ASS. CS INC	04110069 AVP3
	IGNMENT
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OD / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To in thicle No:	III File
ai VVO Tillianis	Wake: Harde Fit co 1317
cí	Colour Buc, A/C: Insured / Std / NI / NA
Insur@d:	Sp.Reading 120682 T/Radio: Insured / Std / N1 / NA
Policy 140	Eng/No:
Claims No	C/No: 6K31224506
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(Cli⊖nī'sAepord)	Steering: Inorder / Jammed / Leaked / Burnt or
Make Of Val:	Brake: Inojder / Jammed / Leaked / Burnt or Modi: Nil (S/Rim / STD A/Rim or
**************************************	Tyre Size: F: 185/65R15
(Poficy Codition)	R: 185/63C45
Remark: Theyeh had commenced its N/S O/S ispair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUM /
Bal. or Market Value:	TOYO/YOKO OF Jenkook.
IDAC Accident Rport: Consistent?: Yes or No	R/Bal. R/Bal. P/Bal.
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Est, Repairs:days Res.: Yes or No	DOA THE DOAL OF THE
Lum Sum: % 3 Val.: Yes or No	Survey held at Hua Meny
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C \ Rooftop or
Date: Person Contacted: Vehicle: IN / OUT	
Date / Time Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision.
TPINC.	COE Expiry:
	Estimate given during: Yes an
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71611	
Date/Thu, File Pass to?	
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2) Add Fee	Transportation:)3+R88
Freport Francis	: Interview · (3) Photos
Longin France / LPC pr (Co	: Tech, Invertig

SK0N24B20001 / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 02/11/2024 10:58 (SGT) SUBMITTED BY: Lee Nai Vien VERSION: 1 (02/11/2024 10:58 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

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 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 Form by insurance companies is not an admission of policy hability of 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

02/11/2024 10:58 (SGT) Both Policyholder and Actual Driver 01/11/2024 15:27 (SGT) Singapore PIE TOWARDS PAYA LEBAR Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLM7168T

Honda

Private car

Auto

1317

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No **Email Address** Mobile Phone No Alternative Phone No

VEHICLE PARTICULARS

No ABDUL SHUKOR BIN YUSOF SXXXX446H ABDSHKR59@GMAIL.COM (Phone) +65-96116629

FIT 1.3G F PACKAGE A

No - Claiming third party

Manufacturer

Model

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?

Vehicle Category Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number Great Eastern General Insurance Limited V5002775

DRIVER



Name of Driver ABDUL SHUKOR BIN YUSOF NRIC No SXXXX446H Date Of Birth 13/12/1959 Occupation Indoor **Driving Pass Date** 29/08/1983 **Driving License Pass Class** 3 **Driving License Validity** Valid Driving experience 41 YEARS AND 3 MONTHS Gender Male Mobile Number (Phone) +65-96116629 Alt. Phone Number **Email Address** ABDSHKR59@GMAIL.COM Address 112 LENGKONG TIGA #02-219 S410112 Address complement Postcode Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Weather Conditions Road Surface

Collision - Head to Rear Raining Wet

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? 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

No Yes No

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?

Original language used in the statement

No No

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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

YQ9626A



Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver SAZ' IRFAN BIN ZAINAL NRIC No SXXXX486J Contact Number (Phone) +65-87685922 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.
- 2. This Formmust be completed by the Policyholder and/or the Authorised 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 Formby 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. 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 Data Protection Act (PDPA)

Lunderstand, 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 softlement 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 ma;
- (w) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices forms, which could involve disclosure of certain personal data about me to bring about detivery of the same as well as on the external cover of envelopes/mail.
- (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.

Policyhokler's Signature / Date &

Driver's Signature (If driver is not the policynolder) / Date & Tines

Witnessed by Reporting C

Sketch Plan

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PIE twds Payali Lebar	
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Describe Circumstances of the Accident		
I was driving along PIE twds Payar Lebar on 01.11.2024 at	about 15:	27/
Because the car in front slow down and stops, Vehicle A also	slow dow	n
stops, but Lorry B collided with the rear portion of Vehicle A.		
portion at venicle H.		-
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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Data &

2

2/11/2024

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

SOHZAROH SHOOK SING

Witnessed by Reporting Centre Personnel



CERTIFICATE OF INSURANCE

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation: Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)

Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960

Road Transport Act, 1987 (of Malaysia)

The Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaya)

Road Transport (Amendment) Act 2019 (of Malaysia)

Policy Number V5002775

Policyholder ABDUL SHUKOR BIN YUSOF

Period of Insurance 07/04/2024 (0000HRS) to 06/04/2025

Product Name Drive And Save Plus

Type of Cover Comprehensive Authorised Wkshp

Vehicle Registration Number SLM7168T

Vehicle Make & Model HONDA - FIT

Engine Number L1381327894

Chassis Number GK31224506

Hire Purchase STANDARD CHARTERED BANK

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *

- (a) The Policyholder only
- (b) Any other person who is driving on the Policyholder's order or with his/her permission.
- (c) In the event of the death of the Policyholder:
 - Any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive had not been withdrawn prior to the death of the Policyholder.
 - Any other person who has been given permission to drive the vehicle prior to the death & such permission had not been withdrawn by the Policyholder.
- 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

LIMITATIONS AS TO USE

Use for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any other trade or business or 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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Khar Hoak Seng

Group CEO

Great Eastern General Insurance Limited (A wholly-owned subsidiary of Great Eastern Holdings Limited), [1 Pickering Street. #01-01 Great Eastern Gentre, Singapore 048659] Company Registration No: 1920 00003W [T: +65 6248 2888 [F: +65 6535 2836] presteasterngeneral com

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Form MX1