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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
 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 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

aloresaio.	A COLDENIT STATEMENT
	ACCIDENT STATEMENT
Date Of Report	25/05/2018 13:42
Date Of Accident	24/05/2018 13:25
Exact Location Of Accident	KPE TOWARDS TAMPINES ROAD
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YL7223T
Insured/Policyholder	
Name Of Registered Owner	PTC DELIVERY2HOME PTE LTD
Co Reg No	200514860M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96411596
Alternative Phone No	OFFICE-91440849
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FE639ETOSRDE
Exact Purpose for which vehicle was being used at time of accident	WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5073659690-02
Cover Note Number	

Driver

Name of Driver	MANI ANANDHA KUMAR
Passport No/FIN	G5178054Q
Date Of Birth	11/10/1984
Occupation	OUTDOOR
Date Of Driving Pass	09/05/2012
Driving Experience	6 VEADS AND A MONTHS

Driving Experience 6 YEARS AND 0 MONTHS

MALE Gender

Mobile Number (LOCAL) +65-96411596

Fax Number

OTHERS-96411596 Contact Number

NOEMAIL EMail Address

Address

PTC DELIVERY2HOME PTE LTD

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
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

NO

1

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)

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?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLA273G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver LEE HONG CHUANG

NRIC/Passport Number S7013194C Contact Number 96359653

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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")
- (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

In that

(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.:

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 .:

S PASS

Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore

Employer PTC DELIVERY2HOME PTE, LTD.

Sector SERVICE



MANI ANANDHA KUMAR

OPERATIONS SUPERVISOR

0 35393528

Date of Application 03-08-2017

19-09-2017

19-09-2019

L8322982

VISIT PASS Immigration Regulations

MANI ANANDHA KUMAR



Date of Birth Sex

11-10-1984 M

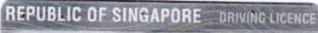
INDIAN Date of Issue Date of Expiry

G5178054Q 19-09-2017 19-09-2019

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.







G5178054Q

MAN! ANANDHA KUMAR

Bren Date: 11 Oct 1984 Haire Cale: 25 Apr 2017

Valid Till 08/05/2022

002678415C

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

EFFECTIVE DATE

09 May 2012 09 May 2012

Class 4

Motorcycles =< 200 cc
Motor cars with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg
Motor vehicles which are constructed to carry load
or passengers and the unladen weight > 2500kg
Motor vehicles which are not constructed to carry
load or passengers and the unladen weight =< 7250kg

NP 428A



Certificate of Insurance

MOTOR VEHICLES (THIRD PA	' (MALAYSIA) RTY RISKS) RULES, 1959 (MALA	AYSIA)
Certificate Number: 507365	9690-02	Cover : Third Party
 Index mark and Registrati 	on Number of Vehicle	: YL7223T
Chassis Number		: FE639EA45858
2. Name of Policyholder		: PTC DELIVERY2HOME PTE LTD
3. Effective Date of Insurance	e	: 01 Oct 2017
1. Expiry Date of Insurance		: 30 Sep 2018
. Persons or Classes of Pers	ons entitled to drive#	The supplied and the supplied to the supplied
(a) The Policyholder.		
(b) Any other person wh	o is driving on the Policyholde	r's order or with his/her permission.
Provided that the per the Motor Vehicle or	son driving is permitted in acc	cordance with the licensing or other laws or regulations to drive not disqualified by order of a Court of Law or by reason of any
6. Limitations as to Use#		
(a) Use for social domest	ic and pleasure purposes and	in connection with the Policyholder's business or profession.
(b) Use for the carriage of	of passengers or goods in conn	ection with the Policyholder's business.
This Policy does not cover		
(a) Use for hire or reward	d.	
(b) Use for racing page.	making, reliability trial or speed	
(a) ose to racing, pace-	naxing, renability trial of speed	d-testing.
(c) Use whilst drawing a # Limitations rendered	trailer except the towing of an inoperative by Section 8 of the	d-testing. ny one disabled mechanically propelled vehicle. e Motor Vehicle (Third Party Risks and Compensation) port Act, 1987 (Malaysia), are not to be included under these
(c) Use whilst drawing a # Limitations rendered Act (Chapter 189) and headings.	trailer except the towing of an inoperative by Section 8 of the	e Motor Vehicle (Third Party Risks and Compensation)
(c) Use whilst drawing a # Limitations rendered Act (Chapter 189) and headings. EXCESS (SECTION 1)	trailer except the towing of an inoperative by Section 8 of the I Section 95 of the Road Trans	e Motor Vehicle (Third Party Risks and Compensation)
(c) Use whilst drawing a # Limitations rendered Act (Chapter 189) and headings. EXCESS (SECTION 1) EXCESS (SECTION 2)	trailer except the towing of an inoperative by Section 8 of the Section 95 of the Road Trans : N/A	e Motor Vehicle (Third Party Risks and Compensation)
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(c) Use whilst drawing a # Limitations rendered Act (Chapter 189) and headings. EXCESS (SECTION 1) EXCESS (SECTION 2) NSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED	trailer except the towing of an inoperative by Section 8 of the Section 95 of the Road Trans : N/A : N/A : N/A : MAYBANK : N/A	ny one disabled mechanically propelled vehicle. e Motor Vehicle (Third Party Risks and Compensation) port Act, 1987 (Malaysia), are not to be included under these
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eBaoTech GeneralClaim Hello, NAC_PAYA_UBI_800601 · Change Language · Change Password Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 24/05/2018 13:25 Vehicle No.(For Motor) YL7223T Search Policyholder Name Policyholder NRIC Insured Object Select Vehicle Policy No. Commence Date Product Cover Type Expiry Date No. 5073659690- DELIVERY2HOME 02 PTE LTD 200514860M GFT Third Party YL7223T YL7223T 01/10/2017 Continue

