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.

	ACCIDENT STATEMENT
Date Of Report	01/09/2018 10:00
Date Of Accident	31/08/2018 15:20
Exact Location Of Accident	21 CHANGI NORTH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number YK2077L

Insured/Policyholder

Name Of Registered Owner PETER'S ENVIRONMENTAL PRODUCTS & SERVICES PTE LTD

Co Reg No 199204312N

Email Address SALES@PETERS.SG

Mobile Phone No

Alternative Phone No OFFICE-85718272 / 98180779

Vehicle Particulars

Manufacturer HINO

Model XZU710R-HKFMS3-4.0 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 QBE INSURANCE (SINGAPORE) PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 8-V0016213-MVA

Cover Note Number

Driver

Name of Driver KALIYAMOORTHY EZHILARASAN

NRIC No G6610753T

Date Of Birth 10/12/1986

Occupation OUTDOOR

Date Of Driving Pass 18/07/2014

Driving Experience 4 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-85718272

Fax Number

Contact Number

EMail Address EZHIL-DME@YAHOO.CO.IN

Address

BLK 197B BOON LAY DRIVE #17-97

Postcode

640197

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

LIGHT RAINS

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

NO

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

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 STATEMENT

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

YP5372M

Vehicle Make/Model/Colour

FUSO

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

QUEK SIOW KIAK

NRIC/Passport Number

S1761674I 90275330

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IN-IPORTANT NOTICE

- 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 withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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.
- 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)

l understand, acknowledge, agree and consent that:

- 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)
 - 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
- 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.
- 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. Peter's Environmental Products & Services Pte Ltd

2 Buroh Crescent #03-18 Ace@Buroh Singapore 627546 Tel: 6863-3060 Fax: 6863-2576 Website: www.peters.sq

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder) Date & Time: 1/9/18 - 10AM . Reporting Centre Personnel's Signature

NRIC/FIN No.:

SBKETCH PLAN					
	YP 5372H				
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Peter's Environmental Produc	ts & Services Pte Ltd				
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Website: www.peters.sg				1/1	
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licyholder's Signature	Driver's Signature	e 1 10 mm.		Centre Personnel's Signature	9
ite & Time:	(if driver is not th Date & Time:	ie policyholder)	Name: NRIC/FIN		



2 Buroh Crescent #03-18 ACE@BUROH Singopore 627546 Co. Rog: 199204312H GST 19-9204312-H

Phone: 65-6863-3060 Fex: 65-6863-2576 Email: soles@peters.sg Web: www.peters.sg

biSATE.

31 Aug 2018

COMFORTDELGRO ENGINEERING PTE LTD 205 Braddell Road Singapore 579701

TO WHOM IT MAY CONCERN

LETTER OF AUTHORIZATION TO LODGE A GIA REPORT

We hereby authorize our staff, Mr KALIYAMOORTHY EZHILARASAN

S Pass No ___ 0 34864187

to have lodge a GIA report at your workshop for our company vehicle no YK 2077 L

Should you have any clarifications, you can contact Ms Patsy Leong, Finance Manager at 98180779 or Mr Lawrence Sng, Director at 98173512.

Best Regards

Peter's Environmental Products & Services Pte Ltd



S PASS

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

Employer
PETER'S ENVIRONMENTAL PRODUCTS & SERVICES PTE LTD

Sector: MANUFACTURING Name



KALIYAMOORTHY EZHILARASAN Occupation LOGISTICS SUPERVISOR

S Pass No. O 34864187

dii b

Date of Application 20-01-2017 Date of Issue 08-02-2017 Date of Expiry 25-05-2019



L7619558

VISIT PASS Immigration Regulations

Name

KALIYAMOORTHY EZHILARASAN



Date of Birth 10-12-1986 М FIN Date of Issue

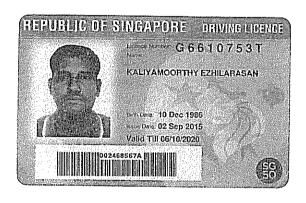
Nationality INDIAN Date of Expiry 25-05-2019

