

NATIONAL Assessment Centre Services. [wof 1 Jan'09] MWA 119021355.

Date In: 15/12/19 15:40	Job description	Date & Time Completed	Done by
Ref No: MA/ EQZ 1900 2870/h4	SAS e-filing		
Veh No: GX 8232K	E-mail (within 3hrs, AIC 2hrs)		
DOA: 112/119 17:10	I-Motor Claim Form		
OD: <input checked="" type="checkbox"/> Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: GBD 34345.	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:	Time:
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1901181	Invoice Preparation Checklist	Am (\$)	Am (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wof 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idao Mobile \$0		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments:	Invoice dated	Fee Charged	

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	15/02/2019 15:40
Date Of Accident	01/02/2019 17:10
Exact Location Of Accident	ALONG PIE TWDS TUAS B4 JLN BAHAR EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX8232K
Insured/Policyholder	
Name Of Registered Owner	FLEXI FLEX PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83083953

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCPHQ18-006560
Cover Note Number	-

Driver

Name of Driver	PONNUSAMY VINOTHRAJA
NRIC No	G6788304M
Date Of Birth	20/07/1990
Occupation	OUTDOOR
Date Of Driving Pass	16/07/2014
Driving Experience	4 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83083953
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	23 NEYTHAL RD #02-03A
Postcode	628588
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	CHAIN COLLISION
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	1
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8999999 - FAX NO: 66655791
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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	GBD3434S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKX1602A
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)	

SKETCH PLAN

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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.

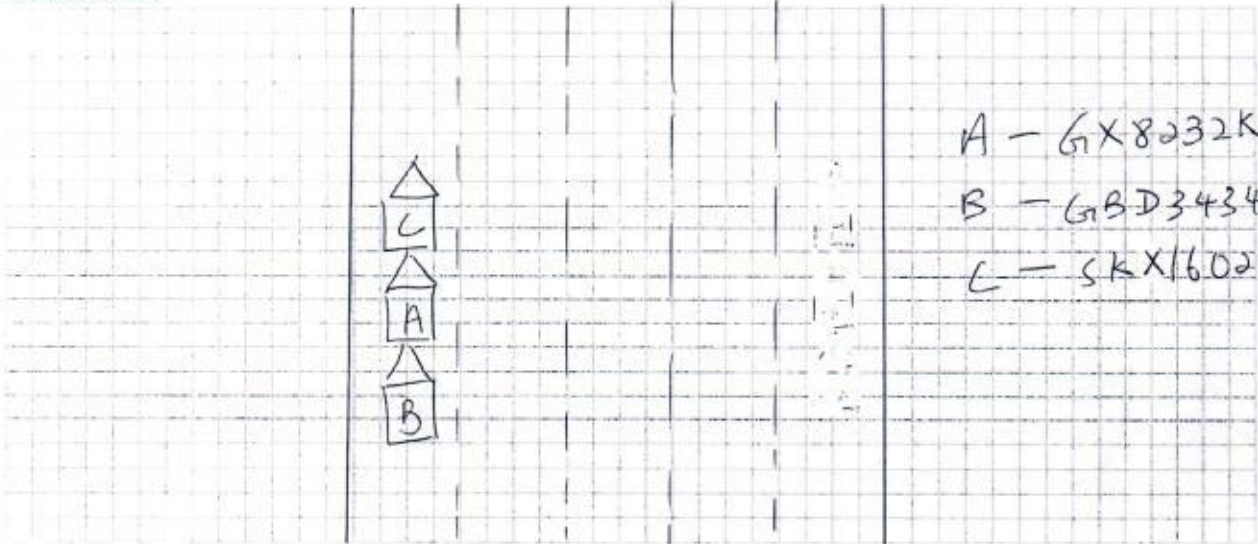


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated time and date, I was driving my vehicle along PIE towards Trans. vehicle C stop. I fellow suit, suddenly vehicle B hit on my rear and cause my car to push forward and hit on vehicle C. There were 3 cars involved in an accident.

DECLARATION

I/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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Date of Accident : 07/02/19 Accident Time: 5.10pm (24-HR-Format)
 Accident Place : Along PIE toward Tuen
 Vehicle No. (Car Plate No.) : GX 8232K Make/Model: Toyota Dyna
 Insurance Company : EQ Policy No: DM CPT-1218-006560
 Owner or Company Name /IC No. : Flexi. Flex. Pte Ltd / 201114152K
 Owner or Company Contact No. : _____ Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Ponnusamy Vinothraja / 66788304M
 DRIVER'S Date Of Birth : 20/7/1990 DRIVER'S License Pass Date 16/7/2014
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : 23 Neythai Road BIKB #02-03A
 DRIVER'S Contact No./ Alt No. : 1) 68415995 2) 5628588
 DRIVER'S Occupation : 83083953
 : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : _____
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 1 Driver
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): _____ NO

Other Party Driver's Particular (if any)

Vehicle No: <u>GBD3434S (claim)</u>	Vehicle No: <u>SKX1602A</u>
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**



SINGAPORE POLICE FORCE



T/20190215/2083

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

1 of 3

Report No. T/20190215/2083

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/02/2019 13:56		Vide Report No.:		Station Diary No.: 66
Informant's Particulars				
Name of Informant: PONNUSAMY VINOTHRAJA		Address: 23 NEYTHAL ROAD #02-03A SINGAPORE 628588		
ID Type / ID No.: FIN NO / G6788304M		Contact No.: Home/Office: Mobile: 83083953		
Nationality: INDIAN		Email:		
Sex: Male	Age: 28	Date of Birth: 20/07/1990	Type of Informant: Driver	
Race: Indian		Language: English	Institution / School Name:	
Occupation: CONSTRUCTION WORKER		Driving Licence Information: Class: 3		Date of Expiry: 15/07/2019

