

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 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 ability
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 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 Report	15/01/2016 15:20
Date Of Accident	15/01/2016 11:45
Exact Location Of Accident	EXCELSIOR SHOPPING MALL LOADING BAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB2219P
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Insured/Policyholder

Name Of Registered Owner	LUTHER MUSIC PTE LTD
Co Reg No	NA
Email Address	keel@luthermusic.com
Mobile Phone No	
Alternative Phone No	Office-65694919

Vehicle Particulars

Manufacturer	FIAT
Model	SCUDO 120 MULTIJET 2.0 MT ABS D/AB 2WD
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Third Party
Vehicle Category	Commercial Vehicle

Insurance Company

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCV14S015752
Cover Note Number	

Driver

Name of Driver	CHUA KAI RUI , KEITH
NRIC No	S9043010F
Date Of Birth	15/11/1990
Occupation	Outdoor
Date Of Driving Pass	04/12/2012
Driving Experience	3 Years And 1 Month
Gender	Male
Mobile Number	(Local) +65-84686608
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 9 TECK WHYE LANE #02-274
Postcode	S680009
Was driver an employee of the Insured's Company	Yes
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Unknown - REFER TO THE SKETCH PLAN
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

REFER TO THE SKETCH PLAN

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GV7099X
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	WANG HENGSHENG
NRIC/Passport Number	G3214870R
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

SKETCH PLAN

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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.

I AM AWARED 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.

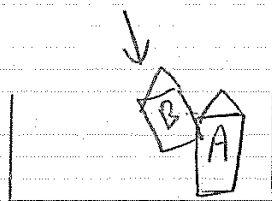
LUTHERMUSIC
www.luthermusic.com

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A- 6BB2297

B- 6VJ099X

Sketch Plan Pg.2

Describe Circumstances of the Accident

Vehicle was parked, stationary, lorry GV7099X reversed and crashed into GIB2219P left passenger door. Left passenger and side door, both doors, have dents and scratches, sticker of van was also damaged and removed.
This accident happened at Excelsior Shopping Mall loading/unloading bay on the fifteen of January, 11.45 am.

Declaration

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

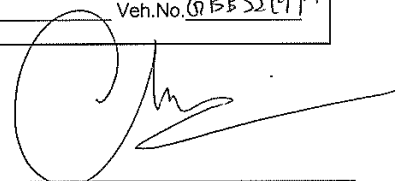
☐ Claim own policy
☒ Claim third party
☐ Claim OD / TP at other workshop _____
☐ For record purpose
 Policy No. DMCV14S 015752
 Insurer _____ Veh. No. GIB2219P


LUTHERMUSIC
 www.luthermusic.com

Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre Personnel

REPUBLIC OF SINGAPORE
IDENTITY CARD NO S9043010F



CHUA KAI RUI, KEITH

Race
CHINESE

Birth Date
15-11-1990 M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9043010F

Name
CHUA KAI RUI, KEITH

Birth Date 15 Nov 1990
Issue Date 04 Dec 2012

002129890J

3805267

NRIC No: S9043010F

Date of Issue
02-12-2005

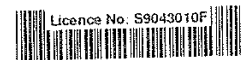
APT BLK 9 TECK WHYE LANE #02-274
SINGAPORE 680009

NRIC No: S9043010F Date: 17/06/2010 No: 6531220

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	04 Dec 2012
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	04 Dec 2012

NP 428A



ERGO

COMMERCIAL VEHICLE (PRIVATE USE)

CP1
E SB
A000257
Cov.Type: C**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)**CERTIFICATE NO.**

DMCV14S015752

**1) Index Mark and Registration
No. of Vehicle:**

GBB2219P

2) Name of Policyholder:

LUTHER MUSIC PTE. LTD.

3) Commencement Date of Insurance:

18 July 2015

EXCESS: (SECTION I) . SGD600.00

ADD XS:WK PERMIT HDR SGD3,000.00

ADD XS:YNG&INEXP DRV SGD2,500.00

4) Expiry Date of Insurance:

28 September 2015

EXCESS:WS (BELOW 10T) SGD100.00

5) Persons or Classes of Persons entitled to drive

1) Any person who is driving on the Policyholder's order or permission

6) 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 has not been cancelled at the time of the accident loss or damage.

7) Limitations as to Use

1) Use in connection with the Policyholder's business.

2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

3) Use for social domestic and pleasure purposes.

This policy does not cover

1) Use for hire or reward racing pace-making reliability trial or speed-testing.

2) 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 (for Items 6 & 7)

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)

Legend

Cov Type:

C - Comprehensive

F - Third Party, Fire & Theft

T - Third Party

For and on behalf of ERGO Insurance Pte. Ltd.
Approved Insurer

Authorized Signature

REPUBLIC OF SINGAPORE
IDENTITY CARD NO S9043010F



CHUA KAI RUI, KEITH

Race
CHINESE

Birth Date 15-11-1990 M
Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9043010F
Name: CHUA KAI RUI, KEITH

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Issue Date 04 Dec 2012

002129890J

3805267

NRIC No: S9043010F

Date of Issue
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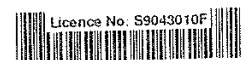
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SINGAPORE 680009

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	EFFECTIVE DATE
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NP 428A



ERGO

COMMERCIAL VEHICLE (PRIVATE USE)

CP1
E SB
A000257
Cov.Type: C**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)**CERTIFICATE NO.**

DMCV14S015752

**1) Index Mark and Registration
No. of Vehicle:**

GBB2219P

2) Name of Policyholder:

LUTHER MUSIC PTE. LTD.

3) Commencement Date of Insurance:

18 July 2015

EXCESS: (SECTION I) . SGD600.00

ADD XS:WK PERMIT HDR SGD3,000.00

ADD XS:YNG&INEXP DRV SGD2,500.00

4) Expiry Date of Insurance:

28 September 2015

EXCESS:WS (BELOW 10T) SGD100.00

5) Persons or Classes of Persons entitled to drive

1) Any person who is driving on the Policyholder's order or permission

6) 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.

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C - Comprehensive

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For and on behalf of ERGO Insurance Pte. Ltd.
Approved Insurer

Authorized Signature

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg.1

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MS171605935 Vehicle Registration No : 6RB2219P
Name(as shown in NRIC): Luther music Pte Ltd
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : _____
Address : _____
Contact (Tel) : 65694919 (H/P) : _____
(Email) : _____
Date of Accident : 15/1/2016 Time of Accident : 1145hrs.
Place of Accident : excelstor shopping mall loading
Insurance Company : Erigo Insurance Pte Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

change to third party claim.

Signature of Vehicle Owner / Driver

Date:

10 Anson Road #06-16 International Plaza Singapore 079903 Phone : + 65 6224 0010 Fax : +65 6224 0030
Operating Hours : Monday to Friday 9am to 5pm