### 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.

- 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	04/06/2019 15:28	
Date Of Accident	03/06/2019 18:50	
Exact Location Of Accident	NORTH COAST DRIVE	
Country/State of Loss	SINGAPORE	

DETAI	LS OF	OWN	VEH	CLE
-------	-------	-----	-----	-----

Vehicle Registration Number GBH4813D

Insured/Policyholder

Name Of Registered Owner JIT KEONG TRADING CO PTE LTD

Co Reg No 201900335M

Email Address RENTAL@JITKEONG.COM.SG

Mobile Phone No

Alternative Phone No OFFICE-68634186

Vehicle Particulars

Manufacturer TOYOTA

Model DYNA 150-3.0 D (M)

Exact Purpose for which vehicle was being used at

time of accident

WORK PURPOSE

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 AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number P0347583

Cover Note Number

Driver

Name of Driver ISLAM MOHAMMAD SAFIQUL

 Passport No/FIN
 G6605034W

 Date Of Birth
 11/12/1988

 Occupation
 OUTDOOR

 Date Of Driving Pass
 30/10/2017

Driving Experience 1 YEAR AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86206013

Fax Number

Contact Number

EMail Address NOEMAIL

Address

NIL

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

COLLISION - CHANGE/CROSS LANE

Weather Conditions

CLOUDY

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

2

involved in the accident

Was any body injured in the Accident? Was any injured conveyed to hospital by NO

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)

4

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: MALE

**Details of Police Action** 

Was the accident reported to the police?

YES

Police Station Name

If Yes, Please state which Police Station

NANYANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 2 JURONG WEST AVENUE 5, POSTCODE: 649482, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-7929999 - FAX NO: 67912972

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO.T/20190604/2118.

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

Vehicle Make/Model/Colour

Details Of Properties

YP4700G

Page 2 of 23

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Contact Nui

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1

Passenger 2

Passenger 3

Passenger 4

Passenger 5

Passenger 6

COMMERCIAL VEHICLE

AYYAKKANNU KALIDOSS

037128589

7

NAME:

-000

GENDER:

NAME:

GENDER:

NAME:

GENDER:

NAME:

GENDER:

NAME:

GENDER: :

NAME:

GENDER:

Page 3 of 23

### Sketch Plan Pg. 1

#### SKETCH PLAN

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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)

Lunderstand, 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 the purpose of the collection of the purpose of the collection of the purpose of the collection of the purpose of the purpose of the collection of the purpose of the purpo
  - 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 disciosure 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.

PADING CO PER INC.

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.:

TAM AWARED THAT MY IN SURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

# Sketch Plan Pg. 2

KETCH PLAN		
	4	A= GBH 4813D
+-14		
e en orași di	F9 1	B = YP 47009
- 1 - 1		\$275 K   100 1011 2022 ← Vine_00.0000000000000000000000000000000000
	日月月	COAST
	- 1-/A/-	Evidence of the second of the
		AVE
		NA CONTRACTOR OF THE CONTRACTO
and the second second	1111	
SCRIBE CIRCUMSTANCES O	F THE ACCIDENT	(GBH 4813D)
Dh 4/6/2019	at around 18:50 hrs.	I was driving my rehicle along
		ng on the middle lane, I want
		9
	- 1 CONTROL CO	ricle YP4700G did not give
way and h	if onto my f	nont KIH bortion.
ECLARATION We declare the foregoing pactic	ulars are true in every respect.	Claim own policy Claim third party Claim OD / TP at other works hop For record purpose Policy No. P 034-3583 Insurer AXA CC) Veh No. GBH 4-81
olicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
ate & Time:	(If driver is not the policyho	

# POLICE REPORT Pg. 1





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE

1 of 3 Report No. T/20190604/2118

649482 Tel No: 1800-7929999

REPORT	F A TRAFFIC	ACCIDENT			
Date/Time Report Made: 04/06/2019 14:17			Vide Report No.:	Station Diary No.; 85	
Informa	nt's Particu	ulars	THE REPORT OF STREET	GAN THE SECTION	
Name of	informant:		Address:		
ID Type / ID No.: FIN NO / G6605034W			Contact No.: Home/Office: Mobile: 86206013		
Nationality: BANGLADESHI Sex: Age: Date of Birth: Male 30 11/12/1988 Race: Indian			Email:		
			Type of Informant: Driver		
			Language:	Institution / School Name:	
Occupation: Lorry driver			Driving Licence Information Class:	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/06/2019 18:50	Type of Location: Straight Road	
Weather:		Road Surface:		Road Speed Limit:	
Cloudy Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate	
100					

Details of Vo	A CONTRACTOR OF STREET	Make	Model	Color	Condition	No of Passenge
GBH4813D	Lorry	Delig Wile Teep Colors			Slightly Damaged	4
YP4700G	Lorry				No Damage	7

Details of Person Involved	。 [1] [1] [2] [2] [2] [3] [4] [2] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## POLICE REPORT Pg. 2





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 2 of 3 Report No. T/20190604/2118

