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 witholding 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

	ACCIDENT STATEMENT	
Date Of Report	30/11/2017 12:38	
Date Of Accident	25/11/2017 11:30	
Exact Location Of Accident	CRAWFORD ST TOWARDS LAVENDER ST	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	YP8838S	
Insured/Policyholder		
Name Of Registered Owner	JOO HENG PLASTIC TRADING	
Co Reg No	52991688J	
Email Address	JHPLAS@SINGNET.COM.SG	
Mobile Phone No		
Alternative Phone No	OFFICE-65422776	
Vehicle Particulars		

Manufacturer **MITSUBISHI**

Model CANTER-3.0 D FEB21ER3SDEB (M)

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 If No. Please state action to be taken Vehicle Category COMMERCIAL VEHICLE

Insurance Company

EQ INSURANCE COMPANY LTD Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy YES

Policy Number

Cover Note Number

Driver

Name of Driver **WANG FAGUO** Passport No/FIN G2727647X Date Of Birth 09/08/1983 Occupation **OUTDOOR Date Of Driving Pass** 28/04/2016

Driving Experience 1 YEAR AND 6 MONTHS

Gender MALE

Mobile Number Fax Number

Contact Number

EMail Address NOEMAIL Address

Postcode

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 **COLLISION - HEAD TO REAR**

Weather Conditions **CLEAR** DRY Road Surface

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? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver) 1

Details of Police Action

NO Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED COPY

Attachment(s)

Are accident photos available for attachment?

YES NO

Was there any video captured by Car Camera?

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver NG CHUN BENG

NRIC/Passport Number S7631394F

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 Pg. 1

Describe Circumstances Of The Accident
On 25/1/17 of 11:30 the 7
· · · · · · · · · · · · · · · · · · ·
driving along crawford &t, a vehicle infront
crawford ft, a whice introv
of me made an ensergency brake. I could
The same
not brake in time and hit into near portion
of his webicle.

Declaration

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

JOO HENG MACHICIRATHING

Policyholder's Signature/Date & Time

Driver's Signature / Date & Time

(if driver is not the policy holder)

Witnessed by Reporting

Centre Personnel

Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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 Associa 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 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:
- $(i) \ processing, \ handling \ and/or \ dealing \ w \ ith \ my \ claims \ including \ the \ settlement \ of \ the \ claims \ and \ any \ necessary \ investigations \ relating \ to the \ claims;$
- (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' law yers/law firms, may/are permitted to collectuse, 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.

J: 300 HENG PLASTIC TRADING

Policyholder's Signature / Date & Time

MANG H Guo

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

Witnessed by Reporting Centre Personnel

LOYANG

76e 20

Sketch Plan

Beach Rond

Transfer Fee Enquiry

Enquire Transfer Fee

Vehicle Details	
Vehicle No.	YP8838S
Vehicle Type	A50 - Goods (Closed) Van/Van Panel (Delivery)
Vehicle Attachment 1	No Attachment
Vehicle Scheme	Normal
Vehicle Make	MITSUBISHI
Vehicle Model	CANTER FEB21ER4SDEB
Chassis No.	FEB21EA21619
Propellant	Diesel
Engine No.	4P10C78115
Engine Capacity	2998 cc
Maximum Power Output	-
Maximum Laden Weight	5000 kg
Unladen Weight	2300 kg
Year Of Manufacture	2017
Original Registration Date	13 Sep 2017
Lifespan Expiry Date	12 Sep 2037
COE Category	C - Goods Vehicle & Bus
Quota Premium	\$42,809.00
COE Expiry Date	12 Sep 2027
Road Tax Expiry Date	12 Mar 2018
Inspection Due Date	12 Sep 2018
Intended Transfer Date	30 Nov 2017
CO2 Emission	-

 $Late \ renewal \ fee(s) \ will \ be \ imposed \ if \ road \ tax \ / \ lay \ up \ has \ expired. \ Please \ use \ \underline{Enquire \ Road \ Tax \ Payable} \ for \ fee(s) \ payable.$

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee	11.00	-	11.00
Total Amount Payable			11.00

You may print this page for reference.



CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

COMMERCIAL VEHICLE PRIVATE (SCH I) Comprehensive

Certificate No.: DMCPHQ17-005158

1. Index Mark and Registration Number of Vehicles

Form: LCVP1 Excess: Section 1

SGD750.00 YEID-AC Additional SGD3,000.00

2. Name of Policyholder JOO HENG PLASTIC TRADING

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act
- 4. Date of Expiry of Insurance 12/09/2018
- 5. Person or Classes of Persons entitled to drive*

Goods carrying - (MZ300) Authorised Driver. Any of the following :

2. Any person on the order or with the permission of 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 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 he Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage. 6. Limitations as to use

1)Use in connection with the Insured's business. 2)Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. 3)Use for social domestic and pleasure purposes.
THE POLICY DOES NOT COVER 1)Use for hire or reward or for racing pace-making reliability trial or speed testing. 2)Use whilst drawing a greater number of trailers in all than is permitted by Law. 3)Use for the carriage of passengers for hire or reward. 4)Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

*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 Time 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) or and Amendment, Act or Acts passed in substitution thereof.

ABWIN PTE LTD

8 Kaki Bukit Road 2 Ruby Warehouse Complex #01-33 Singapore 417841 Tel: 6842 3322 Fax: 6842 3301 (Admin Office)

I-AABWINPTELTD/HO/A000342/Abwin Pte Ltd

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited

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

EFFECTIVE DATE

Class 3C Motor cars with unladen weight =< 3000kg with =< 7 28 Apr 2016 passengers, exclusive of driver

Licence No:G2727647X

NP 428A

VISIT PASS

Immigration Regulations

Name WANG FAGUO

Date of Birth Sex 09-08-1983 M

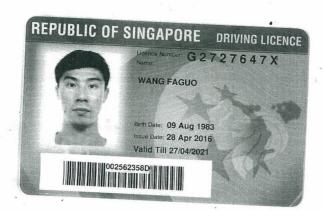
CHINESE

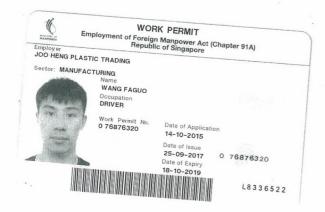
FIN Date of Issue Date of Expiry G2727647X 25-09-2017 18-10-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.







Accident Photo



Accident Photo





Accident Photo

