

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 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 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	12/11/2024 15:33 (SGT)
Reported by	Actual Driver
Date of Accident	04/11/2024 13:25 (SGT)
Exact Location of Accident	Serangoon Rd, Singapore
Additional Location Information	TOWARDS CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA5368C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MILLION AUTO SERVICE
Company Reg No	31741300K
Email Address	GRACE@MILLIONAUTO.COM
Mobile Phone No	(Phone) +65-62649091
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	DYNA 150 MANUAL
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982
Vehicle Fuel	Diesel
First Registration Date	24/08/2007
Chassis no	JTFAT35Y503001176
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D20MFL0002383_04

DRIVER

Name of Driver	SARVU SRINIVAS
Passport No/FIN	G8375050U
Date Of Birth	02/01/1987
Occupation	Outdoor
Driving Pass Date	31/12/2013
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	10 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88990335
Alt. Phone Number	-
Email Address	MSCHONG@MILLIONAUTO.COM
Address	34B PENJURU PLACE
Address complement	#06-63
Postcode	608560
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Collision - Head to Rear
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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

-

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	SNL6750A
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)	1

SKETCH PLANIMPORTANT NOTICE

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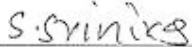
8. Consent under the Personal Data Protection Act (PDPA)

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.
- (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:
 - (i) 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.

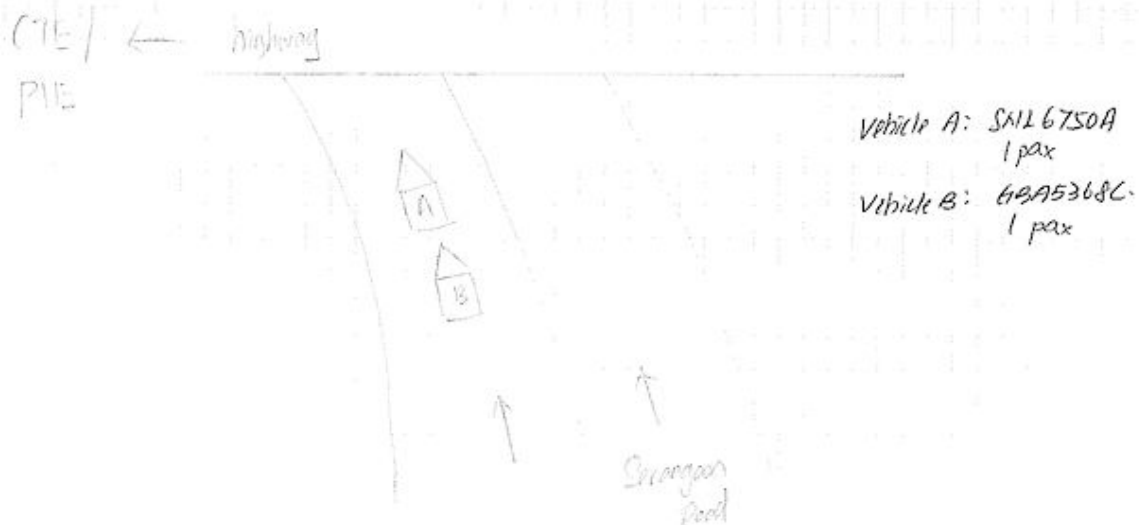
I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.


 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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the date 4/1/2024, I was driving the vehicle GBA5368C from Sorangon Road Exit to highway. In front the vehicle SNL6750A suddenly stop. my vehicle GBA5368C also stop the time don't have hit him. SNL6750A the car owner said that, my vehicle GBA5368C hit him the car behind. I don't have hit the car SNL6750A behind.

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

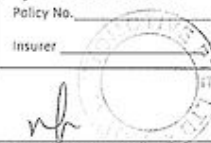


Policyholder's Signature
Date & Time:

S. Srinivas

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

☐ Claim own policy
☐ Claim third party
☐ Claim OD / TP at other workshop
☒ For record purpose
Policy No. _____
Insurer _____ Vch. No. _____



Reporting Centre Personnel's Signature
Name: _____
NAIC/FIN No.: _____



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 194703792K | GST Reg. No. M2-0078806-X
6 Raffles Quay #22-00 Singapore 048500
Office (65) 63476100 Email insure@iic.com.sg
Website www.iic.com.sg

