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.
- 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

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	ACCIDENT STATEMENT
Date Of Report	10/06/2019 12:35
Date Of Accident	08/06/2019 17:15
Exact Location Of Accident	EUNOS AVE 3 TURNING TO EUNOS RD8
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKH9663E
Insured/Policyholder	
Name Of Registered Owner	PRECAST STEEL FIXERS PTE LTD
Co Reg No	200617696Z
Email Address	CHAN@TSSCONSTRUCTION.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-98559251
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY 2.0 AUTO
Exact Purpose for which vehicle was being used a time of accident	t .
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY

PRIVATE CAR

Insurance Company

Vehicle Category

EQ INSURANCE COMPANY LTD Name of Insurance Company

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number DMPPHQ18-005870

Cover Note Number

Driver

Name of Driver **CHAN KOK JIN** NRIC No S2511081A Date Of Birth 17/08/1961 Occupation **INDOOR Date Of Driving Pass** 29/06/1985

Driving Experience 33 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98559251

Fax Number

Contact Number

EMail Address CHAN@TSSCONSTRUCTION.COM.SG

125 KEW CRESCENT Address

Postcode 466162

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 **COLLISION - MAJOR/MINOR RD**

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?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO NO

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

NO

SJU5596K

Circumstances of Accident

PLEASE REFER TO THE ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver GOH ZHENG CAI, GABRIEL

NRIC/Passport Number S8718951A Contact Number 94559645

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 17

Accident Sketch Plan

SKETCH PLAN

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 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:
 - (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.

Co. Reg. Net P 2006176982 P 7

Policyholder's Signature Date & Time: Crand

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

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

Accident Sketch Plan & Describe Circumstances Of The Accident

	A: 3KH9663E
	B: SJU 5596K
5	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I	was turning out from Euros Ave 3 to Euros Road &
I	was turning out from Euros Ave 3 to Euros Road & did not see any vehicle approaching so I make a
+.	prearing and consek the sear work (drive side). There is no injury in this accident.
1,	sacrine and length the food worner (developed). There
9	The secident
- (e us while in this accuracy.
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DECLARATION

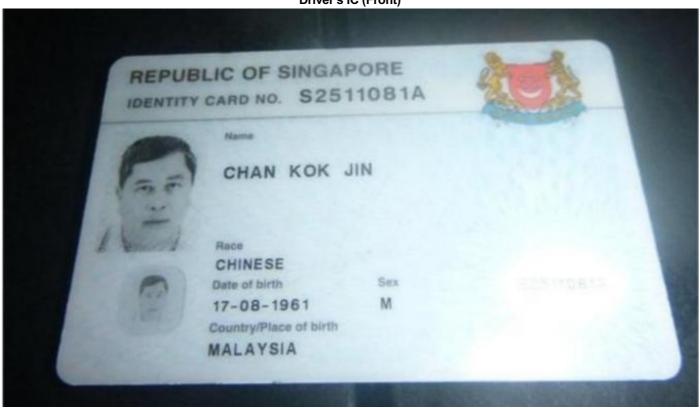
I/We declare the foregoing particulars are true in every respect.

Policyholde a gnatus Date & Time: * 0

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

NRIC/FIN No.:

Driver's IC (Front)

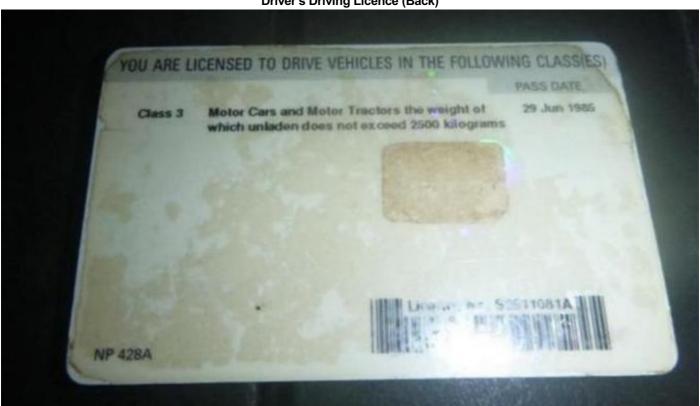


Driver's IC (Back)

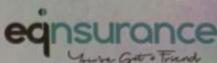


Driver's Driving Licence (Front)





EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MNO Complex Singapore 068110
tel 65 6223 9423 | fax 65 6224 2903 | www.eqinsurance.com.ag reg no. 75/8-00490 N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1969 (FEDERATION OF MALAYSIA) THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.188 OF THE REVISED EDITIONS (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

PRIVATE CAR Comprehensive

Form: MX2

EQ Insurance-MARS Motor

Accident Help Center 6311 3211

Certificate No.: DMPPHQ18-005870

1. Index Mark and Registration Number of Vehicles SKH9663E

2. Name of Policyholder

PRECAST STEEL FIXERS PTE LTD

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act
- 4. Date of Expiry of Insurance
- 5. Person or Classes of persons entitled to drive'
 - (a) The Policyholder
 - (b) Any other person who is driving on the Policyholder's order or with his permission
 - * 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 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*

Use for social, domestic and pleasure purposes and for the Policyholder's

The policy does not cover:

(a) use for hire or reward

(b) use for racing, pace-making, reliability trials or speed testing

(c) use for the carriage of goods (other than samples) in connection with any trade or business

(d) use for any purpose in connection with the Motor Trade

"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.

NWE 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: Hong Leong Finance Ltd.

A000137/I Insurance Agency Date of Issue : 20/08/2018 13:48

Exp No.: DMPPHQ17-004513

Authorised Signatory EQ Insurance Company Limited

A Member of Citystate

\$\$1,100.00 5\$1,600.00

РНОТО 1



PHOTO 2



РНОТО 3







РНОТО 6



CHASSIS NUMBER



ODOMETER READING

