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TP Panticulars: Veh No: 5	1A 6527H	. INC()/Non-INC().	
Owner / Driver: (is a second		Tel:)
Policy No: () Pe	eriod: ()	Cover Type: ().
Confirmed by : (•	Dater.	Tlmer)
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20	%; P: 21-79%. I	P: 80-10	0%]
Year of Registration: ()	Warranty: YES ()/NO(>		
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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 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.

NAME AND ADDRESS OF THE PARTY O	ACCIDENT STATEMENT
Date Of Report	20/11/2019 15:25
Date Of Accident	18/11/2019 15:10
Exact Location Of Accident	OCEAN DRIVE ROUNDABOUT (SENTOSA)
Country/State of Loss	SINGAPORE
PERSONAL PROPERTY OF THE PROPERTY OF	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GY5948T
Insured/Policyholder	
Name Of Registered Owner	CIVILLAND CONSTRUCTION & ENGRG PTE LTD
Co Reg No	1999000253C
Email Address	CIVILLAND@MSN.COM
Mobile Phone No	(LOCAL) +65-90270437
Alternative Phone No	OFFICE-90270437
Vehicle Particulars	
Manufacturer	ISUZU
Model	NHR69E-3.1 D (M)
Exact Purpose for which vehicle was being used at time of accident	A STATE OF THE PROPERTY OF THE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE, LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	8VCT1838230
Driver	
Name of Driver	KANDASAMY KARTHEEBAN
Passport No/FIN	G7285408Q
Date Of Birth	01/06/1970
Occupation	OUTDOOR
Date Of Driving Pass	04/10/2013
Driving Experience	6 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90270437
Fax Number	

OTHERS-90270437

CIVILLAND@MSN.COM

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

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

2

NO

Was any body injured in the Accident?
Was any injured conveyed to hospital by

NO

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)

2

Passenger 1

NAME:

: HOSSAIN SHAIKH JAKIR

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes,Please state which Police Station Police Station Name

BUKIT MERAH WEST NPC

Police Station Address

ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682,

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND ATTACHMENT

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

SHA6527H HYUNDAI I40

Vehicle Make/Model/Colour

Details Of Properties Vehicle Category

TAXI

Name of Driver

ABDUL GAFFOOR MALICK BATCHA

NRIC/Passport Number

S7073804Z

Contact Number

92382680

Address

Page 2 of 29

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.

(+ S)

Policyholder's Signature Date & Time: Driver's Signature

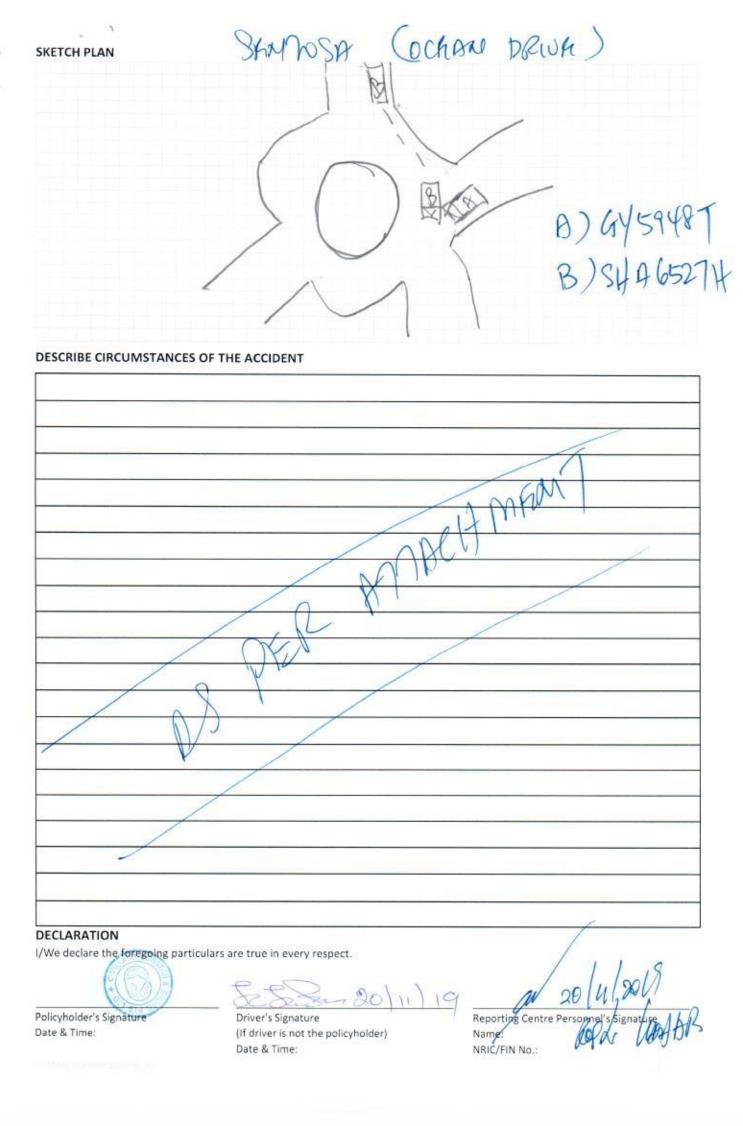
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel

Name:

NRIC/FIN No.:



Place: Sentosa Cove

Date & Time: 18/11/19 15:12

I parked my vehicle (lorry, V65948T) at the road side of Sentosa North Cove roundabout near the guard house for unloading of cables and materials. When my lorry was parked at the road side, the hazard signal light was turned-on before I stop and alight from the lorry.

