

12000001

ASE-PDC-FFV

REF:

CI/RQ118009124/NC

Special Instruction:

SA/VE/OT

ASSIGNMENT (Office)

From (Person): Joel Goh of EQ1 Date/Time: 12/4/2018

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: YL1675L Insured: \_\_\_\_\_

at Workshop m/s: \_\_\_\_\_ Tel: \_\_\_\_\_

of \_\_\_\_\_

Policy No: \_\_\_\_\_ Claim No: DM18H000977-J6

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 12/4/2018  
(Client's Record)

CA / REV / REP. / REV 24 HRS H.O.D. Endorsement: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN/OBT

Date/Time	Action/Instruction ( ) Estimate

18017

NEW INVESTIGATION: ACCIDENT INVOLVING YL1675L(OI), SKT7665A, SKJ4197G, SCL1570R AND SJM1748H ON 12/04/18 (DM18HO00977-JG)

BA Bryan Ang (LKKAuto) |  
Thu 10/4, 6:45 PM

Dear Naz

Please follow up and contact insured driver.

To also check whether is any mechanical issue with the insured vehicle.

Best Regards,

Bryan Ang  
LKK Auto Consultants Pte Ltd  
phone: 6266-3561 | email: [bryanang@lkkauto.com](mailto:bryanang@lkkauto.com) | fax: 6741-4108  
Blk 31, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

JG Joel Goh <[joel.goh@eqinsurance.com.sg](mailto:joel.goh@eqinsurance.com.sg)>  
Reply all |

Thu 10/4, 3:19 PM  
Investigation; Shu Pei (LKK)+4 more

SJM1748H.pdf 811 KB SKJ4197G.pdf 2 MB

Show all 5 attachments (10 MB) Download all

Dear LKK

Kindly assist to conduct investigation on the above accident.

Our insured collided into 4 parked vehicles.  
LKK has been assigned for PRS for 3 of the vehicles (SKJ4197G, SJM1748H and SKT7665A).

Kindly assist to investigate if there is any element of drink driving for this accident.

Best Regards,

Joel Goh  
Executive | Claims



EQ Insurance Company Limited  
5 Maxwell Road #17-00 Tower Block MND Complex, Singapore 069110  
did 65 6500 6772 | tel 65 6223 9433 ext 772 | fax 65 6223 4190  
[www.eqinsurance.com.sg](http://www.eqinsurance.com.sg)

A Member of Citicorp

Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender immediately and delete all copies of it.

## 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 willful 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	13/04/2018 10:26
Date Of Accident	12/04/2018 10:55
Exact Location Of Accident	TANJONG PAGAR DISTRI PARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YL1675L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DYNAMIX MARKETING PTE LTD
Co Reg No	199301022W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68484466 - Kenny / Denis

### Vehicle Particulars

Manufacturer	MITSUBISHI	9199 1426
Model	CANTER	
Exact Purpose for which vehicle was being used at time of accident	COMPANY 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	DCA 5th inspection - oil cap - plug - castle - oil filter
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT	
Fleet Policy	NO	
Policy Number	DMCPHQ18-000168	
Cover Note Number		

### Driver

Name of Driver	UTHAKUMAR S/O PURAICHAVEERAN
NRIC No	S1515216H
Date Of Birth	06/07/1961
Occupation	OUTDOOR
Date Of Driving Pass	08/01/1988
Driving Experience	30 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86471681
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address BLK 703 WOODLANDS DRIVE 40 #10-76  
 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 COLLIDED INTO PARKED VEHICLE  
 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) 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 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 SKT7665A  
 Vehicle Make/Model/Colour VOLVO  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver QUEK LILY  
 NRIC/Passport Number  
 Contact Number 96667871  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKJ4197G  
 Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR  
Name of Driver KWA LIP OON  
NRIC/Passport Number  
Contact Number 91143315  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number SCL1570R  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver NG WAI PING ELEANOR  
NRIC/Passport Number  
Contact Number 98461237  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number SJM1748H  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver TIANG TIAN SANG FRANCIS  
NRIC/Passport Number  
Contact Number 92729693  
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 Authorized 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.
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 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 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 :
  - (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.

