

NATIONAL Assessment Centre Services.

[ver 1 Jan 2005]

MAA19028684

| | | | |
|---------------------------|--|-----------------------|---------|
| Date In: 07/03/2019 13:06 | Job description | Date & Time Completed | Done by |
| Ref No: NA/AWA19003904/Y | SAS e-filing | | |
| Veh No: YD 99928 | E-mail (Within 2hrs, AIC 2hrs) | | |
| D.O.A: 28/02/2019 07:34 | I-Motor Claim Form | | |
| OD / TP (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: GBH 4011C | 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:

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

| Date/Time | Action |
|-----------|--------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | |
|---------------------------------|---|-------------|
| NA1901638 | Invoice | Amount |
| Claimant's Particulars: | 1) AR: Accident Reporting (\$30) | |
| Driver/Owner: | 2) DA: Damage Assessment (\$100) | INC (\$30) |
| Contact No: | 3) TP: Towing Fee | \$40/\$45 |
| Damaged Portion: | 4) FT: Follow-Through Survey | \$120 |
| QC Checked by (Engr-In-Charge): | 5) FT: Follow-Through Survey (Resurvey) | \$30 |
| Auditors' Comments: | For claiming against INC Only (ver 10 Jan 2005) | |
| | 6) TR: Re-inspection | \$75 |
| | 7) NI: Idas DA + SMRT Survey | \$160 |
| | 8) NTUC Additional Services:- | |
| | OD: | |
| | *N5: Courtesy Car / Tpl Allowance | \$3 |
| | *N6: Repair Co-ordination | \$10 |
| | *N7: Post Repair Inspection | \$25 |
| | *N8: DV / Collect Excess Coordination | \$3 |
| | TP (Nil): TP (Non INC) against INC | \$20 |
| | 9) NI1: Idas Mobile | \$0 |
| | Invoice dated | Fee Charged |
| | 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 | 02/03/2019 13:06 |
| Date Of Accident | 28/02/2019 07:35 |
| Exact Location Of Accident | EXIT FROM EUNOS INTO PIE TOWARDS TUAS |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---|
| Vehicle Registration Number | YQ9992S |
| Insured/Policyholder | |
| Name Of Registered Owner | WATERTECH PLUMBING & CONSTRUCTION PTE LTD |
| Co Reg No | 200101848M |
| Email Address | WATERTECHHR@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-90030466 |
| Alternative Phone No | OFFICE-64446855 |

Vehicle Particulars

| | |
|--|------------------------------------|
| Manufacturer | HINO |
| Model | XZU710R-4.0 D 14FT WIDE CAB 5T (M) |
| Exact Purpose for which vehicle was being used at time of accident | WORKING PURPOSES |
| 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 | ALLIED WORLD ASSURANCE COMPANY, LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | AVCPSPB0091701800 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | KANDHASAMY SATHIYARAJ |
| Passport No/FIN | G2738092T |
| Date Of Birth | 06/01/2017 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 04/07/2017 |
| Driving Experience | 1 YEAR AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90030466 |
| Fax Number | |
| Contact Number | OFFICE-64446855 |
| Email Address | WATERTECHHR@GMAIL.COM |

Address 30 KAKI BUKIT ROAD 3
#04-02 EMPIRE TECHNOCENTRE

Postcode 417819

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 -

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) 8

Passenger 1 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 2 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 3 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 4 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 5 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 6 NAME: : COLLEAGUE
GENDER: : MALE

Passenger 7 NAME: : COLLEAGUE
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

PLEASE REFER TO SKETCH PLAN

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 | GBH4071C |
| Vehicle Make/Model/Colour | TOYOTA |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | CHEN HAONAN |
| NRIC/Passport Number | G2983233T |
| Contact Number | 98970143 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

SKETCH PLAN

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. 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.



X
Policyholder's Signature
Date & Time:

1312 02.03.19
Driver's Signature
(If driver is not the policyholder)
Date & Time:

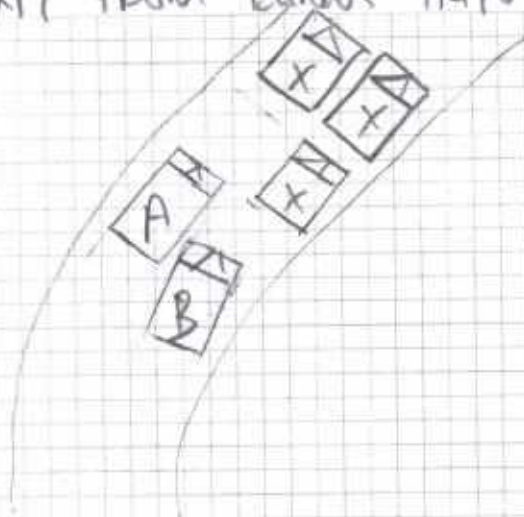
02/03/2019
Reporting Centre Personnel's Signature
Name: Rob L. L. L.
NRIC/FIN No.:

SKETCH PLAN

EXIT FROM EUNOS INTO PIE (TUAS)

A) YQ9992S

B) GBH4071C



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28th Feb 2019 @ 0735hrs, I was travelling and driving in lorry YQ9992S (vehicle A in diagram) along Jalan Eunus towards PIE exit Tuas direction. Weather was but traffic was heavy especially the road leading to PIE Tuas.

I was on the extreme right of a 2-way lane turning right. Along came a van GBH 4071C (vehicle B on diagram) and appears on my right side. Due to congestion in his lane, he decided to inch into my lane.

During my drive, I heard cracking sound of glass breakage. I looked at my right side mirror and saw the van left mirror collided ^{onto} my lorry's right rear. I proceeded to stop my vehicle and checked for damages. Nothing is damaged except for the van's damaged right side mirror. After exchange of particulars, we went our separate ways.

DECLARATION

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

X



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.:

10 Sin Ming Drive Singapore 575701
www.lta.gov.sg

03 Oct 2018

Our ref 0310180203N057022329

WATERTECH PLUMBING & CONSTRUCTION PTE LTD
30 KAKI BUKIT ROAD 3
#04-02 EMPIRE TECHNOCENTRE
SINGAPORE 417819

000756



Dear Sir/Madam

NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO. YP8645G WITH VEHICLE REGISTRATION NO. YQ9992S

You may be pleased to know that your application of 03 Oct 2018 for replacement of registration number is approved.

2. The details of the vehicle after the transaction are as follows:

Vehicle Registration No. : YQ9992S (Previously YP8645G)
Vehicle Make : HINO
Vehicle Model : XZU710R 14FT WIDE CAB 5T
Chassis No. : JHHUCV3H00K025179
Engine No./ Motor No. : N04CVV10161 / -

3. Please change the number plates on your existing vehicle (ie. Chassis No. : JHHUCV3H00K025179, Engine No./ Motor No. : N04CVV10161 / -) to display the new/ replacement registration number, YQ9992S by 06 Oct 2018. It is an offence to keep or use a vehicle without displaying the correct vehicle registration number assigned. The penalty for first offence is a fine not more than \$1,000 or imprisonment of not more than 3 months. For second or subsequent offence, the fine is not more than \$2,000 or imprisonment of not more than 6 months.

4. Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any questions. You can either quote the Business Transaction Reference No. 20181003155637616499 or the vehicle registration number when making your enquiry.

Yours sincerely

NG LAY CHOO (MS)
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS
VEHICLE SERVICES GROUP
LAND TRANSPORT AUTHORITY

[This is a computer-generated notice that requires no signature.]

SUNCH

ACCIDENT STATEMENT

ACCIDENT DATE: 28/02/2019 (DD/MM/YYYY), TIME: 07:35 (HH:MM)

LOCATION: Jln Eunos To PIE TIAS

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: YA 9992 5
 b) INSURANCE COMPANY: AWA
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: HINO
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: WATERTECH PLUMBING CONSTRUCTION PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: 30 KAMI BUKIT ROAD 3 #04-02 EMARE TECH CENTRE SINGAPORE 417819

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: KANDHASAMY SATHIYAN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 91273092T CONTACT: 90030466
 c) ADDRESS: 30 KAMI BUKIT ROAD 3 #04-02 EMARE TECH CENTRE SINGAPORE 417819

*d) DATE OF BIRTH: 08/07/1992 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 04 JUL 2017

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____

b) ROAD SURFACE: (DRY / WET / OTHERS) _____

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: 91B H4071C MODEL: 987443 To
 b) DRIVER'S NAME: CHEN HANMAN
 c) NRIC/FIN/PASSPORT: 912983233T CONTACT: 98970143

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passengers
 (including driver)

(9)

8 male

* No of passengers
 (including driver)

(2)

* No of passengers
 (including driver)

()

Email = watertechhr@gmail.com

VIDEO

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

Employer:
WATERTECH PLUMBING & CONSTRUCTION PTE LTD

Name:
KANDHASAMY SATHIYARAJ

Work Permit No:
036525228

Sector:
CONSTRUCTION

K0178389

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G2738092T**

Name:
KANDHASAMY SATHIYARAJ

Birth Date: **08 Jul 1992**

Issue Date: **06 Jan 2017**

Valid Till: **05/01/2022**

002645465J

VISIT PASS
Immigration Regulations

Name:
KANDHASAMY SATHIYARAJ

Pin:
G2738092T

Date of Birth: **08-07-1992** Sex: **M**

Nationality:
INDIAN

MULTIPLE JOURNEY VISA ISSUED

Download SGWorkPass App to check status

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

10-03-2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

| CH | Class | Vehicle | Effective Date |
|----|----------|---|----------------|
| CH | Class 1B | Motorcycle <= 125 CC | 06 Jan 2017 |
| CH | Class 3 | Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 1500 kg | 06 Jan 2017 |

S / No. 9000301092

G2738092T

NP 428A

Licence No: G2738092T

CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE
THE ROAD TRANSPORT ACT 1987 OF MALAYSIA
THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968
ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

CERTIFICATE No. AVCP5B0091701800 ChaNo: JHHUCV3H00K025179

1. Index Mark and Registration Number of Vehicle YP 8645 G

2. Name of Policyholder WATERTECH PLUMBING & CONSTRUCTION PTE LTD ENSURE PTE LTD
Co. Reg. No.: 201017457N
38 Toh Guan Road East
#01-57 Enterprise Hub
Singapore 608581
Tel: 6515 5988 Fax: 6896 6321

3. Effective Date of Commencement of Insurance for the purposes of the Ordinance 02 April 2018
(11:00 Hours)

4. Date of Expiry of Insurance 01 April 2019

5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf)
ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION.

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.

6. Limitations as to Use* (For certificate reference MX1, see overleaf)

- A. USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
B. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
C. 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 TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.

Estimated Value : MARKET VALUE WITH COE/PARF
Hire Purchase Owner : MAYBANK
Type of Cover : Comprehensive

* Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore).

