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.									
	ACCIDENT STATEMENT								
Date Of Report	09/10/2019 11:11								
Date Of Accident	08/10/2019 17:15								
Exact Location Of Accident	JUNCTION OF MARYMOUNT								
Country/State of Loss	SINGAPORE								
[DETAILS OF OWN VEHICLE								
Vehicle Registration Number	YM9373A								
Insured/Policyholder									
Name Of Registered Owner	SRI THUVIMUGA GANAPATHY SERVICES								
Co Reg No	53109640L								
Email Address	NOEMAIL								
Mobile Phone No									
Alternative Phone No	OFFICE-81982853								
Vehicle Particulars									
Manufacturer	MITSUBISHI								
Model	CANTER								
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	EQ INSURANCE COMPANY LTD								
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT								
Fleet Policy	NO								
Policy Number	DMCHHQ19-000091								
Cover Note Number									

Driver

Name of Driver SANGAN S/O VELOO

NRIC No S1417555E

Date Of Birth 12/11/1960

Occupation INDOOR

Date Of Driving Pass 25/02/1987

Driving Experience 32 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81982853

Fax Number
Contact Number

EMail Address NOEMAIL

BLK 304 HOUGANG AVE 5 #02-407 (S) 530304

Address 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 NO

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)

0

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 08/10/2019 AT ABOUT 1715HRS, WHILE I WAS TRAVELLING ALONG THE JUNTION OF MARYMOUNT, VEHICLE SLP7148K INFRONT OF ME SUDDEN BRAKE, I COULD NOT STOP IN TIME RESULTING MY VEHICLE HIT HIS REAR PORTION.

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 **SLP7148K**

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver TAN SIONG HOE DONALD

NRIC/Passport Number S7028480D **Contact Number** 90480088

Address Postcode

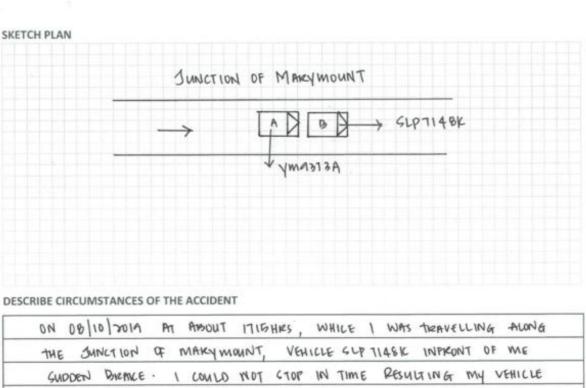
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 15

Sketch Plan



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DECLARATION

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

SRI THUVIMUGA GANAPATHY SERVICES
Policyholder's Signature
Policyholder's Signature

Date & Time:

Driver's Signature

(If diver is not the policyholder)
Date & Time: 1/10/19 (100/19)

Reporting Centre/Parsonnel Name: Etwin NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

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- 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:
 - (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.

SRI THUVIMUGA GANAPATHY SERVICE
Policyholdegs Nec-831896401

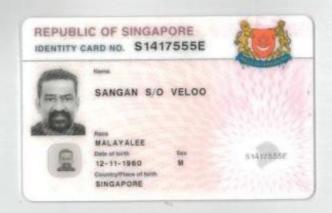
Date & Time:

Briver's lignature

(If driver is not the policyholder)
Date & Time: 4 10 14 1100hvs

Reporting Centre F Name: EKANN NRIC/FIN No.:

Driver's Nric & Driving License (Front)





Driver's Nric & Driving License (Front)





Certificate of Insurance

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 009110 tol 65 6223 9433 | fax 65 6224 3803 | www.eqinsurance.com.ag 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.

COMMERCIAL VEHICLE HIRE (SCH II) Third Party, Fire & Theft

Certificate No.: DMCHHQ19-000091

 Index Mark and Registration Number of Vehicles YM9373A Form: LCVT1 Excess:

All Claims SGD1,000.00 YEID-AC Additional SGD3,000.00

EQI Motor Accident

Hotline 6311 3211

Name of Policyholder SRI THUVIMUGA GANAPATHY SERVICES

 Effective Date of the Commencement of Insurance for the purpose of the Act 15/04/2019

 Date of Expiry of Insurance 14/04/2020

Person or Classes of Persons entitled to drive*
 Goods Carrying - Hire Type (MZ301). 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 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*

(1) Use in connection with the Insured's business. (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. (3) Use for social domestic and pleasure purposes. THE POLICY DOES NOT COVER:

(1) Use for racing, pace-making, reliability trial or speed-testing (2) Use whilst drawing a greater number of trailers in all that is permitted by Law (3) Use for the carriage of passengers for hire or reward (4) 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.

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.

HP: Abwin Pte Ltd misjb/HO/AB00342/Abwin Pte Ltd



Authorised Signatory EQ Insurance Company Limited





Accident Photo



Accident Photo