Policy Information

Policy No.	5073659690-02	Policyholder Name	PTC DELIVERY2HOME PT	E LTD Policyholder	200514860M
Address	48 PANDAN ROAD SINGAPO	RE 609289			
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	25/09/2017	Effective Date	01/10/2017 00:00	Expiry Date	30/09/2018 23:59
Third Party Excess	0.00	Own damage Excess	0.00	Windscreen Excess	0.00
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	ACORN INTERNATIONAL NE	TWC Agent Tel.	65926503	GST Flag	Y
Co- nsurance Flag	No				
Open Policy Info					
Certificate nfo					
	older Mailing Address				
Address 1	48 PANDAN ROAD	Address 2	SINGAPORE 609289	Address 3	
Address 4		Address	Singapore address	Post Code	609289
		Type			
Jnit No.		Related Policy Number	5073667601-02		
	d Object: YL7223T	Related Policy	5073667601-02		
▶ Insured		Related Policy	5073667601-02		
	ements Date of	Related Policy	Endorromont	Endorsement Status	Endorsement Content

Claim Handling

Accident MT/0995941					
Policy No.	5073659690-02	Vehicle No.	YL7223T	GST Registration No.	2
Policyholder Name	PTC DELIVERYZHOME PTE LTD		The reserve	Policyholder NRIC	
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading	912
Contact No.(Mobile)	96411596	Contact No.(Office)	0	Contact No.(Home)	100
Email Address		Special Remark	5.860		0
KFK.	= No Yes	TCA	= No Yes	eCode	1
NCD Protection	No	NCD Entitlement(%)		eCode Reason	
Accident Details	Site Site	NCD Entitlement(%)	0	Private Hire	N
Report Date	25/05/2018 17:06	Accident Report Within 24 hrs	Yes	Accident Type	-
Date of Accident	24/05/2018	Time of Accident hh:mm			C
Reporting Centre) T-1000E000EEE00	Orange Force	13:25	Country of Accident	S
Accident Location	KPE TOWARDS TAMPINES ROAD	orange roice		ICM No.	
▽ Benefits					
▽ Excess					
Own damage Excess	0.00	Additional Excess			
Unnamed Driver Excess	0.00			Windscreen Excess	0.
Third Party Excess	1202	Outside Singapore OD Excess			
	0.00	Outside Singapore TP Excess			
GST Registration No.	Yes		GST Registration Date	09/02/2015	
Modification History	200514860M		GST Status Verified	Yes	
Troumeacon majory					
	ldress				
Address 1	48 PANDAN ROAD	Address 2	SINGAPORE 609289	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5073667601-02	rost code	.50
			30.300102		
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	MANI ANANDHA KUMAR	Driver NRIC	G5178054Q	Daise DOD	
Register Date of Driver License		Driver Age	33	Driver DOB	11
Contact No.(Mobile)	96411596	Contact No.(Office)	0	Driving Experience	6
Address 1	PTC DELIVERYZHOME PTE LTD	Address 2		Contact No.(Home)	.0
Address 4	110000000000000000000000000000000000000	Address Type	W	Address 3	
Unit No.		Address Type	Singapore address	Post Code	
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.		Driver Insurer Company	
Reclaration Breathalyser or Blood Test	THE ACTION	(a, b, a, a) (a) (a) (a)			
Reading?	0 mg	Any injury?	Yes • No		
fodification History					
Claim 001 OD-MX New	.b				
Claim 001 OD-MX New					
W 100 W 100 U	Phononical	07 0/8X			
Claim Type *	OD-MX T	Insured Name	PTC DELIVERY2HOME PTE LTD	Insured NRIC	200
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)	+
mail Address		OI Vehicle Number	YL7223T	TP Vehicle Number	+ SL/
Claim Description	YL7223T / SLA273G ON 24 May 2018			Name of Preferred Workshop	F
referred Workshop Contact lo.		Insured Liability *	Not at Fault ▼		
tequire Finalisation	Yes ▼	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	n-
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Accident No. Last Doc. Received

MT/0995941 • Yes No

Claim No.

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25/05/2018 17:15

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Photos 20	Normal	Photos	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 May 2018 17:16	
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