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OD / Reporting Only	I-Photo UI	iloaded			
		Survey Report			
TP Insurer:		t by Fax / Hand to	Owner/Wksp		
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TP Particulars: Veh No:	JGU 919.	INC ()	
Owner / Driver: (300 1192		Tel:	TÍT.)
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	%]
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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 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.

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.

1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ACCIDENT STATEMENT		
Date Of Report	20/03/2019 15:09		
Date Of Accident	19/03/2019 17:40		
Exact Location Of Accident	51 PAYA UBI INDUSTRIAL PARK #01-25/26		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	YM2728G		
Insured/Policyholder		DESCRIPTION OF THE PERSON OF T	
Name Of Registered Owner	UNI-TAT ICE & MARKETING PTE LTD		
Co Reg No			
Email Address	NOEMAIL		
Mobile Phone No			
Alternative Phone No	OFFICE-67448484		
Vehicle Particulars			

Vehicle Particulars

Manufacturer MITSUBISHI Model FE639E6SRDE

Exact Purpose for which vehicle was being used at PARKED time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company

MSIG INSURANCE (SINGAPORE) PTE. LTD.

Type Of Coverage

THIRD PARTY

Fleet Policy

NO

Policy Number

B 29094124 TMV

Cover Note Number

Driver

Name of Driver

CHIA KOK CHEONG

NRIC No Date Of Birth

Occupation

S1311034D

09/11/1958 OUTDOOR

Date Of Driving Pass

10/02/1982

Driving Experience

37 YEARS AND 1 MONTH

Gender

MALE

Mobile Number

(LOCAL) +65-82221785

Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 533 HOUGANG AVE 6 #02-325

JGU919 (COMMERCIAL VEHICLE)

Postcode

530533

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

- 0

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Foreign Vehicle Registration Number

YES

r oreign vernele rregistration realiber

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?

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?

YES

If Yes, Please state which Police Station

Police Station Name

MACPHERSON NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 54 PIPIT ROAD #01-82/84, POSTCODE: 370054, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7449999 - FAX NO: 65476366

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?

COMPANY CCTV CAPTURE

Remarks/ Reasons: Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

JGU919

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Page 2 of 23

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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)

I understand, acknowledge, agree and consent that:

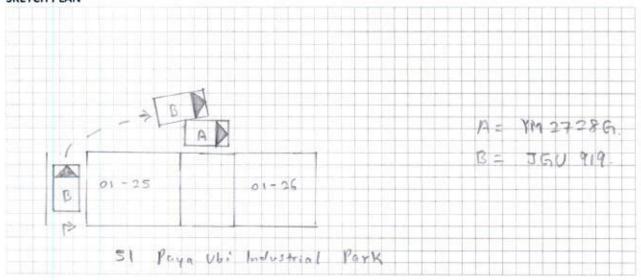
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
 - 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:
 - 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 :



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

		4,			
Please	hetek	to	Police	Report	
	/				

DECLARATION

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

Policyholder's Date & Time:

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:





1 of 3

Report No. T/20190320/2110

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

REPORT OF A TRAFFIC ACCIDENT

20/03/2019 14:44			Vide Report No.:	Station Diary No.:			
Informan	t's Partic	ulars	The second secon	STATE OF THE PARTY			
Name of CHIA KO	Informant: K CHEON		Address: APT BLK 533 HOUGANG A 530533	VENUE 6 #02-325 SINGAPORE			
ID Type / ID No.: NRIC NO / S1311034D			Contact No.: Home/Office: Mobile: 82221785				
	Nationality: SINGAPORE CITIZEN		Email:				
Sex: Male	. igo: Date of Bitti.		: Type of Informant: COMPANY MANAGER				
Race: Chinese			Language:	Institution / School Name:			
Occupation: COMPANY MANAGER			Driving Licence Information: Class: 3	Date of Expiry:			

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 19/03/2019 17:40	Type of Location Straight Road
Location: Along Road 1 UBI AVENUE NO.51, #01-2	1 S PAYA UBI INDUSTR		1 19/99/29 10 17:40	
Weather: Road		Road Surface: Dry	R	oad Speed Limit:
	T 55 E1			
Traffic Flow: Dual Carriage	Way	Traffic Control:	T	raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
JGU919						0
YM2728G					_	0
YM2/28G						0

Details of Person Involved	
Any Pedestrian Involved: No	The state of the s
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

2 of 3

Report No. T/20190320/2110

CONTINUATION OF REPORT

COMPANY MAN	IAGER	THE PARTY NAMED IN	CONTRACTOR OF THE PARTY OF THE	1998 E	HISTORY OF	
Name	CHIA KOK CHEONG		ID No),	S1311034D	
Related Vehicle	YM2728G			Contact No.		82221785
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date			harge	NIL	
No. of Days granted Medical Leave NIL			Degree of			

Brief Details.

On 19/03/2019 at around 1740hrs, I was informed by a passerby that there was a blue lorry, registration number, JGU919 which had hit left rear portion of my company vehicle, registration number, YM2728G and had driven off. This had also caused some damage to the left rear hinge along with a split open refrigerator cabin. This has also caused the door to not be able to be closed properly.

