

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 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. 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	19/01/2019 13:56
Date Of Accident	19/01/2019 04:00
Exact Location Of Accident	SIMS AVENUE YELLOW BOX
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB6548H
Insured/Policyholder	
Name Of Registered Owner	SM LAUNDRY & LINEN PTE LTD
Co Reg No	199504226G
Email Address	ENQUIRY@SMLAUNDRY.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62414333

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FB70BB1SRDEA-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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	KOH AH GUAN
NRIC No	S0088202Z
Date Of Birth	03/10/1952
Occupation	OUTDOOR
Date Of Driving Pass	14/06/1978
Driving Experience	40 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91800474
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 769 BEDOK RESERVIOR VIEW #13-205
Postcode	470769
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 (including own vehicle) involved in the accident	2
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 THE ATTACHED COPY

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	
Vehicle Make/Model/Colour	TOYOTA SMRT TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

PCV Accident Report

(For Reporting only)



☐ Braddell
 ☐ Sin Ming
 ☐ Sg. Kadut
 ☐ Pandan
 ☐ Loyang
 ☐ Ubi

Section A - To Be Completed By Driver Who Is Involved in The Accident

Date & Time of Accident: Date: 19/01/19 Time: 6400 hrs
 Date & Time of Reporting: Date: 19/01/19 Time: 1215 hrs
 Place of Accident: SIMS AVENUE YELLOW BOX
 Vehicle Reg. No.: GBB 6584 H Make / Model:
 Purpose of Use at Time of Accident: Goods transportation / private usage / others:
 Name: KOH AH GUAN NRIC / FIN No. S 0088202 / 2
 Address: BLK 769, Bedok Reservoir View #13-205
 Postcode: 470769 Date Of Birth: 03/10/1952
 Home: Handphone: 91800474
 Email: george.kwok@sm laundry.com.sg Gender: ☒ Male / Female
 Occupation: Management / Sales / Retiree / Housewife / Technical / Education / Others: DRIVER
 Type of Claims: Third Party / Own Damage / Reporting Only
 Licence Pass Date: 14/06/1978
 Driver Status: ☒ Owner / Non-owner Years of Driving Experience: 14

If you are not the owner, the owner's name & tel: SM LAUNDRY & LINEN PTE LTD
 Owner's Address: 7, 9, Loyang Walk, SA (508790) (6241-4333)
 Relationship with Owner: EMPLOYEE Owner's NRIC / Company Reg. No.: 199504226 / 6

Vehicle Towed In? Yes / ☒ No My Insurance Company: EQ
 Police Reported? Yes / ☒ No Police Report Reference No.:
 Company's Vehicle? ☒ Yes / No Insurance Policy No.:
 Do you have witness? Yes / ☒ No Type of Policy: ☒ Comprehensive / Third Party Fire & Theft / Third Party Only
 (If Yes, Witness Name & Contact No.:

Weather Condition: ☒ Clear / Cloudy / Light Rains / Heavy Rains
 Road Condition: ☒ Dry / Wet Was anyone injured in the accident? Yes / ☒ No
 Other vehicle or property damage? ☒ Yes / No Was Notice of Intended Prosecution given? Yes / ☒ No

Describe How Accident Happened: Please use **SKETCH PLAN** for accident description & sketch of accident scene

Third Party's Details (Use Annex 2 for Chain Collision as attachment)

Vehicle Make / Model: TOYOTA (SMART) Vehicle Reg. No.: SHB 708 L
 Name of Driver: NRIC No.:
 Insurance Company: Handphone:

Driver's Declaration: I declare that the information given in this report are true and correct and I undertake to assume full responsibilities for all consequences should any part given above be untrue.

Signature

Date

19/1/19.

SKETCH PLAN

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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.
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.



Policyholder's Signature / Date & Time

9/1 19/1/19
Driver's Signature (If driver is not the policyholder) / Date & Time



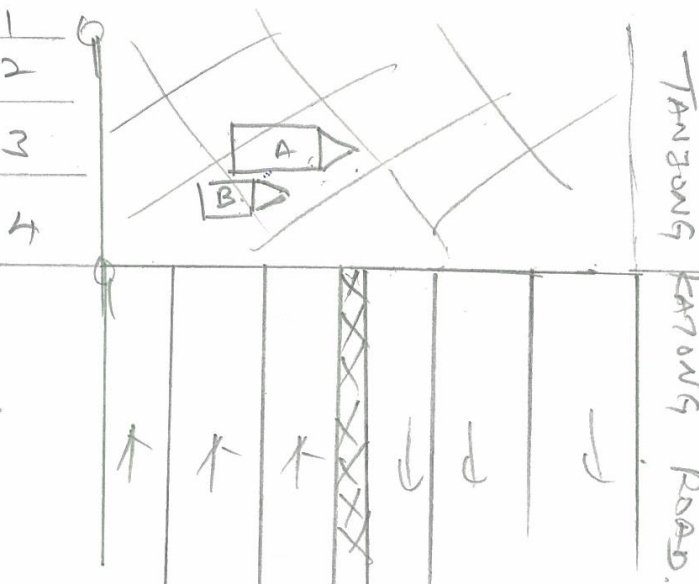
Witnessed by Reporting Centre Personnel

Sketch Plan

SING AVE

A - SRB 6584 H

B - SHB 708 L



Sketch Plan Pg. 3

Describe Circumstances of the Accident

On 19/01/19 at 0400 hrs, I
was driving along Sims Avenue turning
to Tanjong Katong Road.
I saw a taxi (STR 708 L)
driving very near my lorry (SRB 6584H).
I quickly brake to stop.
The taxi hit onto R.H.S of lorry
(centre portion).