**DYNAMIX MARKETING PTE LTD**  
 705 SIMS DRIVE #02-05  
 SHUN LI INDUSTRIAL COMPLEX  
 SINGAPORE 387384  
 TEL: 6348 4466 / 6348 4880  
 FAX: 6348 4882

Date & Time: 13 APR 2013

  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 13 APR 2013

  
 Reporting Centre Personnel's Signature  
 Name: Jenny Lim  
 NRIC/FIN No.: S6927273H

SKETCH PLAN



A - YL 1675L

- Car 1 - SKT 7665A
- Car 2 - SKJ 4197G
- Car 3 - SCL 1570R
- Car 4 - SSM 1748H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*please refer to accident statement attachment.*

DECLARATION

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

**DYNAMIX MARKETING PTE LTD**  
 705 SIMS DRIVE #02-05  
 SHUN LI INDUSTRIAL COMPLEX  
 SINGAPORE 387384  
 TEL: 6548 4486 / 6648 4860  
 FAX: 6548 4862

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

*[Signature]*  
 Reporting Centre Personnel's Signature  
 Name: **Jenny Lim**  
 NRIC/FIN No.: **S6927273H**

13 APR 2013

13 APR 2013

Accident Report Pg. 1

12 April 2018

I Uthukumar S/O Puraichaveeran I/C No 1515216H was driving my Mitsubishi truck YL1675L into the Tanjong Pagar Distripark warehouse. While negotiating the corner, my vehicle lost control and veer toward the right side of the road. There were many cars parked there.

My truck YL1675L ran straight onto the first car which is a White Volvo SKT 7665A,

Which is in turn hit the second a Toyota SKU4197G and then the third card Audi SCL1570R and the fourth car Honda SJM178H. There were no one in all the cars that were parked there. There were no personal injury of any sort to the public or drivers.

A photo of the accident is attached.

~~Uthukumar~~ 13/4/18

Uthukumar s/o Puraichaveeran

IC Nos 1515216H

MARKETING PTE LTD  
#02-05  
INDUSTRIAL COMPLEX  
387384  
4468 / 6848 4860  
4862

Page 1 of 6.

Driver's NRIC + Driving License Pg. 1

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Identity Card No. S1515216H



**UTHAKUMAR S/O  
PURAICHAVERAN**

Birth Date: 05 Jul 1961  
Valid Date: 19 Dec 2002

9000242181



**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. S1515216H



Name  
**UTHAKUMAR S/O  
PURAICHAVERAN**

Race  
**INDIAN**

Date of Birth: 05-07-1961 Sex: M

Country of Birth  
**SINGAPORE**




**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS**

CLASS DATE

Class 1B	MOTOR VEHICLES NOT EXCEEDING 1000 CC	19 Feb 1992
Class 2	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH EXCEEDS 1000 KG NOT EXCEEDING 2000 KG	06 Jun 1999
Class 3	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH EXCEEDS 2000 KG	11 Nov 2002

S/No. 9000242181

License No. S1515216H



**SINGAPORE**



NRIC No. S1515216H



Group: Date of Issue: 05-08-1991

NRIC No. S1515216H Date: 19-12-2002 No. 2012324

Certificate of Insurance Pg. 1

**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3907 | 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 )  
Third Party, Fire & Theft**

Certificate No.: DMCPhQ18-000168

Form: LCVP1  
Excess:  
ExcessTPWR-AllClaims SGD1,500.00  
YEID-AC Additional SGD3,000.00

1. Index Mark and Registration Number of Vehicles  
YL1675L
2. Name of Policyholder  
Dynamix Marketing Pte Ltd
3. Effective Date of the Commencement of Insurance for the purpose of the Act  
06/01/2018
4. Date of Expiry of Insurance  
05/01/2019
5. Person or Classes of Persons entitled to drive\*  
Goods carrying - (M2300) 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

