MNA118017562 / National Assessment Centre Services - Uts ENTRY DATE & TIME: U5/02/2018 14.05 SUBMITTED BY: Krishnasamy s/o Gorindasamy

SINGAPORE ACCIDENT STATEMENT

4.25.4

IMPORTANT NOTICE

- Please report <u>correctly</u> 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
- 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.

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.
get the todgement 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.

foresaid.	ACCIDENT STATEMENT			
Date Of Report	05/02/2018 14:05 05/02/2018 12:30 MARINE PARADE RD TWDS TANJONG KATONG RD			
Date Of Accident				
Exact Location Of Accident				
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	GBA4001S			
Insured/Policyholder	M/S MAREX TRADING (S) PTE LTD			
Name Of Registered Owner	M/S MAREX TRADING (0) TE ETO			

Co Reg No NOEMAIL

Email Address (LOCAL) +65-96759300 Mobile Phone No OFFICE-96759300 Alternative Phone No

Vehicle Particulars VOLKSWAGEN Manufacturer

Model Exact Purpose for which vehicle was being used at

time of accident Are you claiming under your own insurance policy NO

for repair to your vehicle? THIRD PARTY

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

Insurance Company

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage NO Fleet Policy DMCVSN7039941710 Policy Number

Cover Note Number

Driver TAN KIM TECK Name of Driver S1191625B NRIC No 24/02/1956 Date Of Birth OUTDOOR Occupation

31/05/1978 Date Of Driving Pass 39 YEARS AND 8 MONTHS **Driving Experience**

Gender

(LOCAL) +65-96759300 Mobile Number

Fax Number OTHERS-96759300 Contact Number

NOEMAIL EMail Address

Address

BLK 30 CASSIA CRESCENT

#05-12

Postcode

391030

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

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

4

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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLV339R

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

YEO SWEE HWEE

NRIC/Passport Number

Contact Number

98322284

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBC8709Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

81876172

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

COMMERCIAL VEHICLE

SONG HONG ZHOU

Vehicle Registration Number

SGP7597Z

Vehicle Make/Model/Colour

Details Of Properties

v. L. . Cataooni

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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 liability.
- 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.
- 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.
- By the lodgment 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 .
 - 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")
- 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.

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.:

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DESCRIBE CIRCUMSTANCES OF	in all a lambor corde
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Stop abrup	Hy to avoid a collision word
Velucle D	, Vehicle D had made sum
left into	to tam into Taylor Katoy Road.
Vehicle B	
as a result	t a the sudden break of Vehicle B,
Vohicle F.	bunched into the rear of Vehicle B
and Vel	icle C knocked into the real of
Vehicle	A :
Vene	
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	*
DECLARATION	
I/We declare the foregoing particu	alars are true in every respect.
-5,795	an / x/2/201
	Reporting Centre Personnel's Signature
Policyholder's Signature	Oriver's Signature (M. deliver is that the policyholder) Name:
Date & Time:	Date & Time: NRIC/FIN No.:

REPUBLIC OF SINGAPORE DENTITICARD NO. S1191625B





TAN KIM TECK



CHINESE

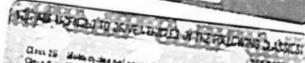
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BINGAPORE



Professor Freedom 0. 28-06-1997

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中国太平保险(新加坡)有限公司

NG INSURANCE (SINGAPORE) PTE. LTD. Cri. Reg. No. 200208384E

MZ300/C R SN AN0421A Cov.Type: C

MOTOR COMMERCIAL VEHICLE

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 18 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

		Motor venicles (terms and			
		TO MANAGEMENT (MILITY			Engine No :BST0488 ChaNo:WV1ZZZZKZ7XX	351 114663
CE	RTIFICATE No.	DMCVSN7039941	710			
1.	Index Mark and Registration	GBA40015			AUTOSAFE	
	Number of Vehicle		36	2		
2	Name of Policy Holder	M/S MAREX TRA	DING (S)	PTE LTD		c#400_00
3.	Effective date of the Commencement of lesurance for the purposes of the Regulation Ordinance or Enactment	ors. 22 Jun	2 June 2017 Excess Sect I			\$\$100,00
4	Dale of Expiry of Insurance	21 Jur	ne 2018			
5	Persons or Classes of Persons entitled to	deve"				
	Any person who is driving on	the Policyhol	der's ord	er or with their pe	rmission.	
	provided that the person dri regulations to drive the Mot Court of Law or by reason of	any enactment	ted in ac has been or regul	cordance with the l so permitted and is ation in that behal	icensing or other 1 not disqualified b f from driving the	aws or y order of a Motor Vehicle.
	Company of the Compan					

Limitations as to use."

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes,

The Policy does not cover.

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

HIRE PURCHASE CO.: OCL LTD AS HP OWNER

* 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 (Maleysia), 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).

Please see reverse

FOI CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Authorised Signatory

Issued By: ____VITESSE SOLUTIONS..... Authorised Officer

3 Anson Road #16-00 Springlest Tower Singapore 079909 Tel: 6369 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com