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 <u>truthful and accurate</u> 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 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.

aloresald.	
	ACCIDENT STATEMENT
Date Of Report	18/04/2018 17:57
Date Of Accident	17/04/2018 13:50
Exact Location Of Accident	ALONG NEWTON CIRCUS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBC1105K
Insured/Policyholder	
Name Of Registered Owner	NU-HUP TECK
Co Reg No	199105827G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66342380
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200-1.5 L (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ17-002301
Cover Note Number	
Driver	
Name of Driver	KOR SOO BEE

Name of Driver

KOR SOO BEE

NRIC No

S0120737G

Date Of Birth

06/12/1953

Occupation

INDOOR

Date Of Driving Pass

21/04/1976

Driving Experience 41 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-97349808

Fax Number

Contact Number

EMail Address FELICIAK@SINGNET.COM.SG

Address 69 CASHEW CRESCENT

Postcode 679813

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 SIDE SWIPE
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?

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 1

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

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 SBS6354R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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 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, disclore and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or posterior by my insurer (collectively the "Personal Information") and disclore and transfer such). Personal information to all insurers; who have insured vehicle(s) involved in this accident (all insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to us 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;
 - (till) carrying out and/or dealing with my instructions or responding to any enquiries by mes
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to one, which could involve disclosure of certain personal data about me to tring 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, bandling and/or dealing with my define (collectively tile "Proposes")
- (b) all biguraps) who have insored vehicle(r) involved in this socident and the insurers' iswyers/law firms, naty/ere par not ted to collect, use, disclose and/or process my Personal information for one or more of the above Purposers and
- (c) my Parsonal Information may/can be disclosed by any of the insurers and/or GIA to shelr 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.
- (a) the information so collected under (d) above may be shared / disclosed:
 - (f) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law anforcement and government agencies as reasonably required for the purposes stated, or

(II) for complying with regularments 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.:

Sketch Plan #2

ETCH PLAN		V(5 b 2 a la N)
		Vehicle No
		A-GECTIOS
		B-313 635 4
	1/1/11/11/11/11/11/11/11/11/11/11/11/11	
	11 11 11 11 11 11 11 11	
		Legend
	HILL MITTHEFILE	
	IV C L I I I I I I I I I I I I I I I I I I	DA BA
		A A A
		Vehicle Bike
SCRIBE CIRCUMSTANCES (
9 was drive	+ along Newton circle	The S6 BUS SBS 63.14
		xt lane. I signal
was driving		
to how the	I I want to turn t	v Scotts Road
but the bu	s did not pre way	and drove baster
		and the bus i's
too long &	othe back swing as	nd hat my van
	,	0
ECLARATION	desired and the second second	
we declare the foregoing partice ease be advised that your inst	ulars are true in every respect. rer may have a 14 day clause whereby the claim a ate of occurrence. Kindly sheck your policy for mo	gainst own policy must be made within the
ipulated timeframe from the	ate of occurrence. Kindly sheck your policy for mo	re details.
AND WELL	the state of the s	
licyholder's Signature	Orivers Menature	Reporting Centre Personnel's Signature
ate & Time: ×	(If driver is not the policyholder)	Name:

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

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)

(REPUBLIC OF SINGAPORE)

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.: DMCPHQ17-002301

 Index Mark and Registration Number of Vehicles GBC1105K Form: LCVP1 Excess: Section 1

YEID-AC

SGD500.00
Additional SGD3,000.00

Name of Policyholder Nu-Hup Teck Pte Ltd

3. Effective Date of the Commencement of Insurance for the purpose of the Act 10/05/2017

4. Date of Expiry of Insurance 09/05/2018

5. Person or Classes of Persons entitled to drive*
Goods carrying - (MZ300) Authorised Driver. Any of the following

1. The Policyholder

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 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 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.

LQ BUSINESS PTE LTD

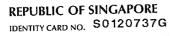
UEN NO. 201700648N 180B BENCOOLEN STREET #04-02, THE BENCOOLEN SINGAPORE 189648 Tel: 6333-4136 Fax: 6334-5238

misjb/HO/A000248/LQ Business Pte Ltd

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited

DRIVER IC/DL Pg. 1







KOR SOO BEE

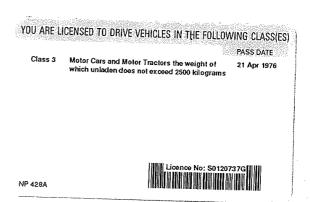
高 素 美 Race CHINESE

CHINESE
Date of Birth
06-12-1953

Country of Birth SINGAPORE









Accident Photo



Accident Photo







Accident Photo