*lee*

Authorised Signatory  
EQ Insurance Company Limited

nlsjb/HO/A000248/LQ Business Pte Ltd



A Member of Citystate

Accident Photo



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Accident Photo



Accident Photo

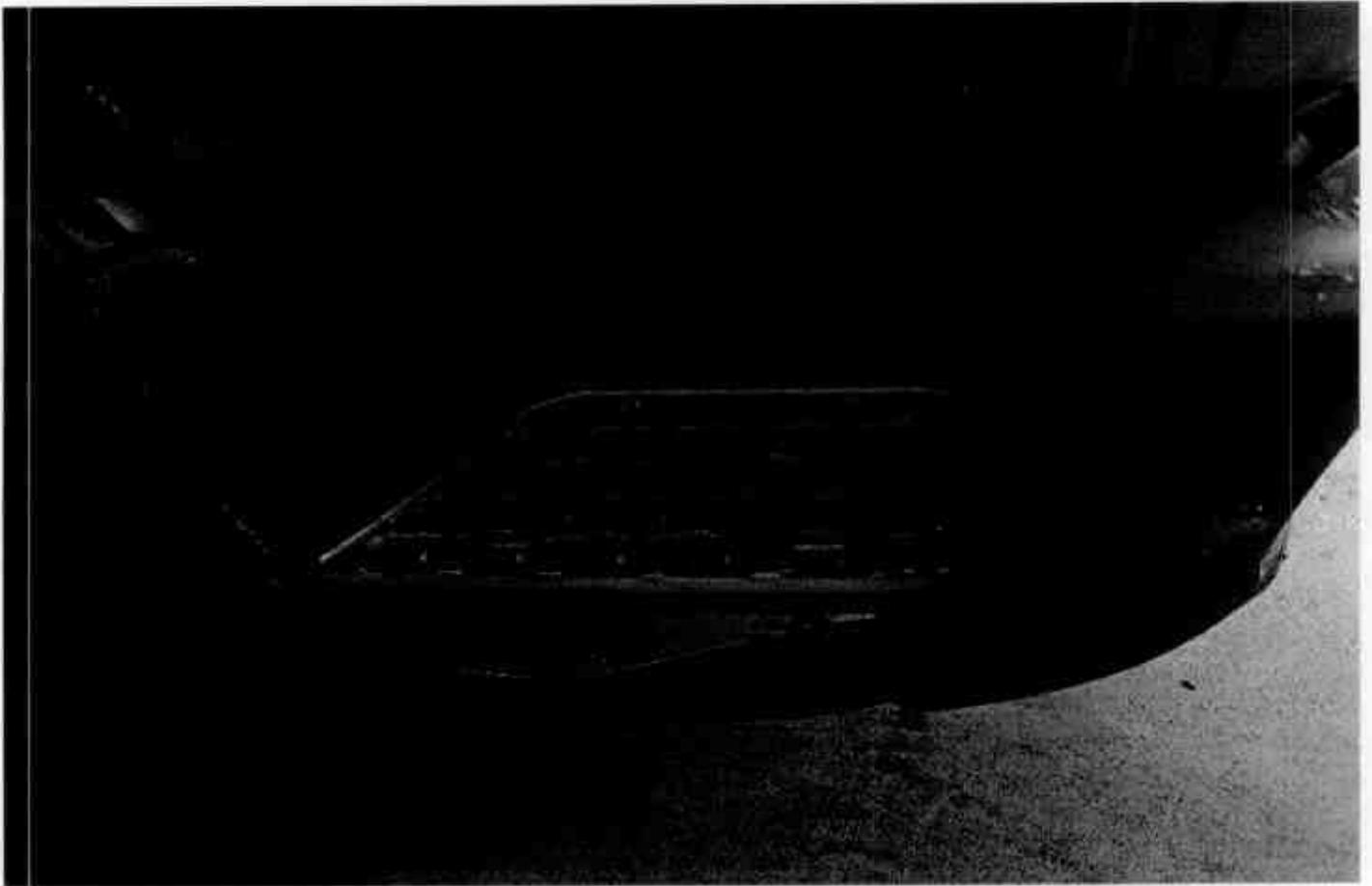