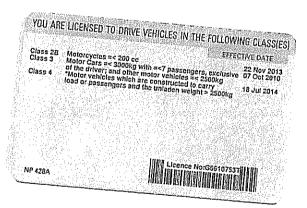
MULTIPLE JOURNEY VISA ISSUED

G6610753T 08-02-2017

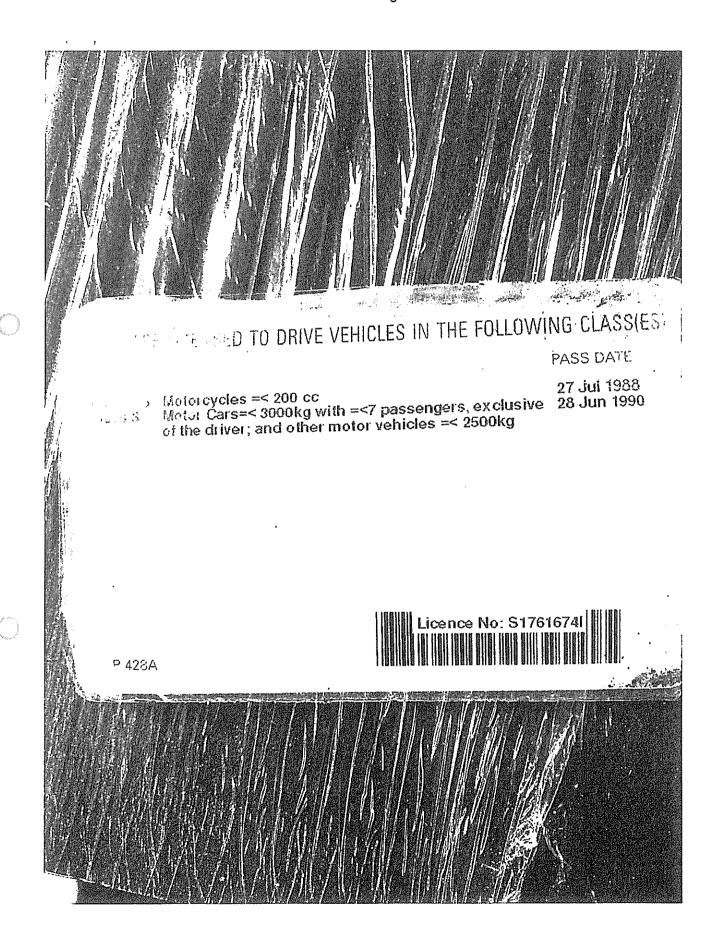
YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.











Sketch Plan Pg. 8





QBE Insurance (Singapore) Pte Ltd

Amember of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583 Tel: 65-6224 6633 Fax: 65-6533 3270 GST Registration No.: M200644018 vvvv. qbe com sg QBE

Page 1 of 2

Date of Issue 13/10/2017

COMMERCIAL VEHICLE

POLICY SCHEDULE

New Business

PETER'S ENVIRONMENTAL PRODUCTS & SERVICES PTE LTD 2 BUROH CRESCENT #03-18, ACE@BUROH SINGAPORE 627546

Policy Number 8-V0016213-MVA Period of Insurance 15/11/2017 to 14/11/2018

(Both Dates Inclusive)

Account Number

05L00003

SIMANG SERVICES PRIVATE LIMITED

This policy is issued/renewed from information you have disclosed. If there are any material changes during the period of this cover, please inform us.

The insured:

PETER'S ENVIRONMENTAL PRODUCTS & SERVICES PTE LTD

Risk Details

Commercial Vehicle

Risk No 0001

Sum Insured Market Value
Make & Model HiNO XZU710R-HKFMS3

rket Value Registration No. -HKFMS3 Comprehensive YK2077L

Type of Body Year of Manufacture Lorry 2016

1.77

Chassis No. Engine No. JHHUCS3H60K018316

N04CUS29020

Tonnage

1,000

1,500

Excess

Authorised Employee Authorised Driver

Additional Benefits
THIRD PARTY WORKING RISKS

SGD

Limit in SGD

Other Information

VEHICLE ATTACHMENT: WITH POWER TALBOARD

EXCESS: S\$1,000.00 IN RESPECT OF CLAIMS ARISING OUT OF TPWR

M2 EXCESS OWN DAMAGE CLAIMS (NOT APPLICABLE TO YOUNG AND INEXPERIENCED DRIVER EXCESS) EZ93A YOUNG AND INEXPERIENCED DRIVER EXCESS - ALL CLAIMS (EXCESS : \$\$3,500.00)

M15 HIRE PURCHASE
M41 INCLUSION OF THIRD PARTY WORKING RISK WHERE TOOL OF TRADE IS USED ONLY FOR WORK
PERFORMED IN OR UPON THE MOTOR VEHICLE OR TRAILER

Clauses Applicable

EJ96 NON-CANCELLATION CLAUSE

THE INSURANCE COMPANY UNDERTAKES TO ADVISE THE INTERESTED PARTY MENTIONED IN THE SCHEDULE PRIOR TO THE CANCELLATION OF THE POLICY IF INSTRUCTIONS HAVE BEEN RECEIVED FOR THE CANCELLATION OF THE POLICY AND ALSO TO ADVISE THE INTERESTED PARTY MENTIONED IN THE SCHEDULE AS SOON AS

SGPROG

Policy Number 8-V0016213-MVA Page 2 of 2



Date of Issue 13/10/2017

POSSIBLE OF ANY OTHER MATERIAL CHANGES WHICH ARE PROPOSED TO BE MADE IN THE TERMS OF THE

SUBJECT OTHERWISE TO THE TERMS, CONDITIONS AND EXCLUSIONS OF THIS POLICY.

Interested Parties MALAYAN BANKING BERHAD

Signed for and on behalf of the company

Authorised Signature

QBE Insurance (Singapore) Pte Ltd

Premium (SGD) GST @ 7.00 %

2,881.63 Total Due SGD

201.71

3,083.34

SGPROG