - EXCLUSIVE AUTHORISED WORKSHOP

Policyholder : BIS MOTORINGPTE, LTD.

Finance Company

Period of Insurance ; 01 August 2022 To 31 July 2023 (both dates inclusive)

Registration Number : SME6073U

Chassis Number of Vehicle : KNAHU815VJ7212146

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 vehicle is hired.
- 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 (Cap 276) (Republic of Singapore) and such registration has not been cancelled 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
- (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).

25 July 2022

Issue Date

Chief Executive Officer

Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000099 INSURE GENERAL PTE LTD

Comprehensive - Exclusive Workshop Per Policy Schedule

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

79 Robinson Road #09-01 | Singapore 068897 | Tel: +65 6714 3369 | Website: www.alianz.sg