

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	18/11/2019 18:29
Date Of Accident	15/11/2019 12:00
Exact Location Of Accident	DUXTON ROAD CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBF6011Z
Insured/Policyholder	
Name Of Registered Owner	BERJAYA BUILDCON PTE LTD
Co Reg No	200923497E
Email Address	SALES@MIA.COM.SG
Mobile Phone No	(LOCAL) +65-98439449
Alternative Phone No	OFFICE-98439449
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FUSO
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT111383
Cover Note Number	
Driver	
Name of Driver	LOE CHANG HWA
NRIC No	S6982714D
Date Of Birth	30/10/1969
Occupation	OUTDOOR
Date Of Driving Pass	21/02/1997
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98439449
Fax Number	
Contact Number	OTHERS-98439449
EMail Address	SALES@MIA.COM.SG

Address	74A LORONG 25A GEYLANG
Postcode	388257
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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
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

PLEASE REFER TO SKETCH PLAN

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	SLN9022L
Vehicle Make/Model/Colour	
Details Of Properties	
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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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: 11/11/2019


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

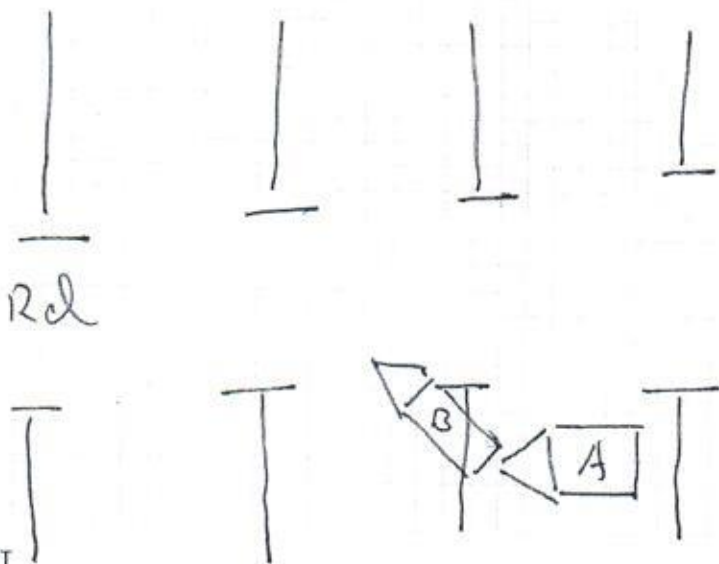

Reporting Centre Personnel's Signature
Name: 18/11/2019
NRIC/FIN No.:

SKETCH PLAN

A SLN 9022L

B GF 6011Z

Duton Rd



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving my lorry slowly at duton Rd and I was reversing my lorry slowly into the parking lot. Suddenly I hear a horn from behind so I stopped my lorry and alighted and found I have collided onto a car SLN 9022L.

Remark: I want say that the impact is not big and the next party only have some paint come out from his car, I have taken the damage photo on scene.

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.:

18/11/2019
Kosha

Date of Accident : 15 Nov 2019 Accident Time: 1200 (24-HR-Format)

Accident Place : ~~Dutton Rd~~ ^X car Park

Vehicle No. (Car Plate No.) : GSF 6011Z Make/Model: FUSO

Insurance Company : Tokio Marine Policy No: MT1111383

Owner or Company Name / IC No. : BERJAYA BUILDCON PTE LTD 200923497E

Owner or Company Contact No. : Owner's Hp 98439449 Company Tel

DRIVER'S Name / IC No. : LOE CHANG HWA (S69827140)

DRIVER'S Date Of Birth : 30-10-1969 DRIVER'S License Pass Date 21 Feb 1997

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling (Employee) Others:

DRIVER'S Address : 74A LORONG 25A GEYLANG Singapore 388257

DRIVER'S Contact No./ Alt No. : 1) 2) 98597868

DRIVER'S Occupation : INDOOR (OUTDOOR) (e.g. working inside or outside office)

Email Address : sales@mia.com.sg

Weather & Road Surface : (CLEAR & DRY) RAINING & WET \ AFTER RAIN & WET

Reporting Type : (Reporting Only) Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): 01

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): No injury

Other Party Driver's Particular (if any)

Vehicle No: SLN 9022L Vehicle No: _____

Vehicle Make/Model: _____ Vehicle Make/Model: _____

Name Driver: _____ Name Driver: _____

IC No. Driver/Contact: _____ IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:





TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MZ300

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.: MT111383 (Commercial Vehicle)

1. Index Mark and Registration Number of Vehicle GBF6011Z Chassis No.: FEA01BA20474
2. Name of Policyholder BERJAYA BUILDCON PTE LTD
3. Effective date of the Commencement of Insurance for the purposes of the Act 28/12/2018 (00:00:00)
4. Date of Expiry of Insurance 27/12/2019
5. 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 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 and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

- 1) Use in connection with the policyholder's business.
2) 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:-

- 1) Use for hire or reward or for racing, pace-making, reliability trial or speed-testing.
2) 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) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 2693DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 750.00	(Original Excess : SGD 750.00)
	Additional Excess for Young, Elderly or Inexperience Driver(s)	SGD 3,000.00	(All Claims)
	WindScreen Excess	SGD 100.00	
Financial Interest:	MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature