

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 | 21/06/2019 10:00 |
| Date Of Accident | 20/06/2019 10:35 |
| Exact Location Of Accident | AT SPC HOLLAND PETROL STATION SERVICE ROAD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-------------------------------|
| Vehicle Registration Number | SKX2413Y |
| Insured/Policyholder | |
| Name Of Registered Owner | MUHAMMAD FIRDAUS BIN SOMSUDIN |
| NRIC No | S8610266H |
| Email Address | FIR_SOM21@ROCKETMAIL.COM |
| Mobile Phone No | (LOCAL) +65-81014561 |
| Alternative Phone No | OFFICE-81014561 |

Vehicle Particulars

| | |
|--|-------------------|
| Manufacturer | MITSUBISHI |
| Model | COLT PLUS-1.5 (A) |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE |
| 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 CAR |

Insurance Company

| | |
|---------------------------|-------------------------------|
| Name of Insurance Company | EQ INSURANCE COMPANY LTD |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | DMPPHQ19-001420 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | NUR JANNA ISMAIL |
| NRIC No | S8721466D |
| Date Of Birth | 20/06/1987 |
| Occupation | INDOOR |
| Date Of Driving Pass | 14/02/2019 |
| Driving Experience | 0 YEAR AND 4 MONTH |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-81014561 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NURJANNA0906@GMAIL.COM |

| | |
|---|----------------------------------|
| Address | BLOCK 635B SENJA ROAD #04-267 |
| Postcode | 672635 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | SPOUSE |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|------------------------------|
| Type Of Accident | COLLIDED INTO PARKED VEHICLE |
| 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) | 1 |

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 the attached Sketch Plan for the accident details.

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 | SH9715U |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

Sketch Plan Pg. 1

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.

Policyholder's Signature

Date & Time: 9.45am
21/06/19

Driver's Signature

(If driver is not the policyholder)

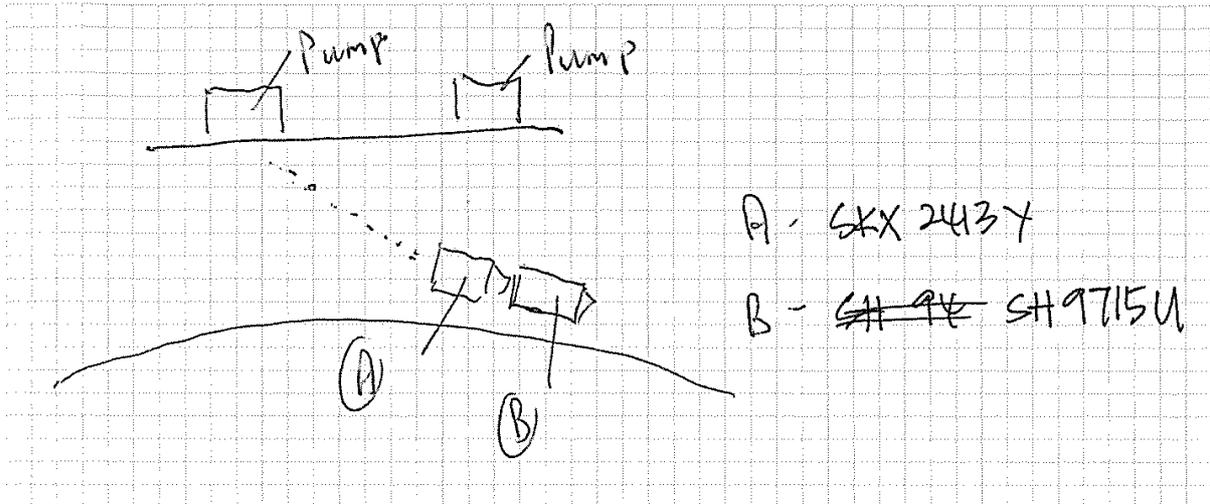
Date & Time: 9.45am
21/06/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

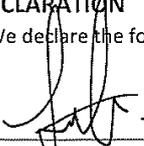


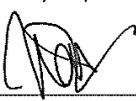
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

was at SPC Holland @ 1035, my car suddenly wasn't able to start. My brother and the SPC staff helped me to push the car aside. As the car was moving, there was a stationary taxi in front of me. As my car approaching, i wasn't able to brake on time as my brake did not engage. Hence, my car slightly hit the taxi.

DECLARATION

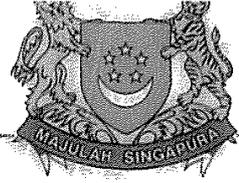
I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature
Date & Time: 21/06/19 1:45 am

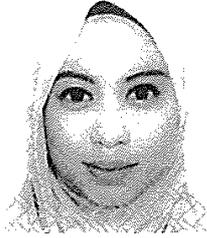

Driver's Signature
(If driver is not the policyholder)
Date & Time: 21/06/19 9:45 am

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8721466D



Name



NUR JANNA ISMAIL

نور جننا اسماعيل

Race

JAVANESE

Date of birth

20-06-1987

Sex

F

S8721466D

Country/Place of birth

SINGAPORE



5851472



NRIC No. **S8721466D**



Date of issue

12-01-2018

Address

**APT BLK 635B SENJA ROAD
#04-267
SINGAPORE 672635**

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S 8 7 2 1 4 6 6 D**
Name: **NUR JANNA ISMAIL**
Birth Date: **20 Jun 1987**
Issue Date: **14 Feb 2019**



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

| | EFFECTIVE DATE |
|--|----------------|
| Class 3A Motor cars without clutch pedals (Auto) with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 2500kg | 14 Feb 2019 |

NP 428A

Licence No: S8721466D



Certificate of Insurance 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.

PRIVATE CAR
Third Party, Fire & Theft

Certificate No.: DMPPHQ19-001420

Form: MX2
Excess:

- 1. Index Mark and Registration Number of Vehicles
SKX2413Y
- 2. Name of Policyholder
MUHAMMAD FIRDAUS BIN SOMSUDIN
- 3. Effective Date of the Commencement of Insurance for the purpose of the Act
10/03/2019
- 4. Date of Expiry of Insurance
09/03/2020
- 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.

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

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.

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.

Authorised Signatory
EQ Insurance Company Limited

misc/H0/A000416/Kong Yen Yen
 A Member of Citystate

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



scene1



scene2