Tel No: 1800-7929999

CONTINUATION OF REPORT

Driver		Plan server	Control of the	44.42		till til gjartetti i vit
Name	ISLAM MOHAMMAD SAFIQUL		L	ID No.		G6605034W
Related Vehicle	GBH4813D (Lorry)			Contact No.		86206013
Hospital/Clinic	NIL				Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	ischarge NIL			
No. of Days granted Medical Leave NIL			Degree of	Degree of Injury NIL		
Driver			Valuations.			STALLS BUILDING
Name	Ayyakkannu Kalidoss			ID No		G2790716X
Related Vehicle	YP4700G (Lorry)			Conta	ct No.	94235254
Hospital/Clinic	NIL			Class Drivin Licent Expiry	9	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Dis			harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	Slight	

#### Brief Details.

On 03/06/2019 at about 1850hrs, I was travelling along North Coast Ave at the middle lane of a 3 lane road. When I was about to filter to the right lane, I switch on my right signal light and check my blind spot and there was no vehicle. I then proceeded to filter right. When I was halfway at the most right lane, there was another lorry that was approaching fast towards me at the most right lane. I was unable to react on time and his front left side hit onto my front right side. My right side mirror and my driver door was damaged. The other lorry got no damaged but one of the passenger sitting behind the lorry was injured. His left shoulder felt pain but he told me that he is fine. My vehicle got no in car camera.

### POLICE REPORT Pg. 3





3 of 3 Report No. T/20190604/2118

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

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: J / Sgt 3 LIM AW SIONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 04/06/2019 14:17
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65472076	Classification Of Case:
Authentication Stamp SN 127	



**Enquire Vehicle Registration Details** 

# Owner Particulars

NRIC/Passport

/Company Cert

201900335M

No.:

Owner ID Type:

Company

Owner Name:

JIT KEONG TRADING CO PTE. LTD.

Registered

28 BENOI PLACE SINGAPORE 629945

Address: Mailing Address:

Birth Date:

### Vehicle Particulars

Vehicle No.:

GBH4813D

Previous Vehicle

No.:

Effective Date of

Ownership:

01 Feb 2019

Original Regn Date: 19 Jun 2018

Registration Date:

19 Jun 2018

Manufacture:

2017

Vehicle Type:

Goods (Open) Lorry (Metal Body)/Pickup

Vehicle Scheme:

Vehicle

Attachment 1:

With Hood

Vehicle Attachment 2:

Vehicle

Attachment 3:

Vehicle Make:

TOYOTA

Vehicle Model:

DYNA 3.0 MANUAL

Primary Colour: Secondary Colour: White

Passenger

Capacity:

2

Chassis No.:

KDY2318028955

Engine No.:

1KD2700562

Engine Capacity

/Power Rating:

2982 cc/-

Maximum Power

Output:

Propellant:

Diesel

# LOG CARD Pg. 2

Max Unladen Weight:	1800 kg
Maximum Laden Weight:	3435 kg
Open Market Value:	\$32,511.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	2
Minimum PARF Benefit:	*
No. of Transfers:	1
IU Label No.:	1043027837
COE No.:	2018061905000807C
COE Expiry Date:	18 Jun 2028
COE Category:	C - Goods Vehicle & Bus
COE Registration Category:	C - Goods Vehicle & Bus
Quota Premium (QP) / Prevailing Quota Premium:	-/\$33,717.00
PQP Paid:	\$17,128.00
QP (Regn Cat):	*
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$0.00
Additional Registration Fee Rate:	5.00 %
Actual ARF Paid:	\$1,626.00
Vehicle Lifespan Expiry Date:	18 Jun 2038
CO2 Emission:	205.00 (g/km)
CEV/VES Rebate Utilised Amount:	0
CO Emission:	*
HC Emission:	*
NOx Emission:	

The vehicle is registered under Early Turnover Scheme.

PM Emission:

Message:

AXA INSURANCE PTE LTD 8 Shenton Way, #24-01 AXA Tower, Singapore 068811 Customer Centre #01-21 Tel:1800 8804888 Fax:-Website:www.axa.com.sg GST Registration Number: 199903512M customer.care@axa.com.sg



#### CERTIFICATE OF INSURANCE

■Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) \*Motor Vehicles (Third-Party Risks and Compensation) Rules. 1960 \*Road Transport Act. 1987 (Malaysia) \*Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE NO.

: VFX/P0347583

Account No.: 00296

Coverage

: Comprehensive

Sum Insured

: Market Value At The Time Of Loss

Name of Policy Holder

: JIT KEONG TRADING CO PTE. LTD.

Vehicle Registration No. : GBH4813D

Period of Insurance

: From 01/02/2019 To 30/11/2019 (Both Dates Inclusive)

#### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

(a) Whilst the vehicle is being used in connection with the Policyholder's business by any person provided he is in the Policyholder's employ and is driving on their order or with their

permission.

(b) Whilst the vehicle is being used for social, domestic or pleasure purposes by 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.

#### LIMITATIONS AS TO USE+

(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
This Policy does not cover
(a) Use for racing, pace-making, reliability trial or speed-testing
(b) Use for the carriage of passengers for hire or reward
(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

(09)

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 (Melaysia), 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 Notor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

AXA INSURANCE PTE LTD

Authorized Signature

Issued by - SGOAGPH

on 06/03/2019

Policyholders are warned that on the sele of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vahicle (Third-Perty Risks and Componsation act (Cap. 185).

FOR INDIVIDUAL CUSTOMERS

:Cover Upder the policy is valid only upon the payment of the full premium stated on the policy.

FOR NOW-INDIVIDUAL CUSTOMERS : Flease refer to the Premium Warranty Clause on the policy





























