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.	3 · · · · · · · · · · · · · · · · · · ·
	ACCIDENT STATEMENT
Date Of Report	16/10/2019 09:49
Date Of Accident	13/10/2019 22:30
Exact Location Of Accident	PSA BRANI GATE 2 CARGO LOADING/UNLOADING
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XB9881U
Insured/Policyholder	
Name Of Registered Owner	YISHUN TOWING PTE LTD
Co Reg No	200106908W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64588480
Vehicle Particulars	
Manufacturer	ISUZU
Model	CYZ50K
Exact Purpose for which vehicle was being used a 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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMCOHQ19-000007

Driver

Cover Note Number

Name of Driver SHANMUGAM BALAJI

 NRIC No
 G7943609M

 Date Of Birth
 17/12/1985

 Occupation
 INDOOR

 Date Of Driving Pass
 19/07/2010

Driving Experience 9 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90617239

Fax Number
Contact Number

EMail Address NOEMAIL

Address 4015 ANG MO KIO IND PARK 1 #01-502

Postcode 56963

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 COLLIDED INTO PARKED 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

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

I WAS DRIVING MY TOW TRUCK WITH A TOW IN CHASSIS BEHIND MY TRUCK GOING UP THE CARGO RAMP. HALFWAY THROUGH THE TOWING, THE CHAIN WHICH I USED TO TIE THE CHASSIS SUDDENLY GAVE WAY FROM MY TOW TRUCK AND IMMEDIATELY THE CHASSIS STARTED TO ROLL BACKWARDS AND COLLIDED ONTO VEHICLE B (SKC7711P). DUE TO THE STRONG IMPACT, VEHICLE B (SKC771P) SPINNED HALF ROUND AND COLLIDED ONTO VEHICLE C (SFH1268A) WHICH IS ALSO A STATIONARY VEHICLE. MY TOW TRUCK WHICH IS STILL AT THE CARGO RAMP ROLLED DOWNWARDS AND HIT THE PILLAR OF THE CARGO. I WISH TO STATE THAT I HAVE DONE ALL SAFETY CHECK FOR THE CHASSIS. HOWEVER THE ACCIDENT STILL COULD NOT BE AVOIDED.

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 SKC7711P

Vehicle Make/Model/Colour

VEHICLE B

Details Of Properties
Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SFH1268A

Vehicle Make/Model/Colour

Details Of Properties VEHICLE C
Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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:

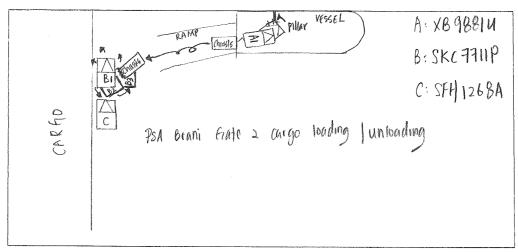
MEN HOCK TECK

NRIC/FIN No.:

STARMY Sketch Flankover, y2

Page 4 of 14

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my tow truck with a on tow chassics behind my truck going up the cargo ramp. Half way through the towing, the chain which I used to fie the chassics suddenly give way from my tow truck and immediately the chassics start to voll backward and collidated onto vehicle B (SKC 7771P). Due to the impact, rehicle B (SKC 7771P) spinned half round and collidated onto vehicle C (SFH 12-68 A)
I used to fie the chassics suddenly give way from my tow truck
and immediately the chassics start to will backward and collidated
onto vehicle B (SKC 7771P). Due to the impact, rehicle B (Skc 7771P)
spinned half round and collidded onto whicle C (SFH 1288 A)
which is also a stationery vehicle.
which is also a stationery vehicle. My tow truck which is still at the cargo ramp rolled downwards and hit the pillar of the cargo.
and hit the pillar of the cargo.
wish to state that I have clone all safety check for the chassics :
however the accident still could not be avoided.
. M:
1,1
DECLADATION

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

Policyholder's Signature Date & Time:

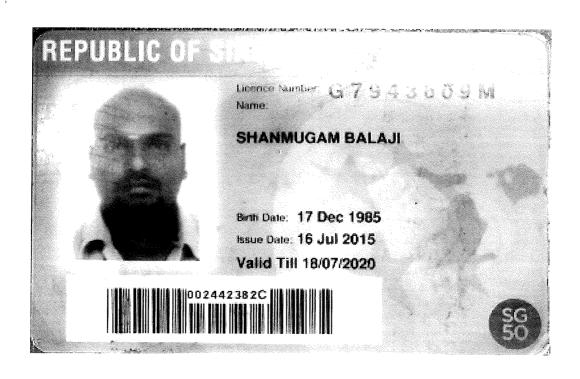
Oriver's Signature

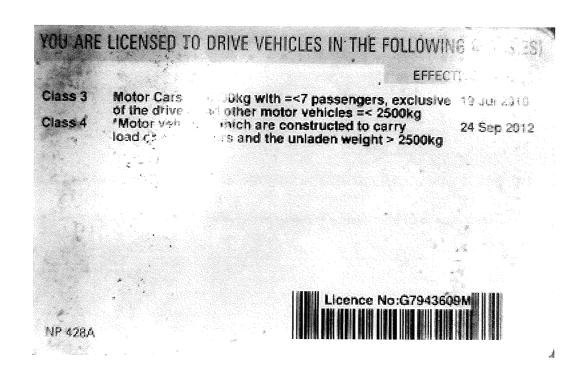
(If driver is not the policyholder)
Date & Time:

NRIC/FIN No.:









EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg 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 OTHERS(SCH VI) Third Party

Certificate No.: DMCOHQ19-000007

1. Index Mark and Registration Number of Vehicles XB9881U

Form: MZ801 Excess:

All Claims SGD1,500.00 YEID-AC Additional SGD3,000.00

2. Name of Policyholder
YISHUN TOWING PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act 01/01/2019

4. Date of Expiry of Insurance 31/12/2019

EQ Insurance-MARS Motor Accident Help Center **6311 3211**



5. Person or Classes of Persons entitled to drive*
Special Type (MZ801) - 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.

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.

For assistance, please contact Instracta Management Pte Ltd (GIA Reg. No: C004436) Tek 6285 9330 HP: 9689 0102 Email: instrade.mgt@gmail.com

> Authorised Signatory EQ Insurance Company Limited

unwsbh/HO/A000283/Instrade Management

A Member of Citystate



Accident Photo



Accident Photo



Accident Photo







