

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 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	05/06/2018 13:37
Date Of Accident	07/05/2018 07:40
Exact Location Of Accident	JUUORNG EAST CENTRAL SLIP RD TO BOON LAY WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP6021U
Insured/Policyholder	
Name Of Registered Owner	HAWK FORWARDERS PTE LTD
Co Reg No	198003306R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64753333

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER FEB71ER4SDEC
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
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	DMCHHQ18-000088
Cover Note Number	

Driver

Name of Driver	KAMIS BIN BUANG
NRIC No	S1563608D
Date Of Birth	13/09/1962
Occupation	OUTDOOR
Date Of Driving Pass	15/03/1984
Driving Experience	34 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97389250
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	283 CHOA CHU KANG AVE 3 #11-414
Postcode	680283
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?	NO
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.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : N/A GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

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	UNKNOWN
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

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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.
- (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.

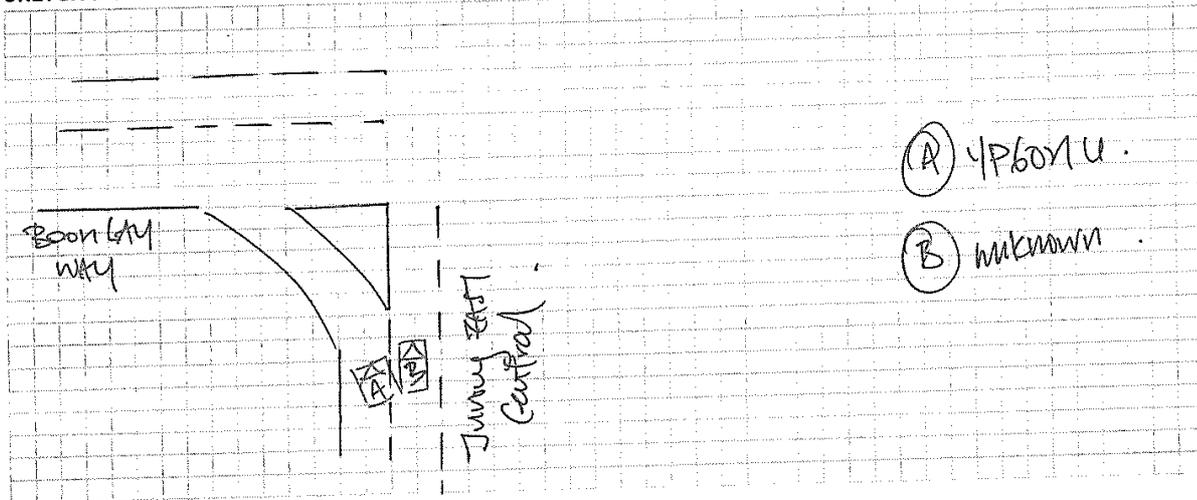
Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

I AM AWARE 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.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 07/05/18 @ around 07:00 hrs, I was travelling along Jurong East Central to Boon Lay way. When I reach near the slip rd to Boon Lay way I was not aware that I got involved in an accident on that time. But when I reach my company then I saw my rear right portion got some scratches.

DECLARATION

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

Claim own policy
 Claim third party
 Claim OD / TP at other works hop
 For record purpose
 Policy No. DMCHTR 18-000088
 Insurer ZW Veh.No. 4P607U

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.:

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 HIRE (SCH II)
 Comprehensive**

Certificate No. : DMCHHQ18-000088

Form: LCVT1
 Excess:
 All Claims: S\$2,000.00
 YEID-AC Additional: S\$3,000.00

1. Index Mark and Registration Number of Vehicles
 YP6021U

2. Name of Policyholder
 HAWK FORWARDERS PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act
 17/04/2018

4. Date of Expiry of Insurance
 16/04/2019

5. Person or Classes of persons entitled to drive*
 Goods Carrying - Hire Type (MZ301).
 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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. Limitation 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 racing, pace-making, reliability trial or speed-testing
- (2) Use whilst drawing a greater number of trailers in all that 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.

Hire Purchase : Mercedes-Benz Financial Services Singapore Ltd

A000423/Car Insurance Agency Pte Ltd
 Date of Issue : 29/03/2018 19:46

Authorised Signatory
 EQ Insurance Company Limited

Exp No. : DMCHHQ17-000095

REPUBLIC OF SINGAPORE
DRIVING LICENCE



KAMIS BIN BUANG

Birth Date: 13 Sep 1962
Issue Date: 14 Apr 2003

1000364068K

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1563608D



Name
KAMIS BIN BUANG

Race
BOYANESE

Date of birth
13-09-1962

Sex
M

Country/Place of birth
SINGAPORE



S1563608D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	17 Jun 1983
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	15 Mar 1984
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	14 May 1984

Licence No: S1563608D

5807836



NRIC No: S1563608D



Date of issue
30-09-2017

Address
APT BLK 283 CHOA CHU KANG AVENUE 3
#11-414
SINGAPORE 680283

Annex D



NOTICE OF COMPLIANCE

This is to confirm that KAMIS' BIN BUANG, S1563608D (Hp:97389250) has reported to the police a non-injury traffic accident which occurred along JURONG EAST CENTRAL TO BOON LAY WAY on 07/05/2018 at about 0740hrs involving his vehicle, YP6021U. The other vehicle involved is a SMRT BUS. No one was injured. No government property was damaged.

2 He / She have therefore complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Date: 07/05/2018
S/D Ref: 38

Name of Issuing Officer: Sgt Adrian Chia
Police Post/Unit: Jurong Police Div / Nanyang NPC

NANYANG NPC
2 JURONG WEST AVE
SINGAPORE 649482
TEL: 1800-7929999

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