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 01/02/2019 17:10	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PAN ISLAND EXPRESSWAY TUAS ROAD Along PIE towards Tuas before Jalan Bahar exit				
Weather: Sunny		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No. of Passenger
GBD3434S	Lorry	NISSAN		Blue	Seriously Damaged	0
GX8232K	Lorry	TOYOTA		White	Seriously Damaged	0
SKX1602A	Car	AUDI		Black	Slightly Damaged	2

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190215/2083

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

2 of 3

Report No. T/20190215/2083

CONTINUATION OF REPORT

Driver				
Name	PONNUSAMY VINOTHRAJA		ID No.	G6788304M
Related Vehicle	GX8232K (Lorry)		Contact No.	83083953
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 15/07/2019
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

Brief Details.

On the 01/02/2019 at about 1710hrs, I was travelling along PIE towards Tuas before Jalan Bahar exit on the lane 4. I was driving my company lorry bearing the registration plate number of GX8232K. While I was driving along lane 4 slowly, a vehicle bearing the registration plate number of SKX1602A travelling in front of me. Due to the heavy traffic, the vehicle in front of me had to stop. I managed to stop my lorry in time. Subsequently, the lorry behind my vehicle hit onto the rear of my lorry. The lorry behind mine was bearing the registration plate number of GBD3434S. The lorry was unable to stop in time.

Due to the impact, my lorry moved forward and hit onto the vehicle which was in front of mine. The other 2 drivers and I alighted and took photos before we left. We did not exchange particulars. No visible injuries on anyone. My lorry is damaged at the front and rear while the other lorry was damaged at the front. The vehicle in front of mine was damaged at the rear.

I wish to state I do not have any in vehicle camera. The driver of the vehicle in front of mine informed my company that he had visited a clinic and got 03 days of medical certificate thus, was advised to lodge a Police report.



**SINGAPORE
POLICE FORCE**



T/20190215/2083

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

3 of 3

Report No. T/20190215/2083

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
D /
Staff Sgt GUHANESH S/O S JAYAKUMAR

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
15/02/2019 13:56

Classification Of Case:

SN 34

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

Employer
ETREK CONSTRUCTION PTE. LTD.

Sector: **CONSTRUCTION**

Name
PONNUSAMY VINOTHRAJA


Occupation
CONSTRUCTION WORKER

Work Permit No.
D 95115592

Date of Application
03-07-2017

Date of Issue
12-06-2017

Date of Expiry
09-07-2019

 **L8269168**

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G6788304M**

Name
PONNUSAMY VINOTHRAJA

Birth Date: **20 Jul 1990**

Issue Date: **16 Jul 2014**

Valid Till: **15 Jul 2019**



VISIT PASS
Immigration Regulations

Name
PONNUSAMY VINOTHRAJA



Date of Birth: **20-07-1990** Sex: **M** Nationality: **INDIAN**

File: **G6788304M** Date of Issue: **12-06-2017** Date of Expiry: **09-07-2019**

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.




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

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg w/wt < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg **16 Jul 2014**

NP 428A

 Licence No: **G6788304M**

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. 1978-00890-N

eqinsurance
You've Got a Friend

For Hplco

COMMERCIAL VEHICLE PRIVATE (SCH I) SCHEDULE

Page 1 of 7

Agency	A000301	Class of Policy	COMMERCIAL VEHICLE PRIVATE (SCH I)	Policy Number	DMCPHQ18-006560
Account	A000301	Issued on	24/09/2018 in Singapore	Replacing Policy no.	DMCPHQ17-005154
Client	0085712	Acceptance Date	24/09/2018		

Period of Insurance from 28/09/2018 to 27/09/2019 , both dates inclusive

Insured's Name
Address
FLEXI FLEX PTE LTD
BLK/HOUSE NO. 23 #02-03A BLK B
NEYTHAL ROAD
SINGAPORE 628588

Business/Occupn
Hire Purchase
General Wholesale Trade
UNITED OVERSEAS BANK LIMITED

Premium	Basic Annual Premium	SGD1,274.11	Premium Due	SGD1,274.11
	Premium after NCD	SGD1,274.11	Premium GST	SGD89.19
			Total Due	SGD1,363.30

Risk No. 001	COMMERCIAL VEHICLE PRIVATE (SCH I)	Make/Model	TOYOTA DYNA 150 D
1. Registration	GX8232K	No. of seats	2
Type of Cover	Third Party, Fire & Theft	Capacity cc	0
Engine No.	SL5473403	Tonnage	1.97
Chassis No.	JTFUF34Y003002788		SGD0.00
Sum Insured: Market Value at the time of loss			SGD3,000.00
YEID-All Claims			

COMMERCIAL VEHICLE THIRD PARTY, FIRE & THEFT (Vent 4)

For information on Motor Claims Framework (MCF), please visit GIA websites
 (www.gia.org.sg /pdfs /Industry /Motor /MCF2018_Brochure.pdf)

The Policy is subject to the following Clauses, Warranties, Memo, Endorsement,
 Exclusions as printed herein and/or attached hereto:-

3Q - THIRD PARTY FIRE & THEFT

It is hereby understood and agreed that notwithstanding anything to the contrary contained in Section 1 of this Policy the Company shall not be liable thereunder except in respect of loss or damage by fire external explosion self-ignition or lighting or burglary housebreaking or theft.

It is further understood and agreed that Section 3 of this Policy is deemed to be cancelled.

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