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.
- 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

aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	26/07/2019 09:16
Date Of Accident	25/07/2019 10:40
Exact Location Of Accident	TUAS ROAD & PIONEER RD JUNCTION
Country/State of Loss	SINGAPORE
1	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PA9813S
Insured/Policyholder	
Name Of Registered Owner	SINGATAC ENGINEERING PTE LTD
Co Reg No	199700913E
Email Address	KHIN@SINGATAC.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-68979566
Vehicle Particulars	
Manufacturer	NISSAN
Model	URVAN-3.0 D MICROBUS 4DR 5MT ABS AIRBAG (M)
Exact Purpose for which vehicle was being used at 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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMBPHQ18-000031

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Cover Note Number

Name of Driver AUGUSTINE AROKIARAJ

Passport No/FIN G7832713N
Date Of Birth 12/05/1985
Occupation OUTDOOR
Date Of Driving Pass 08/08/2008

Driving Experience 10 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81460093

Fax Number

Contact Number

EMail Address NOEMAIL

Address N/A

Postcode

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 - HEAD TO REAR**

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

YES

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

2

Passenger 1

NAME: : KARAKKA

GENDER: : MALE

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

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any audio recorded?

YES

Was there any video captured by Car Camera? NO

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBG1959S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

PALANIVELU RAGURAMAKRISHNAN Name of Driver

NRIC/Passport Number G7456144L 90210348 **Contact Number**

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 16

Sketch Plan Pg. 1

SKETCH PLAN

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- 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.:

I AM 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

SKETCH PLAN		
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DESCRIBE CIRCUMSTANCES O	E THE ACCIDENT	
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thren I went down to	s died & found that	Vehicle B had let outs my
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V.		
		☐ Claim own policy
		Claim third party Claim OD (15 at other works hop
		For record purpose
DECLARATION		Policy No. DWBPHO 18 -000031.
/We declare the foregoing particu	lars are true in every respect.	Insurer Ob Veh.No. PAGE 134
	~ \	<u> </u>
	4.22w - 1. King.	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 lel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg reg na. 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

BUS (SCHEDULE 5) Third Party, Fire & Theft

Form: LCVB1 Excess:

YEID-AC Additional:

EQ Insurance-MARS Motor

Accident Help Center

6311 3211

Section 2:

Certificate No.: DMBPHQ18-000031

1. Index Mark and Registration Number of Vehicles PA9813S

2. Name of Policyholder

SINGATAC ENGINEERING PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act 27/09/2018

4. Date of Expiry of Insurance 26/09/2019

5. Person or Classes of persons entitled to drive*

Bus (MZ601) - Any of the following :-

1. The Policyholder

2. Any person on the order or with the permission of the Policyholder

* 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*

(1) Use only for the carriage of passengers (Policyholder's employees only) or goods in connection with the Policyholder's business.

THE POLICY DOES NOT COVER:

- (1) Use for racing pace- making, reliability trial or speed-testing.
- (2) Use for the carriage of passengers for hire and reward.
- (3) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

*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.

IWE 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: HSBC Capital (Asia) Pte Ltd

B000002/Acclaim Insurance Brokers Pte Ltd Date of Issue: 17/08/2018 09:27

Authorised Signatory

EQ Insurance Company Limited

A Member of Citystate

Exp No.: DMBPHQ17-000053

S\$1,500.00

CI,IC,DL Pg. 2

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WORK PERMIT Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore

Employer SINGATAC ENGINEERING DIE



Nome AUGUSTINE AROKIARAJ Work Permit No. Sector: 0 33484763 MARINE





K0626907

VISIT PASS Immigration Regulations

25-07-2018

Name AUGUSTINE AROKIARAJ



FIN G7832713N

Date of Birth Sex 2-05-1985 M

Nationality NDIAN

MULTIPLE JOURNEY VISA ISSUED TO THE TO SURREIDER THE CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.























