

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	09/10/2019 15:47
Date Of Accident	05/10/2019 09:30
Exact Location Of Accident	ALONG WEST COAST HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB9154X
Insured/Policyholder	
Name Of Registered Owner	MENCAST SUBSEA PTE LTD
Co Reg No	199606632K
Email Address	SISCA@MENCAST.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65461823

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR-3.0 5M/T ABS 2DR 2WD EURO 5 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	MT20181374

Driver

Name of Driver	MUHAMMAD SAID BIN KAMARUDIN
NRIC No	S8327276G
Date Of Birth	15/08/1983
Occupation	OUTDOOR
Date Of Driving Pass	21/05/2014
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87508894
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	SINGAPORE
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 - CHANGE/CROSS LANE
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?	
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 the 05/10/2019, at 0930Hrs I was driving back from office heading towards Seah Im to have breakfast. I was overtaking vehicle B(GBF4980P) which was ahead of my vehicle in the middle lane. I changed lanes to the right, and signalled left to change lanes back to the middle lane. While trying to enter the middle lane, vehicle B sped up and collided into the rear left portion of my vehicle. We stopped at the next shoulder lane to examine and exchange particulars. No one was injured in this incident.

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	GBF4980P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HO KAH LENG
NRIC/Passport Number	S1393807E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

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: 09/10/19, 1600hrs



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

I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claims.

FORM 645, 01/01/2019, 3.0

COVER NOTE



GREAT AMERICAN INSURANCE COMPANY

UEN: T15FC0029B GST REG. NO.: M90370081T
3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER
SINGAPORE 039190
TEL: +65 6804 6000
FAX: +65 6235 2616

MOTOR COVER NOTE: MT20181374

The Insured mentioned in this Cover Note, having proposed for insurance in respect of the Motor Vehicle described, is hereby HELD COVERED under the terms of the Insurer's usual form of Motor Policy applicable thereto for the period mentioned unless the cover is terminated by the Insurer by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium payable for such insurance will be charged for the time the Company has been on risk.

The Insurer	: GREAT AMERICAN INSURANCE COMPANY
The Insured	: MENCAST SUBSEA PTE LTD
Insured NRIC/Passport No/ ROC	: 99606632K
Policy Coverage	: COMPREHENSIVE
Make And Description Of Vehicle	: NISSAN CABSTAR 3.0 5M/T ABS 2DR 2WD 3.4T
Vehicle Registration No.	: GBB9154X
Year Of Manufacture	: 2010
Engine No.	: ZD30256676K
Chassis No.	: JN1SC2F24Z0801510
Engine Capacity/ Tonnage/ Seater	: 1.57 TONS
Hire Purchase	: NIL
Value (S\$)	: AS PER MARKET VALUE
Period of Insurance	: FROM: 01/09/2018 TO: 31/07/2019
Excess (S\$)	: Section I : \$600 : Section II : Nil : Windscreen Excess : \$100
Great American Authorized Workshop	: YES

I/WE HEREBY CERTIFY THAT POLICY TO WHICH THIS CERTIFICATE RELATES IS ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) ACT (CHAPTER 189) AND PART IV OF THE ROAD TRANSPORT ACT 1987 (MALAYSIA)

For and on behalf of Great American Insurance Company

Great American Insurance Company
Authorized Signatory

Date of Issue	: 03/08/2018
Intermediary	: HL Suntek Insurance Brokers Pte Ltd
Cover Note Validity	: 30 days from the Date of Issuance

MTR/COVERNOTE/V02/18

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8327276G**



Name

MUHAMMAD SAID BIN KAMARUDIN

Race

BOYANESE

Date of birth

15-08-1983

Sex

M

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number: **S8327276G**

Name:

**MUHAMMAD SAID BIN
KAMARUDIN**

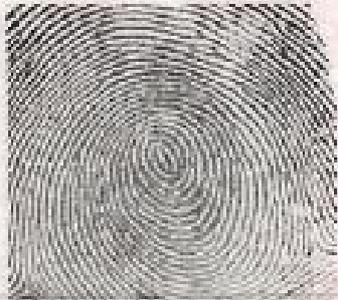
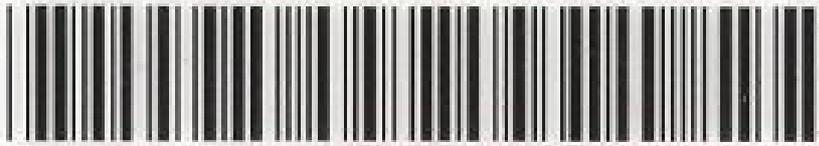
Birth Date: **15 Aug 1983**

Issue Date: **21 May 2014**



Identification Card

5317641



NRIC No. **S8327276G**

Date of issue

13-06-2014

APT BLK 180B MARSILING ROAD #07-2224
SINGAPORE 732180

NRIC No: **S8327276G** Date: **16/06/2016**

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg **21 May 2014**



NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