Accident Photo



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Accident Photo



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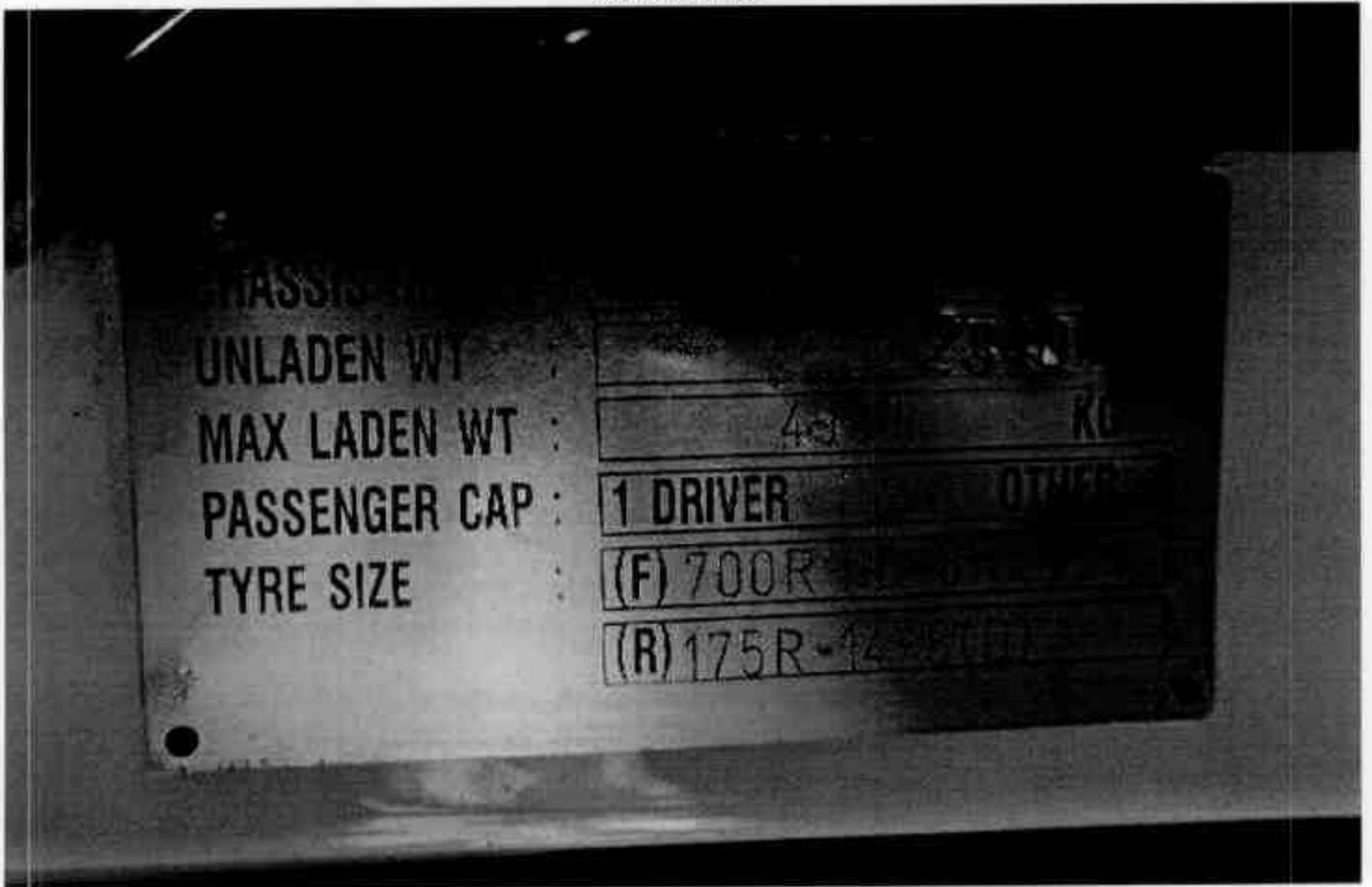
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Accident Photo



