

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	22/07/2019 16:28
Date Of Accident	17/07/2019 15:30
Exact Location Of Accident	ALONG THE INGLEWOOD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD1802U
Insured/Policyholder	
Name Of Registered Owner	V-KAR TRADERS PTE LTD
Co Reg No	200606208N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96367367
Alternative Phone No	OFFICE-96367367

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	NEW GOLF-1.4 AT 5K13G5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5068535343-04
Cover Note Number	

Driver

Name of Driver	GOH CHAO XIONG, RAY
NRIC No	S9112671J
Date Of Birth	11/04/1991
Occupation	OUTDOOR
Date Of Driving Pass	30/09/2015
Driving Experience	3 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96367367
Fax Number	
Contact Number	OTHERS-96367367
Email Address	NOEMAIL

Address	BLK 124 ANG MO KIO AVENUE 6 #11-4065
Postcode	560124
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 - OPENING DOOR OF 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

ON 17/07/2019 AT 15:30HRS I WAS DRIVING DOWN A SLOPE AT THE INGLEWOOD AND SUDDENLY A PARKED LORRY GBG8163A OPENED HIS DOOR AND SLAM ONTO OUR CAR SKD1802U THAT ALL

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	GBG8163A
Vehicle Make/Model/Colour	TOYOTA DYNA
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SHANMUGAM RAMESH
NRIC/Passport Number	G7277820R
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

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:

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

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

Accident Sketch Plan

SKETCH PLAN

THE Inghenwood

A) SKD 1802U
B) GRG 8163A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER STATEMENT

DECLARATION

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

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.:

SPURMC SketchPlan Form 3/3

LETTER

MT/AE/MTRADE/150

16 Jul 2019

V-KAR TRADERS PTE LTD
35 THE INGLEWOOD
SINGAPORE 575064

Dear Policyholder

ENDORSEMENT FOR POLICY NUMBER: 5068535343-04
VEHICLE NUMBER:

Thank you for giving us the opportunity to serve you.

We confirm that from 02 Jul 2019, the following amendment(s) is/are made to this policy:

INCLUSION OF NAMED DRIVER

1. GOH CHAO XIONG

In view of this amendment, an additional premium of \$101.70 (inclusive of GST) is payable under your policy.

The terms and conditions of this policy remain unchanged.

Please attach this letter to your motor policy document as it serves as an Endorsement to your policy.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at csquery@income.com.sg. We would be most happy to assist you.

Yours sincerely



Eddie Loke
Senior Underwriting Manager
Motor Insurance

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of V-KAR TRADERS PTE. LTD. (200606208N)

Date: 02/05/2019

Following Are The Brief Particulars of :

Registration No.	200606208N
Company Name	V-KAR TRADERS PTE. LTD.
Former Name if any	
Incorporation Date	29/04/2006
Company Type	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
Status	Live Company
Status Date	29/04/2006

Principal Activities

Activities (I)	MANAGEMENT CONSULTANCY SERVICES (GENERAL) (70201)
Description	
Activities (II)	RENTING AND LEASING OF PRIVATE CARS WITHOUT OPERATOR (77101)
Description	

Capital

Issued Share Capital (AMOUNT)	Number of Shares *	Currency	Share Type
10000	10000	SINGAPORE DOLLARS	ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital (AMOUNT)	Number of Shares	Currency	Share Type
10000		SINGAPORE DOLLARS	ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares	Currency
------------------	----------

Authentication No. L19294

Page

NEW MEDIA RESOURCES

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY
(ACRA)

bizfile

IT EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY
DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of V-KAR TRADERS PTE. LTD. (200606208N)

Date: 02/05/2019

Abbreviation

- UL - Local Entity not registered with ACRA
- UF - Foreign Entity not registered with ACRA
- AR - Annual Return
- AGM - Annual General Meeting
- FS - Financial Statements
- FYE - Financial Year End
- OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority

Note:

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.aiz.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO : ACRA190502175709

DATE : 02/05/2019

This is computer generated. Hence no signature required.



