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 First Submission 23/10/2024 17:28 (SGT) Reported by **Actual Driver** Date of Accident 23/10/2024 04:30 (SGT) Exact Location of Accident Near 210 Serangoon Central, Singapore 550206 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number **GBL9157K**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **3H AUTO TRADING** Company Reg No 53427200B Email Address 3HAUTOTRADING@GMAIL.COM Mobile Phone No (Phone) +65-86852238 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model N-VAN + STYLE FUN TURBO Variant Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to Yes your vehicle? Vehicle Category Private car Transmission Auto CC 658 Vehicle Fuel Petrol First Regisration Date 29/07/2022 Chassis no JJ16002725

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D21MFL0004615_03

DRIVER

Date Of Birth17/0OccupationOutcDriving Pass Date07/0Driving License Pass Class3A	
Occupation Outco Driving Pass Date 07/0 Driving License Pass Class 3A	25727H
Driving Pass Date 07/0 Driving License Pass Class 3A	7/1988
Driving License Pass Class 3A	
	4/2022
D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Driving License Validity Valid	
	ARS AND 6 MONTHS
Gender Male	
·	ne) +65-88303303
Alt. Phone Number - Email Address - JIN I	MANUEDIOKOR O OMAIL O OM
	MAVERICK88@GMAIL.COM
Address complement -	BLK 208 SERANGOON CENTRAL #03-226 S 550208
Postcode -	
Is the driver the policyholder?	
If No, Relationship of the Driver with the Insured Hire	
Does Driver Own Other Vehicles?	
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 Cha	n Collision
Weather Conditions Clea	
Road Surface Dry	'
2.,	
OTHER INFORMATION	
Manager for the control of the contr	
Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3	
Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? -	
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Was any other vehicle or property damaged?	
Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 1	
Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s)	
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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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	FOO CHEE KUAN
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 Authorised Driver.
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- 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 Police 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.
- 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 Dafa 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' law yers/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;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

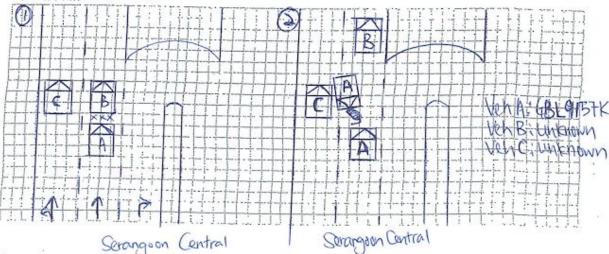
Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

5327200F



Describe Circ	cumstances of the Accident
On	above dock I time, I was driving my Whice A (GB (915
-	
Taising	along Strangeon Central Towards to Chu lang Link on som
pene of	a 3-knes, road Somewhere in front of BLEDGI Strangon
Central, I	I fall at steep and tented to stop. As an result, my which
Pont port	ton collided onto the rear portion of velvice B (unknown)
	to the impact, my vehicle spinned 90 degree and the 1991
	cond collicion to whicle ((unknown) Honoly Fit which
from my 16	and the
rom my 14	eff land.
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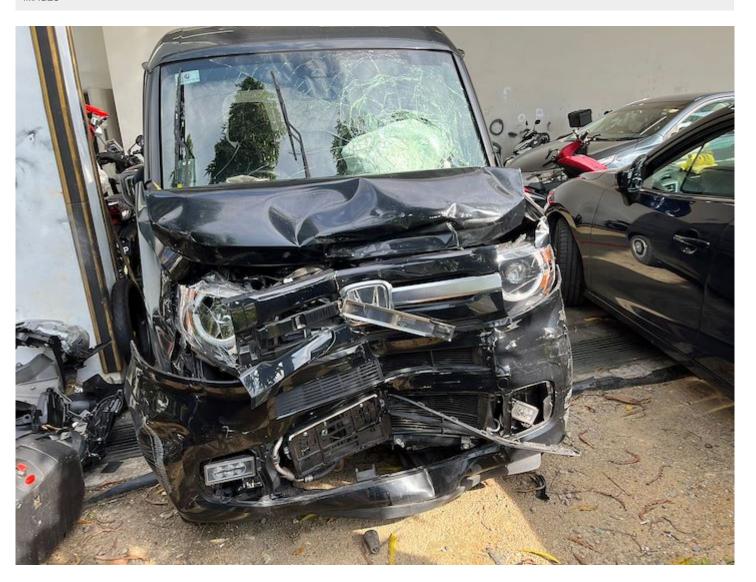
Declaration