I had viewed the Wilson Parking's CCTV and was able to trace the vehicle number, which had belonged to a Malaysian company, Xin Hua Trading & Transport Sdn Bhd, No.2 Jalan Permatang 2, Kempas Baru, 81200 Johor Bahru, Johor. The was no driver in my company's vehicle during the accident and as such no person got injured. I am also lodging this report for insurance and record purposes.





Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE Tel No: 1800-7449999

3 of 3 Report No. T/20190320/2110

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

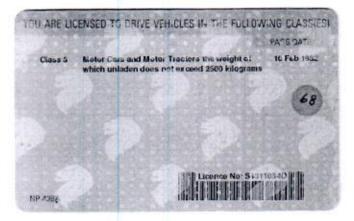
Tel: 1800-7449999

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: G / Staff Sgt MUHAMMAD HAZWAN BIN ADNAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 20/03/2019 14:44
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
Authentication Stamp NPP NP168+01-82/84 Singapore 370054	











MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

陳保險經紀私營有限公司 TAN INSURANCE BROKERS PTE LTD

3A/5A Aliwal Street, Chenn Leonn Building Singapore 199896 www.tib.cem.sg

Tel: (65) 6742 6766 Fax: (65) 6742 6669

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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.Z.300

COMMERCIAL VEHICLE - TP

Third Party

Goods Carrying Vehicle - Sch I

Certificate No. B 29094124 TMV

1. Index Mark and Registration Number of Vehicle

2. Name of Policyholder

Uni-Tat Ice & Marketing Pte Ltd

 Effective Date of the Commencement of Insurance for the purposes of the Act 02/09/2018

4. Date of Expiry of Insurance

01/09/2019

5 Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. Limitations as to use*

Use in connection with the Policyholder's business.
Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
Use for social domestic and pleasure purposes.

The Policy does not cover

 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.

* 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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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 any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

The owner and vehicle particulars for Vehicle No. YM2728G as at 28 Feb 2014 are as follows:

		venicle particulars for Vehicle	e No. YM2728G as at 28 Feb 2014 are as follows:
		Name	
		2. Identification No. Type	: UNI-TAT ICE & MARKETING PTE LTD
	1	3. Identification No.	Company
	4	4. Place Of Passport Issue	: 199406736C
	5	Vehicle No.	The distriction of the control of th
	6	Previous Vehicle No.	: YM2728G
		TOUS VEHICLE NO	•
	8	Date ()! I Wherehin	: 28 Feb 2014
		- Butte Registration Date	: 02 Mar 2004
		Sistiation Date	: 02 Mar 2004
		THE TYPE	: B70 - Goods (O
		Schenie	: B70 - Goods (Open) Refrigerated Vehicle : Normal
			: No Attachment
	1.	3. Attachment 2	- No Attachment
		4. Attachment 3	
	15	THE THINK	. Mariney re-
	16	- chiefe Model	: MITSUBISHI
	17	out of Manufacture	: FE639E6SRDE
	18	Primary Colour	: 2003
	19	Secondary Colour	: White
	20	Passenger Capacity	: -
	21.	Chassis/Trailer Chassis No.	: 2
	22.	Propellant	: FE639EA45402 / -
	23.	Engine No./Motor No.	: Diesel
	24.	Engine Capacity(cc)/Power Rating(kW)	: 4D34J68546 / -
	25.	Maximum Power Output(kW/bhp)	: 3908 / -
	26.	Unladen Weight(kg)	: -/-
	27.	Maximum Laden Weight(kg)	: 2500
	28.	Open Market Value	: 6700
	29.	PARF Eligibility	: \$25,568.00
	30.	PARF Eligibility Expiry Date	: No
	31.	Minimum PARF Benefit	i -
	32.	No. of Transfers	: \$0.00
	33.	IU Label No.	: 3
	34.	COE No.	: 1510540768
	35.	COE Expiry Date	: 2004030105000116K
	36.	COE Category	: 01 Mar 2019
	37.	Quota Premium/Danger	
	38.	Quota Premium/Prevailing Quota Premium Actual Quota Premium/POP Paid	: \$25,158.00 / \$25,158.00
	39.	Actual Quota Premium/PQP Paid Actual ARF Paid	: \$25,158.00
	40.		: \$1,279.00
	41.	- C Linasion y/km	: •
	42.	Actual CEVS Rebate Utilised	:
	43.	CEVS Surcharge Paid	2
	14.	Actual Green Vehicle Rebate Utilised	: •
	15.	Vehicle Lifespan Expiry Date Road Tax Amount	01 Mar 2024
	16.	- and remount	-
	17.	Road Tax Start Date	
	20.73	Road Tax End Date	548 W
7	o,	Kemarke	
			Upon the expiry of the vehicle's 5-year COE on 01 Mar 2019, you may further repeat the COE or 01 Mar
			2019, you may further renew the COE of your vehicle
			applicable) of the vehicle.