Authentication No: L19294296T

Page 3 of 3

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Date: 02/05/2018

Business Profile (Company) of V-KAR TRADERS PTE. LTD. (200606208N)

Registered Office Address: 35 THE INGLEWOOD
THE INGLEWOOD
SINGAPORE (575064)

Date of Address: 17/05/2016

Date of Last AGM: 30/09/2010

Date of Last AR: 21/06/2011

FYE As At Date of Last AR: 31/03/2010

Audit Firms

NAME

Charges

Charge No.	Date Registered	Currency	Amount Secured	Charges(s)
------------	-----------------	----------	----------------	------------

Officers/Authorised Representative(s)

Name	ID	Nationality	Source of Address	Date of Appointment
THANARAJ S/O RAMAKRISHNAN	S7128343G	SINGAPORE CITIZEN	ACRA	29/04/2006

112 LENTOR STREET
SINGAPORE (786822)

Director

Shareholder(s)

Name	ID	Nationality/Place of incorporation/Origin	Source of Address	Address Changed
THANARAJ S/O RAMAKRISHNAN	S7128343G	SINGAPORE CITIZEN	ACRA	05/03/2018

112 LENTOR STREET
SINGAPORE (786822)

Ordinary (Number)

10000

Currency

SINGAPORE DOLLARS

Authentication No. L192

Pa

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



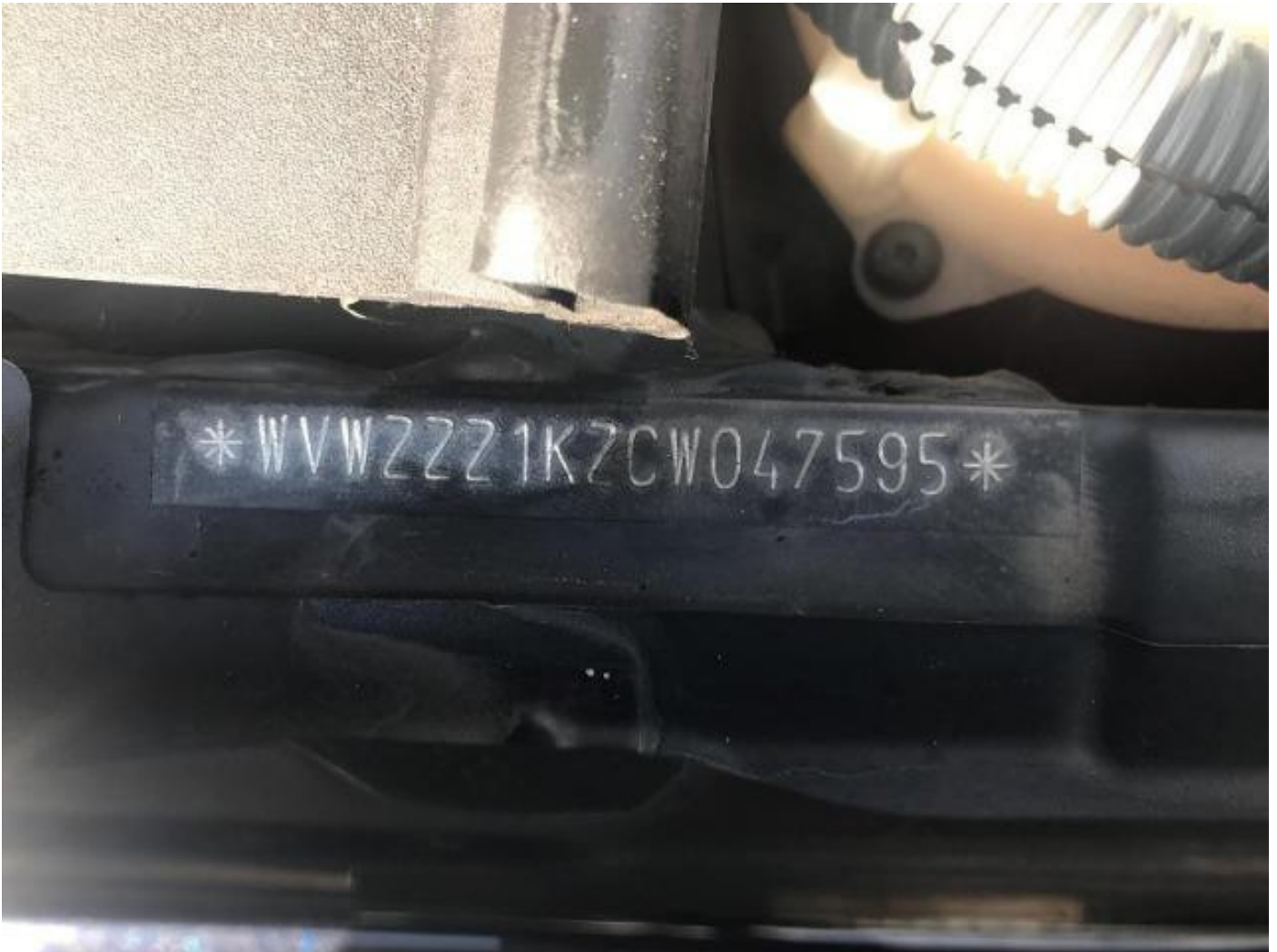
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