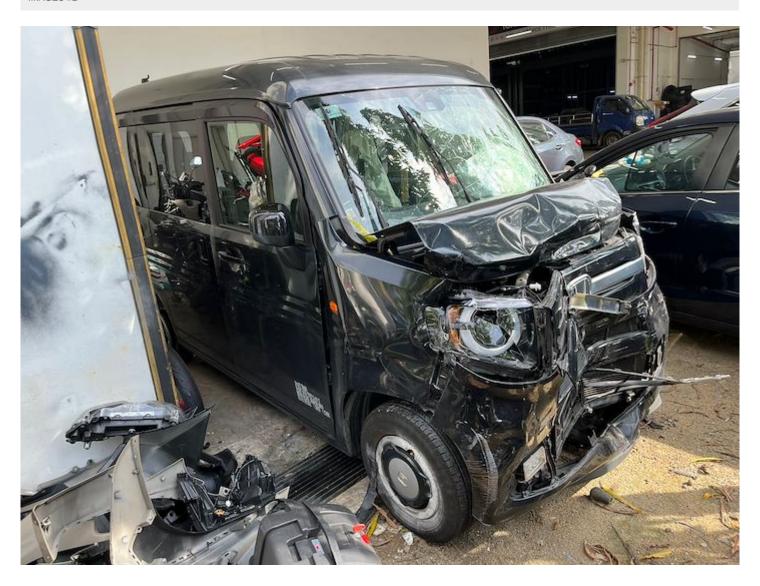
IWe declare the foregoing particulars are true in every respect.

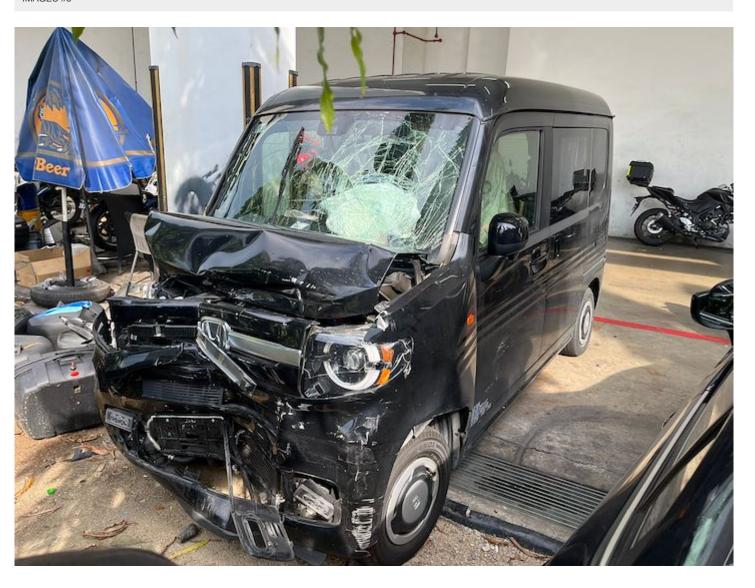
Policyholiar's Signature / Date

Diver's Signature (if driver is not the policy holder) / Date & Time

Witnessed by Reporting Centre Personnel





















INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. MZ-0078806-X 6 Raffles Quay #22-00 Singapore 048580 Office (65) 63476100 Email insure@ili.com.sg Website www.iii.com.sg

COVER: Comprehensive

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

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D21MFL0004615 03

: GBL9157K

1. Index Mark and Registration Number of Vehicle

: JJ16002725

Chassis No 2. Name of Policyholder

: 3H AUTO TRADING

3 Effective date of Insurance

: 24 Jun 2024

4. Expiry date of Insurance

: 23 Jun 2025

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.

The Hirer.

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

- - (1) Use in connection with the Policyholder's business or Hirer's business.
 - (2) Use for social, domestic and pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover

- (1) Use 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.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired..
- (4) Use for any purpose in connection with the Motor Trade.
- *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.

Excess Section I	: SGD	2,000.00
Excess Section II	: SGD	1,500.00
Windscreen Excess	: SGD	100.00
Hire Purchase Company	: Abwin Pte Ltd	

FOR DRIVERS BELOW 21 YEARS OR ABOVE 75 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I & II (SEPARATELY) WILL BE APPLICABLE.

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).

Agent/Broker : A000047/SINCL PTE LTD

Date of Issue : 23/06/2024 18:15:30

M.Z. 301C - GOODS CARRYING - HIRE(Company's use)

For India International Insurance Pte Ltd

Nalini Venugopal MD & CEO

santhi/23/06/2024 18:15:30

23/06/2024 18:16:34

