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	04/11/2019 17:23
Date Of Accident	02/11/2019 12:30
Exact Location Of Accident	BUKIT BATOK ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XE2430T
Insured/Policyholder	
Name Of Registered Owner	TENG LENG INDUSTRIES PTE LTD
Co Reg No	200405939C
Email Address	TENGLENGINDUSTRIES@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-98648942
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FUSO FV51SS3VDEA
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ19-005383
Cover Note Number	

Driver

Name of Driver STALIN CHAKRAPANI

NRIC No G5301081X
Date Of Birth 05/03/1971
Occupation OUTDOOR
Date Of Driving Pass 16/11/2012

Driving Experience 6 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98648942

Fax Number
Contact Number

EMail Address TENGLENGINDUSTRIES@GMAIL.COM

71 PIONEER RD Address

639591 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 - CROSS JUNCTION**

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? NO

Was any injured conveyed to hospital by

ambulance?

NO

2

YES Was any other material or property damaged?

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

NO 1

NO

NO

Number of Passengers (Including Driver)

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 ATTACHED SKETCH PLAN.

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

Vehicle Registration Number

SMQ7788X

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

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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)

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.

TENG LENG INDUSTRIES PTE LTD **BLK 458 CHOA CHU KANG AVENUE 4 #09-203 SINGAPORE 680458** TEL: 6791 5909 FAX: 6791 5602 H/P: 9673 2895 Policyholder's Signature Driver's Signature Reporting General Personnial & Signature TEL: 6791 5909 FAX: 6791 5602 (\$msN9673 2895 Date & Time: (If driver is not the policyholder) Date & Time: Please note that you might be able to submit an Own Damage Claim under own policy within 14 days. () Claim OD/TP at other workshop () Claim Own Damage () Claim TP (✓) Reporting Only Workshop Name :

Sketch Plan Pg. 2

	SUKIT BATOK AVS	
LENGT		A - VG 1267
/B1@/		A-XE2430T
14 94		B-CMO1188X
RD.		
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
	1	
on 02/11/19, (a)	about 12:30 hrs, m	ny volice was stationary
along Bulet Bat	of Road, planning to	turn luto Bukit Batok Ave S
J		
when suddenly	my reliate Stid down	and let luto relieve believe
1'	I	
SMQ7788X.		
3111 4 ((00) 1		
Manual Control of the		
		PERSON & PERSONS IN CARPORATE AND
		K 458 CHOA CHU KANG AVENUE 4
ic leng-industr		K 458 CHOA CHU KANG AVENUE 4 + #09-203 SINGAPORE 680458
IG LENG-INDUSTR LK 458 CHOA CHU KAN	IG AVENUE 4	K 458 CHOA CHU KANG AVENUE 4 + #09-203 SINGAPORE 680458
DECLARATION VG LENG-INDUSTR LK 458 CHOA CHU KAN #09-203 SINGAPORE	IG AVENUE 4 E 680458	K 458 CHOA CHU KANG AVENUE 4 + #09-203 SINGAPORE 680458
IG LENG-INDUSTR LK 458 CHOA CHU KAN	IG AVENUE 4 E 680458	791 5909 FAX: 6791 5602 H/P: 9673 2895

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 rea 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 PRIVATE (SCH I)

Comprehensive Classic

Certificate No.: DMCPHQ19-005383

1. Index Mark and Registration Number of Vehicles

Classic Plan - EQ Authorised Workshop Only

Form: LCVP1 Excess:

Section 1:

\$\$2,000.00

YEID-AC Additional:

XE2430T

2. Name of Policyholder

TENG LENG INDUSTRIES PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act 02/11/2019

4. Date of Expiry of Insurance

01/11/2020

Hotline

5. Person or Classes of persons entitled to drive* Goods carrying - (MZ300) Authorised Driver.

Any of the following:-

1. The Policyholder

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

6311 3211

EQI Motor Accident



* 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 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

3)Use for social domestic and pleasure purposes.

THE POLICY DOES NOT COVER

1)Use for hire or reward or for racing pace-making reliability trial or speed testing.

2)Use whilst drawing a greater number of trailers in all than 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.

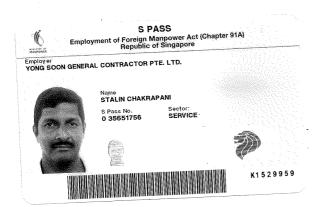
Hire Purchase: UNITED OVERSEAS BANK LIMITED

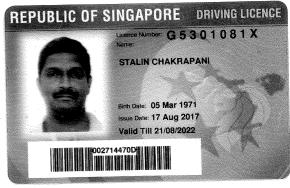
A000367/KH Agency Date of Issue: 30/10/2019 10:47

Authorised Signatory EQ Insurance Company Limited

Exp No.: DMCPHQ18-007255

A Member of Citystate





VISIT PASS Immigration Regulations 21-06-2019 Name STALIN CHAKRAPANI FIN G5301081X Date of Birth 05-03-1971 Nationality 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)

EFFECTIVE DATE

Class 2B Class 3

Class 4

Motorcycles =< 200 cc
Motor cars with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg
Motor vehicles which are constructed to carry load
or passengers and the unladen weight > 2500kg
Motor vehicles which are not constructed to carry
load or passengers and the unladen weight =< 7250kg

Licence No:G5301081X

NP 428A













