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D.O.A : 5/8/19-09:40	i-Motor Claim Form		
OD / TP-/ Reporting Only	i-Motor W/O (Within: OD 2)	irs, TP 4hrs)	
	i-Photo Uploaded		*:
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand	to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax	c:
TP Particulars: Veh Nosun	Zaylos . INC	()/Non-INC()	
Owner / Driver: (Tel:)
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by : (Date:	Time:)
Insured/Driver Liability: (%)) [Note-Est. Status (WO): N: 0-	20%; P: 21-79%. P: 80-100	0%]
Year of Registration: ()	Warranty: YES ()/NO()	
Excess: (\$) Loading: \$	1,000 ()/\$2,000 ()		
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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.

 by the loagement of this report to the insurers, you hereby consaforesaid. 	sent to the archiving of this report at the centre and to copies of the report being made available	
	ACCIDENT STATEMENT	
Date Of Report	26/08/2019 20:02	
Date Of Accident	05/08/2019 09:40	
Exact Location Of Accident	71 WOODLANDS AVE 10	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBA4403R	
Insured/Policyholder		
Name Of Registered Owner	2XK ENGINEERING PTE LTD	
Co Reg No	201718877Z	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-82015212	
Alternative Phone No	OFFICE-82015212	
Vehicle Particulars		
Manufacturer	TOYOTA	
Model	DYNA 150 MANUAL	
Exact Purpose for which vehicle was being used at time of accident	WORKING	
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
If No, Please state action to be taken	REPORTING ONLY	
	26 2 3 2 3 2 1 3 2 1 3 2 3 3 3 3 3 3 3 3 3	

COMMERCIAL VEHICLE

Insurance Company

Vehicle Category

Name of Insurance Company TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number MS009097

Cover Note Number

Driver

Name of Driver GUTTULA MOHAN BHASKAR GOURI SHANKAR

 Passport No/FIN
 G7461513P

 Date Of Birth
 01/06/1971

 Occupation
 INDOOR

 Date Of Driving Pass
 20/01/2014

Driving Experience 5 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82015212

Fax Number

Contact Number OFFICE-82015212

EMail Address NOEMAIL

71 WOODLANDS AVE 10 Address

#04-11 WOODLANDS INDUSTRIAL XCHANGE

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 NO COLLISION

2

NO

NO

NO

NO

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 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?

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SLR7410S

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 5. 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)

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:
 - 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.

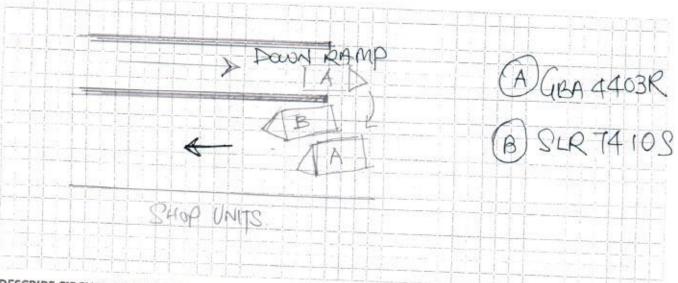
Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MY DRIVER WAS DRIVING DOWN THE RAMP AND TURNING
RIGHT TO EXIT THE BUILDING. BUT VEHICLE B WAS PARKED
THEGALLY ALONG THE RIGHT SIDE OF THE RAMP, AS IT
WAS A SHARP TURN SO MY DRIVER ACCIDENTIALLY SCRATCHED
THE CIDE OF THE VEHICACE.
AT FIRST MY DRIVER WAS NOT AWARE OF THE ACCIDENT, UNTIL WE
RECIEVED THE VIDEO FUTIAGE FROM THE BUILDING MANAGEMENT.

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 .:



WITNESS CONTACT NO

HS AUTOMOTIVES PTE

BIK 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotivespl@gmail.com PITOYON MAKE/MODEL: VEHICLE NO: 05/08/2019 DAY/MUNTH/YEAR AMV PM TIME DATE OF ACCIDENT LOCATION OF ACCIDENT 71 WOODLANDS AVENUE 10 WOODLANDS INDUSTRIAL YCHANGE WORKINS EXACT PURPOSE USE DURING ACCIDENT CAR OWNER BNGMEERING OKK NAME OF CAR OWNER 5217 1068 CONTACT NO MRIC POC. REPORTING ONLY THIRD PARTY CLAIM TYPE TOKO MARINE INSURANCE COMPANY THIRD PARTY FIRE & THEFT COMPREHENSIVE TYPE OF COVERAGE MS009097 POLICY NO IF NOT- KINDLY FILL IN BELOW **ACCIDENT DRIVER** AS ABOVE SHANKAR MOHAN BHASKAR NAME OF DRIVER 07461513F NO OF PASSENGER/S NRIC 01.06.7 DATE OF BIRTH SITE OUTDOOR OCCUPATION 1,2014 DATE OF DRIVING PASS FEMALE GENDER CONTACT NO MODOCANDS AVE 10, MODICIAND INDUSTRIAL K CHANCE #64-1 **ADDRESS** (NO) IF YES- REGISTRATION NO DRIVER OWN ANY VEHICL RELATIONSHIP EMPLOYEE/SPOUSE IF NOT: RAINING WEATHER CONDITION CLEAR OTHER: DRY WET OTHER: ROAD SURFACE NO) IF YES- NAME: ANY INJURIES CONTACT NO POLICE REPORT NO/ IF YES- LOCATION: NO/ YES VIDEO FOOTAGE **3RD PARTY INFO** SLR 74105 NO OF PASSENGER/S VEHICLE B NO NAME CONTACT NO NO OF PASSENGER/S VEHICLE C NO NO OF PASSENGER/S VEHICLE D NO NO OF PASSENGER/S VEHICLE E NO NO OF PASSENGER/S VEHICLE F NO **ANY WITNESS**



WORK PERMIT

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

Employer

2XK ENGINEERING PTE. LTD.



GUTTULA MOHAN BHASKAR GOURI SHANKAR Name

Work Permit No. 0 32773834

CONSTRUCTION



For LKK/NAC Use Only



K0054084

VISIT PASS

Immigration Regulations

GUTTULA MOHAN BHASKAR GOURI SHANKAR

Download SGWorkPass App to check status





Sex

Date of Birth 01-06-1971

G7461513P

For LKK/NAC Use Only

Nationality

INDIAN

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS ES!

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ASSTORATION AND MARINE PEACTORS THE WELL STORY WHEN THE STREET STORY AND STREET STATES.

19 Dat 300

S.I No BOOG 300690

For LKK/NAC Use Only

TO THE PERSON OF THE PERSON OF

10. 488A

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



Certificate of Insurance

FORM MZ300

Account No: 2382DDA

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)

Policy No.: MS009097 (Commercial Vehicle)

Index Mark and Registration Number of Vehicle

GBA4403R

Chassis No.: JTFAT35Y903000886

2. Name of Policyholder

2XK ENGINEERING PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Act

01/08/2019 (00:00:00)

Date of Expiry of Insurance

31/07/2020

Persons or Class of Persons entitled to drive*

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 under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use*

Use in connection with the policyholder's business.

Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholders' business.

3) Use for social domestic and pleasure purposes.

The policy does not cover-

Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
 Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles. (Third-Party Risks and Compensation) Act (Chapter-189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio. Marine insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation).

ADDITIONAL INFORMATION

Third Party Fire & Theft

Limit for total loss or theft:

Prevailing Market Value

Financial Interest:

Insurance Plan:

HUI HUA CREDIT PTE LTD

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

User ID: 2382DDA

Page 1

Printed: 23-07-2019 15:03:56