Accident Photo



Accident Scene Photo

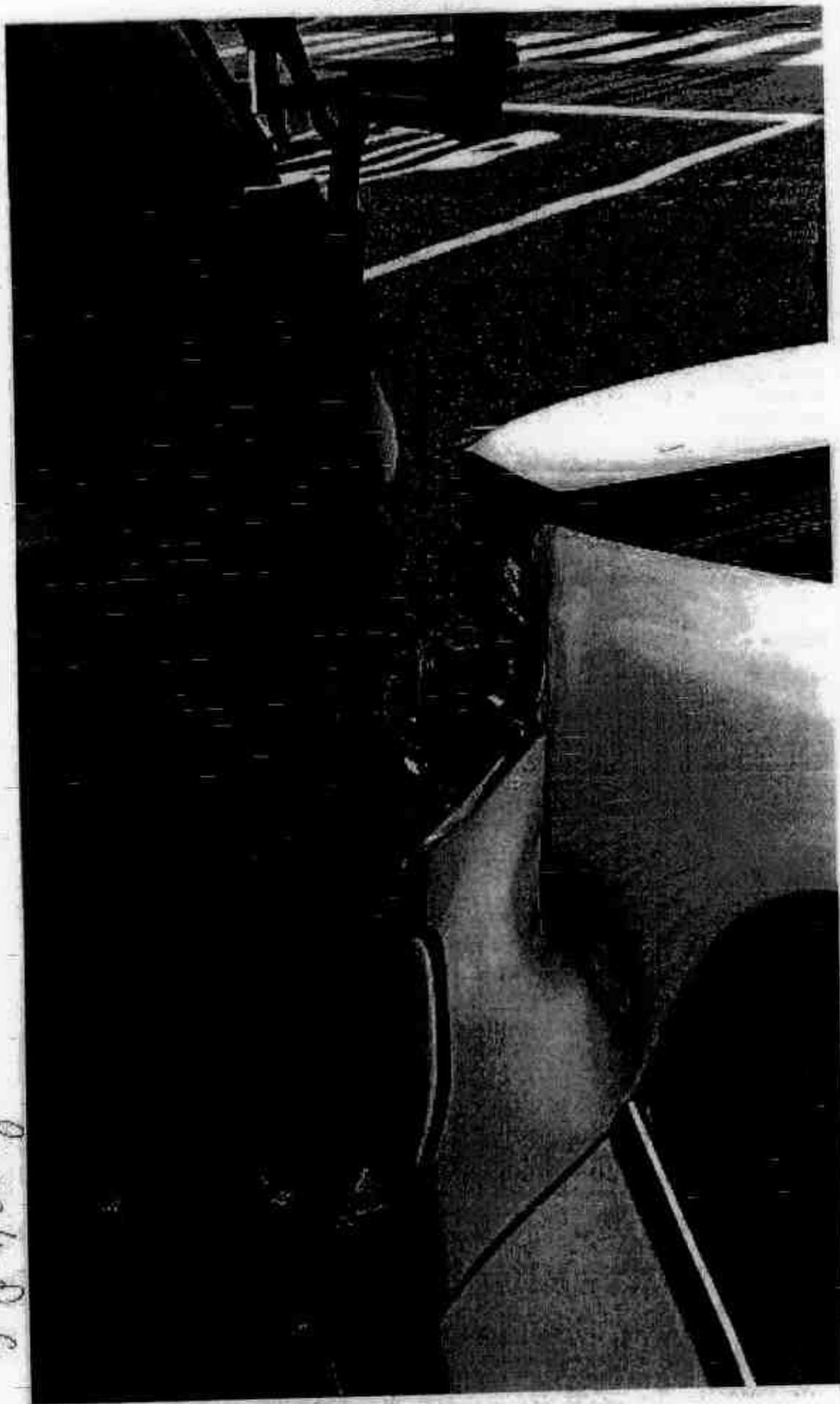


Accident Scene Photo



*[Faint, illegible text from a form, likely a police report or accident report, including fields for name, address, and contact information.]*

