

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	24/07/2024 19:22 (SGT)
Reported by	Actual Driver
Date of Accident	22/07/2024 14:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Yio Chu Kang Road towards Lorong Chuan
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE1144B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COLEX ENVIRONMENTAL PTE LTD
Company Reg No	201133348M
Email Address	jennychow@colex.com.sg
Mobile Phone No	(Phone) +65-62687711
Alternative Phone No	(Office) +65-62687711

VEHICLE PARTICULARS

Manufacturer	Daf
Model	FAT CF75.310
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?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	9186

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-24101904MFVS/12

DRIVER

Name of Driver	Jimmol Bin Buntol
Passport No/FIN	G7674756W
Date Of Birth	10/04/1973
Occupation	Outdoor

Driving Pass Date	29/04/2010
Driving experience	14 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94497481
Alt. Phone Number	-
Email Address	jennychow@colex.com.sg
Address	8 Tuas South Street 13
Address complement	-
Postcode	637081
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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)	3
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	-

PASSENGER 1

Name	Norizam
Gender	Male

PASSENGER 2

Name	Sharifudin
Gender	Male

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

Refer to attached sketch plan.

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	SLM7026U
Vehicle Manufacturer	BMW
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

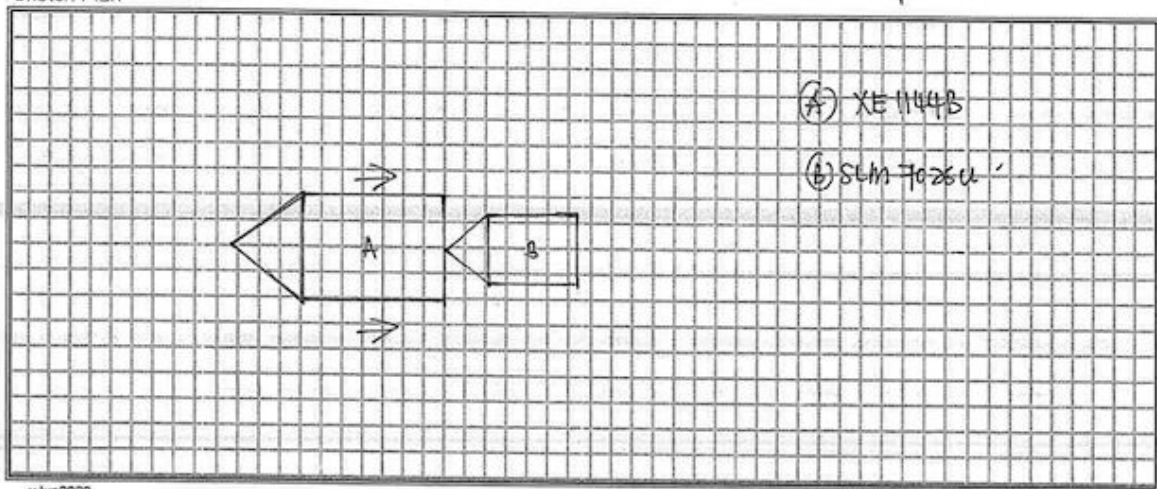
1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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)**
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.


Policyholder's Signature / Date & Time


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


Witnessed by Report Centre Personnel
(Name as in WPC Affidavit)

Sketch Plan



Handwritten details on the grid:

- Vehicle A: XE1144B
- Vehicle B: SLH7026U
- Diagram showing two vehicles, A and B, moving towards each other on a road.

vJun2022

1

On 22-07-2024 around 1430hrs, I was driving company vehicle, XE1144B along Yio Chu Kang Road towards Lorong Chuan.

While the traffic light turned green, I engaged gear to move.

However, I was put in wrong gear, I engaged reverse gear instead of "D" gear. My vehicle reversed and hit against a car behind me.

No injury.

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

Actual Driver's Signature (if driver is not the policyholder)

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)





















CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy. : FLEET - HEAVY COMMERCIAL VEHICLE
Type of Cover. : Comprehensive
Certificate No. : D-24101904MFVS/12
Vehicle No / Chassis No : XE1144B / XLRA75PC0G019708
Name of Insured : COLEX ENVIRONMENTAL PTE LTD
Period Of Insurance : 01.01.2024 To 31.12.2024
Insured Estimated Value : Market Value At Time Of Loss
Financial Institution : N.A

Excess :

SECTION I - SGD5,000.00 ANY ONE CLAIM OR SERIES OF CLAIMS ARISING OUT OF ONE ACCIDENT
SECTION II - SGD5,000.00 ANY ONE CLAIM OR SERIES OF CLAIMS ARISING OUT OF ONE ACCIDENT
SECTION I & II SEPARATELY
ADDITIONAL EXCESS OF SGD1,000.00 TO EACH CLAIM OR SERIES OF CLAIM(S) ARISING
OUT OF SINGLE ACCIDENT FROM THE USE OF THE EQUIPMENT
ADDITIONAL SGD2,500.00 SECTION I & II SEPARATELY IS IMPOSED ON THOSE DRIVERS
WHO ARE BELOW 23 YEARS OLD AND/OR WHO HAVE LESS THAN 3 YEARS OF DRIVING EXPERIENCE
SGD500.00 ON EACH AND EVERY WINDSCREEN CLAIM
ALL EXCESS AMOUNTS ARE SUBJECT TO GST

Authorised Driver*

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

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

* 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.

Limitations as to use*

Use in connection with the Insured's business.

Whilst the Motor Vehicle is being so used the carriage of passengers is permitted.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use for the carriage of passengers for hire or reward
- (3) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

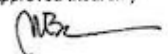
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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)

STELLA/B0031/MZ801

Issued at Singapore on 18.12.2023

MS First Capital Insurance Limited
(Approved Insurers)



Authorised Signature