Our Ref : MFL2024D0013108/EL
Your Ref: GBA5368C

Date: 11 November 2024

MILLION AUTO SERVICE
4 PENJURU PLACE #01-12
2.8 PENJURU TECH HUB
Singapore 608782

BY NORMAL POST

Dear Sir,

**ACCDT INVL GBA5368C(III) & SNL6750A ON 04/11/2024 13:25:00
ALONG SERANGOON ROAD TOWARDS CTE**

We do not appear to have been notified of the above accident and hence are unable to deal with the third party claim(s). If the accident did in fact happen kindly ensure that an accident report is filed immediately with any of the IDAC or Reporting Centres and provide us with the following:

- (i) Copy of police report, if lodged
- (ii) Copy of accident report and
- (iii) Explanation for the non-reporting of the accident **within 24 hours** of the accident or by the **next working day** in compliance with the "Notification Clause" of the policy (copy enclosed for easy reference).

Please note that if we do not receive copies of the police and/or accident report and satisfactory explanation latest by the date indicated below this communication will serve as our formal communication to deny indemnity to you and/or driver at the time of accident, in respect of all claims arising out of the above accident.

Kindly note that under the Motor Vehicles (Third Party Risks & Compensation) Act, we are statutorily liable to satisfy any third party claim for damages for personal injuries and related expenses. Should we be required to satisfy any third party injury claim required under law, we reserve our rights to seek full recovery from you for all amounts incurred by us in accordance with the "Avoidance of Certain Terms & Rights of Recovery" clause of the Policy.

If you are not the driver of insured vehicle at the material time please bring this letter to the attention of the driver concerned for compliance. Further, kindly let us have the driver's name, NRIC and contact details (Phone nos. and Email ID).

Kindly revert latest by: 20/11/2024.

Yours faithfully

Computer Generated. No signature is required.

C.c. FINANCIAL ALLIANCE PTE LTD [By Email]



INDIA INTERNATIONAL INSURANCE PTE LTD

Co Reg No: 190703792K | GST Reg No: M2-0070306-X

6 Raffles Quay #22-00 Singapore 040500

Office (65) 63476100 Email: insure@iim.com.sg

Website: www.iim.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 (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.: D20MFL0002383_04		COVER: Third Party Fire & Theft
1. Index Mark and Registration Number of Vehicle	: GBA5368C	
Chassis No	: JTFAT35Y503001176	
2. Name of Policyholder	: MILLION AUTO SERVICE	
3. Effective date of Insurance	: 24 Apr 2024	
4. Expiry date of Insurance	: 23 Apr 2025	
5. Persons or Classes of Persons entitled to drive*	<p>Any person who is driving on the Policyholder's order or with their permission. The Hirer.</p> <p>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</p>	
6. Limitations as to use*	<p>(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.</p> <p>The Policy does not cover</p> <p>(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. (4) Use for any purpose in connection with the Motor Trade.</p> <p>*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.</p>	
Hire Purchase Company	: N/A	
<p>FOR DRIVERS AGED 24 YEARS & ABOVE & WITH MINIMUM 2 YEARS OF SINGAPORE DRIVING EXPERIENCE, AN EXCESS OF \$52,000 ON SECTION II FOR SINGAPORE & \$54,000.00 ON SECTION II FOR WEST MALAYSIA WILL BE APPLICABLE.</p> <p>YIELD: FOR DRIVERS BELOW 22 YEARS &/OR WITH LESS THAN 2 YEARS DRIVING EXPERIENCE UNDER THE RELEVANT CLASSES OF DRIVING LICENCES, AN ADDITIONAL EXCESS OF \$53,000 SECTION II WILL BE APPLICABLE.</p> <p>AUTHORISED WORKSHOP: ACCIDENT REPAIRS MUST BE DONE AT MILLION AUTO SERVICES ONLY. THE COMPANY WILL NOT PROVIDE INDEMNITY UNDER SECTION I OF THE POLICY IF THE MOTOR VEHICLE IS REPAIRED ELSEWHERE.</p> <p>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).</p> <p>Agent/Broker : B000279/FINANCIAL ALLIANCE PTE LTD Date of Issue : 24/04/2024 17:48:37 M.Z. 301CT - GOODS CARRYING - PM(Company's use)</p> <p style="text-align: right;">For India International Insurance Pte Ltd</p> <p style="text-align: right;"><i>Nalini</i> Nalini Venugopal MD & CEO</p>		

santhosh/24/04/2024 17:48:37

24/04/2024 17:50:01