Accident Scene Photo



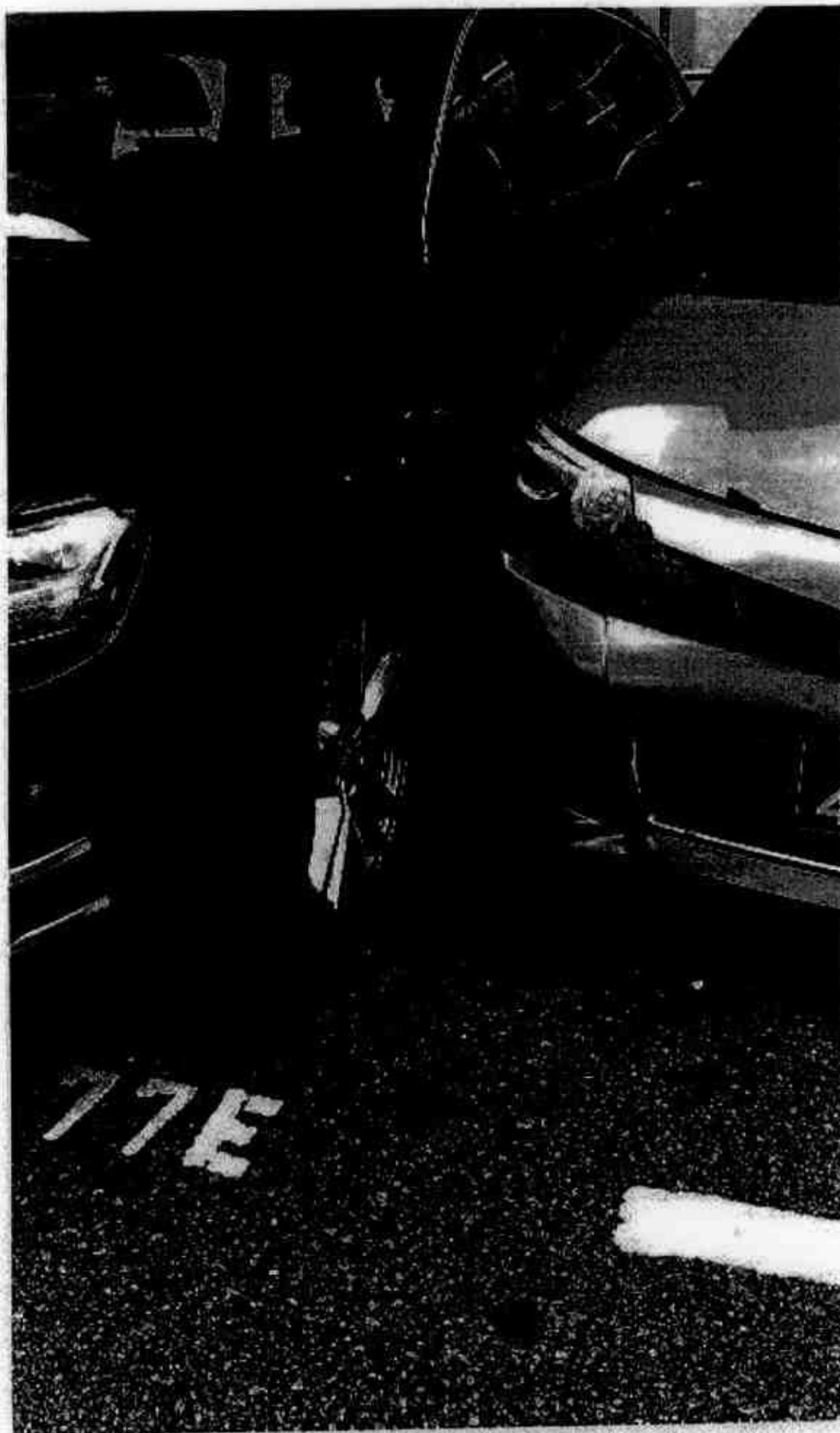
Page 4 of 6

Accident Scene Photo



Page 19 of 20

Accident Scene Photo



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