

## 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	07/07/2018 13:34
Date Of Accident	06/07/2018 22:30
Exact Location Of Accident	JUNCTION OF BOON LAY WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB2694A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SEK LOONG PLUMBING PTE LTD
Co Reg No	200103993H
Email Address	INFO@SEKLOONG.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62623382

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCV17S019868
Cover Note Number	05/11/2017 TO 04/11/2018

### Driver

Name of Driver	RAJANGAM MOHAN
NRIC No	G8218263U
Date Of Birth	20/04/1987
Occupation	OUTDOOR
Date Of Driving Pass	21/05/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96968477
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	31 BUKIT BATOK CRESCENT #01-49 THE SPLENDOUR (S) 658070
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?	
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: : ELAYARAJA GENDER: : MALE

#### 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 with attach.

#### 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	SKU555A
Vehicle Make/Model/Colour	
Details Of Properties	
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)	

## Accident Sketch Plan Pg. 1

### SKETCH PLAN

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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.



Policyholder's Signature  
Date & Time:

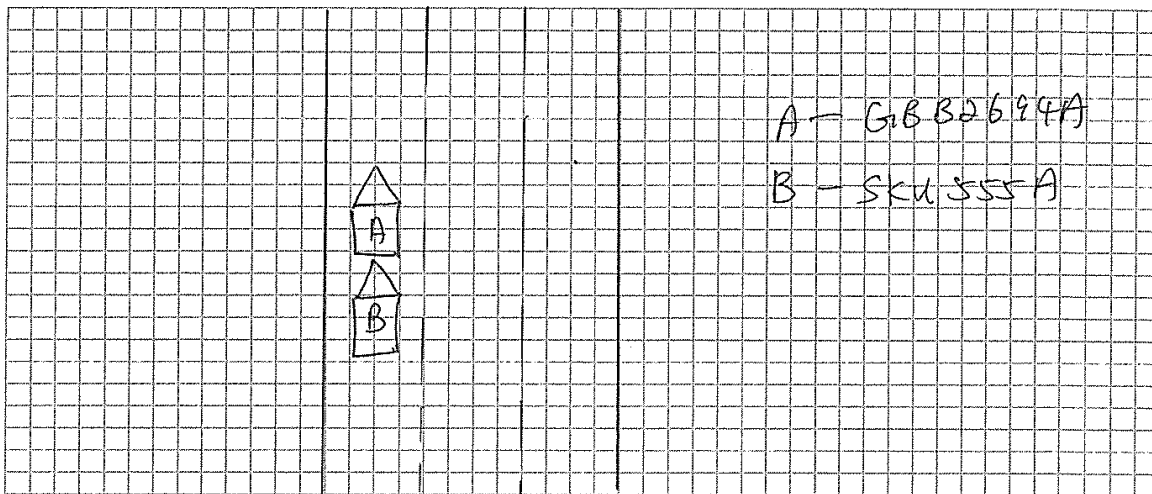
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature  
Name:   
NRIC/FIN No.: 7/7/2018

# Accident Sketch Plan Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 6/7/18 at 10.30pm, I was driving my vehicle A along Boon Lay Way. I stop at the junction and wait for traffic light to turn green, suddenly vehicle B hit on my rear portion

Insurance Co.	Ersu Insurance
Vehicle No.	GBB2694A
Date of Acc.	6/7/2018
<input type="checkbox"/> Reporting Only	
<input type="checkbox"/> Own Damage Claim	
<input checked="" type="checkbox"/> Third Party Claim	
<input type="checkbox"/> Other Workshop	

## DECLARATION

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

Policyholder's Signature  
Date & Time:

GI/ARMC SketchPlanForm\_V3

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

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

driver's work permit & license Pg. 1

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

Employer:  
**SEK LOONG PLUMBING PTE LTD**

Sector: **CONSTRUCTION**

Name:  
**RAJANGAM MOHAN**

Occupation:  
**CONSTRUCTION WORKER**


Work Permit No:  
**0 34194998**

Date of Application:  
**13-01-2015**

Date of Issue:  
**27-12-2016**

Date of Expiry:  
**26-12-2018**

**L7503620**



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

License Number: **G8218263U**


Name:  
**RAJANGAM MOHAN**

Birth Date: **20 Apr 1987**

Issue Date: **02 Sep 2016**

Valid Till: **01/09/2021**

**002605516F**



**VISIT PASS**  
Immigration Regulations


Name:  
**RAJANGAM MOHAN**

Date of Birth: **20-04-1987** Sex: **M** Nationality: **INDIAN**

PIN: **G8218263U** Date of Issue: **27-12-2016** Date of Expiry: **26-12-2018**

**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.



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


		EFFECTIVE DATE
C	Class 2B	Motorcycles <= 300 CC
C	Class 3	Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg
		02 Sep 2016
		21 May 2018

**G8218263U**

**S / No.9000314589**

**NP 428A**

**License No:G8218263U**



FROM: FU YIAP: 67783391 TO: Sek Loong PL 2017/10/10 14:05:39 #568 P.001/001

**ERGO**

CERTIFICATE OF INSURANCE  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

F512  
#1602.00

CERTIFICATE NO. DMCV17S019868	C17070591
Type of CI: Commercial Vehicle	
Cover: Comprehensive	A000609 LQ BUSINESS PTE. LTD
1) Registration No. of Vehicle:	GBB2694A
2) Name of Policyholder:	SEK LOONG PLUMBING PTE LTD
3) Commencement Date of Insurance:	05/11/2017
4) Expiry Date of Insurance:	04/11/2018
5) Persons or Classes of Persons entitled to drive	
1) Any person who is driving on the Policyholder's order or permission	
Excess (Section 1) : S\$700.00	
Windscreen - Below 10 tons : S\$100.00	
Windscreen - 10 tons & above : S\$200.00	
Young & Inexp Drivers(Section 1) : S\$2,500.00	
6) Name of Finance Company/Hire Purchase Owner: HONG LEONG FINANCE LIMITED	
7) 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 so 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 and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.	
8) Limitations as to Use	
(1) Use in connection with the Policyholder's business	
(2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business	
(3) Use for social domestic and pleasure purposes	
This Policy does not cover	
(1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing	
(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle	
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 (for Items 7 & 8).	

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).

Counter-signed by  
LQ BUSINESS PTE. LTD

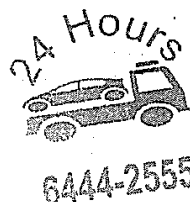
**LQ BUSINESS PTE LTD**

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

For and on behalf of  
ERGO Insurance Pte. Ltd.

  
AUTHORIZED SIGNATURE

A000609/09/10/2017 10:53:47



Accident Photo





Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