After unloading the materials, before moving off, I turned-off the hazard signal light and signaled left before moving off. When I was moving off, the taxi (SHA6527H) accelerated and overtook my lorry hence the taxi crashed into the front right of my lorry and I came to an immediate halt. As the result of the crash, front right door, front right headlight and front right bumper was damaged.

The taxi did not come to an immediate halt but continues to move forward before stopping in front of my lorry, thus the damage is on the whole left body and left side mirror of the taxi. The security of Sentosa Cove came right after the crash and requested both vehicles to move off.

Neither myself nor the taxi diver were injured in the accident. We have exchanged personal particulars and moved off. Later, I went to police station to file an accident report on 18/11/19, 1910 hrs at Bukit Merah West NPC.

a shaland worters

NOTICE OF REPORTING

Kandasamy Karthee	eban NRIC/FIN
G7285408Q , has reported to the Police which	a non-injury traffic accident
occurred at <u>Sentosa Cove</u>	
on18/11/2019 at1512hrs in	volving the following vehicles:
YG5948T SHA6527H	
2 If this accident was reported to the P occurrence, then he/she has complied with Sec Cap 276.	Police within 24 hours of its 84(2) of the Road Traffic Act,
Rank/Name of Issuing Officer: SGT(3) Ra Date: 18/11/2019 Time: 1910hrs	zeenah
S/D Ref:34	Walnu Marah West
Police Post/Unit : BUKIT MERAH WES	T NPC
Original - to be issued to informant Duplicate - to be submitted to Traffic Police	Tel: 1890.5

240		ACCIDENT'STATEMENT	
3	ACCIE	0 11 - 219	
	ACCIE	DENT DATE: 18 11. 200 (DD/MM/YYY), TIME: 15: 12 (HH:MM)	
	LOCAT	TION: OCHON DRUM ROUNDABOUT (SMYNOSA)	
	1.	DETAILS OF VEHICLE CALLONS	90
		a) VEHICLE NUMBER! 97 5948 /	
		DINSURANCE COMPANY: MSIG	
	and the second	CIPOLICY NUMBER: 8YCT 1838 230	
		DIPOLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)	
		OMAKE & MODEL: 18424	
		FITTPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE, OTHERS) GIVEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)	
®		h) PURPOSE OF USING AT ACCIDENT TIME: WORKING	
		I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES NO)	
323	- 12	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)	7
		A) NAME: CIVILLIANT WILLIAM STRUGGER MALE / FEMALE)	
Jossan Stan	al	DINRIC/FIN/PASSPORT: 1999000253C CONTACT:	
TO STATE OF	HIR	c) ADDRESS:	111
À	INIC		X.6
Mar. 1	W1000 12	* CONTINUE TO 3,d IF DRIVER ALSO POLICY HOLDER	
4 No of pe	isson get	DRIVER	
Cindudia	driver.)	D) NRIC/FIN/PASSPORT! CONTACT:	
.(2)		b)NRIC/FIN/PASSPORTICONTACTI	_
		d) DATE OF BIRTH: (01,06,1970) (DD/MM/YYYY)	-
		e)OCCUPATION: (INDOOR / OUTDOOR)	
		FIDATE OF DRIVING PACE CY 10 2019	
	4,	WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES Y NO)	
61 8 I	120	IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED!	
	5.	a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS	7
9	6.	DIROAD SURFACE: (OR) / WET / OTHERS	-
38	7.	a) REPORTED TO POUCE (YES / NO)	
		IF YES, PLEASE STATE WHICH POLICE STATION:	_
4 He of pas	8,	a) VEHICLE NUMBER: HALSTH MODEL! TAX!	
Chicheling	alution \	b) DRIVER'S NAME: ABOUT GAFFOR MALLER BOULD	- -b-
()	(************************************	c) NRIC/FIN/PASSPORT: \$7073042 CONTACT: 423826	on
	9.	THIRO PARTY VEHICLE	200
K No of p	assunger	d) VEHICLE NUMBER: MODEL:	- '
(Industio		e) DRIVER'S NAME:	T.
	5) f) NRICYFIN/PASSPORT!CONTACT:	enter

email = KURIHARAGI SIMMET Gom. SG. VIDEO CIVILLAND & MSM. GOM.

MSIG Insurance (Singapore) Pte. Ltd. no key No. 2004 127 176 4 Shenton Way, II 21 01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 msig.com.sg

MOTOR VEHICLE COVER NOTE

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)

21 Nov 2018 Third Party

COVER NOTE No.

: 8VCT1838230

1. Index Mark and Registration Number of Vehicle

GY5948T

2. Chassis Number of Vehicle

3. Name of Policyholder

JAANHR69E47100261

CIVILLAND CONSTRUCTION & ENGRG PTE LTD

4. Effective date of the Commencement of Insurance for the purposes of the Act

25 Nov 2018

00:01AM

5. Date of Expiry of Insurance

24 Nov 2019

6. Persons or Classes of Persons entitled to drive*

(a) 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 and licensed under the Road Traffic Act and its registration and licensing under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7. Limitations as to Use*

Use in connection with the Policyholder's business.
Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. Use for social domestic and pleasure purposes.

The Policy does not cover

(i) Use for hire or reward or for racing pace-making reliability trail or speed-testing.

(ii) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter [89] 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 & Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

For MSIG Insurance (Singapore) Ptc. Ltd.

Approved Insurer

IMPORTANT NOTICE

This temporary Cover Note is valid for a maximum of 14 days only

You must exchange the Cover Note for the Certificate of Insurance from the insurer within 14 days from the date of this Cover Note. If you are involved in an accident, full details must be forwarded immediately to the Company.

FORM MZ.300