### 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 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

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	ACCIDENT STATEMENT
Date Of Report	05/04/2019 10:23
Date Of Accident	27/02/2019 10:20
Exact Location Of Accident	BLK 477 TAMPINES ST 43 OPEN CP
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBH6890S
Insured/Policyholder	
Name Of Registered Owner	PAN PACIFIC VAN & TRUCK LEASING PTE LTD
Co Reg No	201511635R
Email Address	EFFICIENTLOYANG@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-64404428
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	DMCFHQ18-000144
Cover Note Number	
Driver	
Name of Driver	KOH HWEE TAT

Name of Driver

KOH HWEE TAT

NRIC No

S7521375A

Date Of Birth

15/07/1975

Occupation

OUTDOOR

Date Of Driving Pass

02/11/1996

Driving Experience 22 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-85181791

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 447 TAMPINES ST 42 #02-12 S520445 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

Type Of Accident NO 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?

YES Was any other material or property damaged?

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

NO

1

Number of Passengers (Including Driver)

**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?

If Yes, against whom?

NO

### **Circumstances of Accident**

REFER TO ATTACHED 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** 

SKR7426J Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver NA

NRIC/Passport Number

Contact Number NA NA Address NA Postcode NA

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.

AN MAIRL MR & THUR LEASIN PTE LTD.

CO. REG. NO: 201511635R

NO. 52 JOO CHIAT ROAD

SINGAPORE 427371

TEL: 6440 4423 FAX: 6345 2516

Pölicyhölder's Signature Lavahon com.co Driver's Signature
Date & Time: (If driver is not the

(If driver is not the policyholder)
Date & Time: 05/04/2019

1030HRS

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

## Accident Sketch Plan Pg. 1

SKETCH PLAN

### NOT AWARE OF ANY ACCIDENT

A: GBH6890S B: SKR7426J

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I USUALLY PARK MY CAR AT THE CARPARK ABOUT TWICE A WEEK AS I STAY AT TAMPINES ST 42	
I WAS NOT AWARE OF ANY ACCIDENT ON THE 27/2/2019 @1020HRS UNTIL I RECEIVED A CALL FROM	
MY RENTAL CO. YESTERDAY THAT I WAS INVOLVED IN AN ACCIDENT WITH SKR7426J	
INSURER:	
VEHICLE NO: GBH6890S	
DOA: 27/2/2019	
CLAIM TYPE: REPORTING ONLY	
WORKSHOP: NA	

DECLARATION

DECLARATION

WAS Equipment of the following of the first of the particular of the in every respect.

CO. REG. NO: 201511535F

NO. 52 JOC CHIAT ROAD

SINGAPORE 42737.1

TEL: \$40.0 4425 FAX: 6345 3516

Policyholdede Sighature 22 @ rahoo com co Driver's Signature

Date & Time:

Date & Time:

(If driver is not the policyholder) Date & Time: 05/04/2019

1030HRS

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

## NRIC &DL Pg. 1



# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7521375A



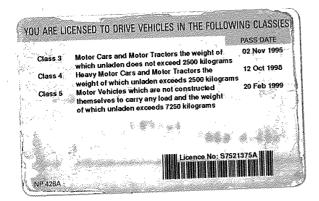


KOH HWEE TAT (XU HUIDA) 许 惠 达 Race CHINESE

CHINESE
Date of birth
Sex
15-07-1975
M
Country of birth
SINGAPORE

57521375A

### NRIC & DL Pg. 1





### **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 FLEET Comprehensive

Certificate No.: DMCFHQ18-000144

1. Index Mark and Registration Number of Vehicles GBH6890S

Form: LCVH
Excess:
All Claims SGD1,500.00
YEID-AC Additional SGD2,000.00

2. Name of Policyholder

PAN PACIFIC VAN & TRUCK LEASING PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act 21/08/2018

4. Date of Expiry of Insurance 31/07/2019

5. Person or Classes of Persons entitled to drive\*

Any person who is Authorised to drive on the Insured's order or with  ${\sf the}$  permission.

EQ Insurance-MARS Motor Accident Help Center 6311 3211



\*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 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 has not been cancelled at the time of accident loss or damage.

6. Limitations as to use\*

LIMITATIONS AS TO USE

Use for social domestic and pleasure purposes and business purposes of any person whom the vehicle is hired

THE POLICY DOES NOT COVER

- (1) Use for racing pace-making reliability trial or speed-testing
- (2) Use whilst drawing a trailer except the towing (other than for reward) 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.

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.

unwck/H0/A000423/Car Insurance Agency

A Member of Citystate

Authorised Signatory EQ Insurance Company Limited

