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

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

19/1/19



Witnessed by Reporting Centre
Personnel

Sketch Plan Pg. 4

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 PRIVATE (SCH I) Comprehensive

Certificate No. : DMCPHQ18-006959

1. Index Mark and Registration Number of Vehicles

GBB6584H

2. Name of Policyholder

SM LAUNDRY & LINEN PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act

15/10/2018

4. Date of Expiry of Insurance

14/10/2019

5. Person or Classes of persons entitled to drive*

Goods carrying - (MZ300) 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 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 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.

Hire Purchase : Mercedes-Benz Financial Services Singapore Ltd

ABWIN PTE LTD
8 KAKI BUKIT ROAD 2
RUBY WAREHOUSE COMPLEX
#01-33 SINGAPORE 417841

A000342/Abwin Pte Ltd

Date of Issue : 12/10/2018 14:05

Form: LCVP1
Excess:
Section 1: S\$500.00
ExcessTPWR-AllClaims: S\$1,500.00
YEID-AC Additional: S\$3,000.00

EQ Insurance-MARS Motor
Accident Help Center

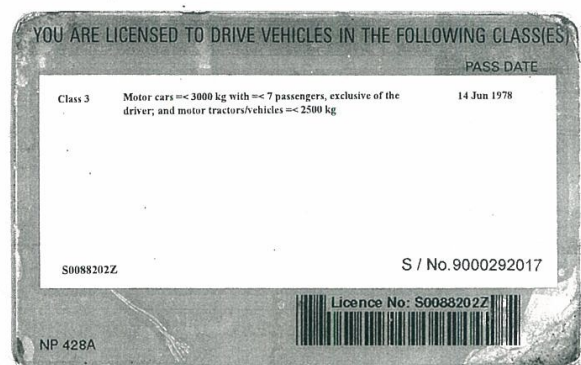
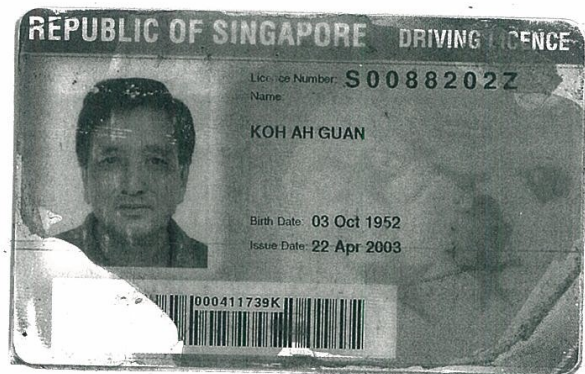
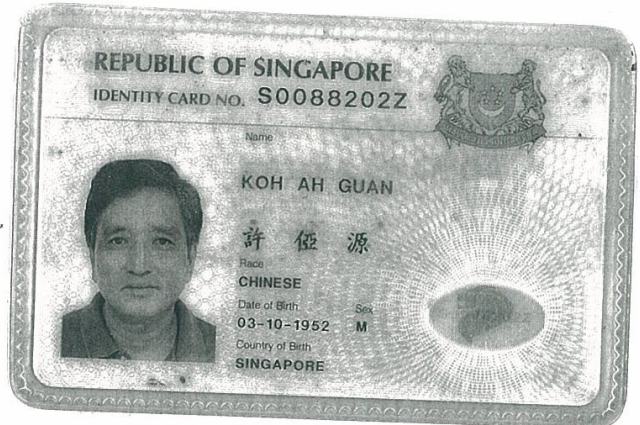
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Authorised Signatory
EQ Insurance Company Limited

Exp No. : DMCPHQ17-005745

A Member of Citystate



Sketch Plan Pg. 6

1/19/2019

Transfer Fee Enquiry

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details

Vehicle No.:	GBB6584H
Vehicle Type:	A50 - Goods (Closed) Van/Van Panel (Delivery)
Vehicle Attachment 1:	With Power Tailgate
Vehicle Scheme:	Normal
Vehicle Make:	MITSUBISHI
Vehicle Model:	FB70BB1SRDEA
Chassis No.:	FB70BBA20078
Propellant:	Diesel
Engine No.:	4M42A74161
Engine Capacity:	2977 cc
Maximum Power Output:	-
Maximum Laden Weight:	3390 kg
Unladen Weight:	2500 kg
Year Of Manufacture:	2009
Original Registration Date:	15 Oct 2009
Lifespan Expiry Date:	14 Oct 2029
COE Category:	C - Goods Vehicle & Bus
Quota Premium:	\$21,692.00
COE Expiry Date:	14 Oct 2019
Road Tax Expiry Date:	14 Oct 2019
Inspection Due Date:	14 Oct 2019
Intended Transfer Date:	19 Jan 2019
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
Total Amount Payable:			25.00

You may print this page for reference.

OK

Print

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

