

Enquire Vehicle & Owner Information (Vehicle No. SHC3076B As At 03 Dec 2019 / 06:05:00)**Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: EROFIA

Current Owner Details

Owner ID Type: Company

Owner ID: 199303821R

Owner Name: COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name: SIN MING DRIVE

Registered Unit No.: -

Registered Building Name: GAS BUILDING

Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHC3076B

Make Description/Model: MERCEDES BENZ / E 220 CDI BLUEEFFICIENCY

Insurance Company Name: MS FIRST CAPITAL INSURANCE LIMITED

EROFIA MOTOR TRADING PTE LTD**1 Kaki Bukit Avenue 6 #02-62****AutoBay @ Kaki Bukit****Singapore 417883****E-Mail: erofia@singnet.com.sg / erofia2@gmail.com****Tel: 67527740 Fax: 67528669****TO ARRANGE PRE-REPAIR SURVEY****BIKE IS IN / NOT IN WORKSHOP****TEL: 90696165 – MR TEO**

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	05/12/2019 17:00
Date Of Accident	03/12/2019 06:05
Exact Location Of Accident	ALONG AIRPORT BOULEVARD
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE4950G
Insured/Policyholder	
Name Of Registered Owner	HARIDASS S/O MUNIANDY
NRIC No	S7775735Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87405176
Alternative Phone No	OTHERS-87405176

Vehicle Particulars

Manufacturer	HONDA
Model	ANF125MSS A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5104832701
Cover Note Number	

Driver

Name of Driver	HARIDASS S/O MUNIANDY
NRIC No	S7775735Z
Date Of Birth	14/08/1977
Occupation	INDOOR
Date Of Driving Pass	21/07/2003
Driving Experience	16 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87405176
Fax Number	
Contact Number	OTHERS-87405176
EEmail Address	NOEMAIL

Address	23 ELIAS ROAD #08-08 RIS GRANDEUR
Postcode	519930
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)
Police Station Address	ROAD: 51 ANG MO KIO AVENUE 9 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2180000 - FAX NO: 64814246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT No.T/20191205/2033;

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	SHC3076B
Vehicle Make/Model/Colour	MERCEDES BENZ / E 220 CDI BLUEEFFICIENCY
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	HARIDASS S/O MUNIANDY
Approximate Age	42
Injuries Sustain	
Injured person in which vehicle?	FBE4950G
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
Address	23 ELIAS ROAD #08-08 RIS GRANDEUR
Postcode	519930

Accident Sketch Plan

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.
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. The report will be forwarded by the insurers of the GIA Retoids 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 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)

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 making 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 situated 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 (a) 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.

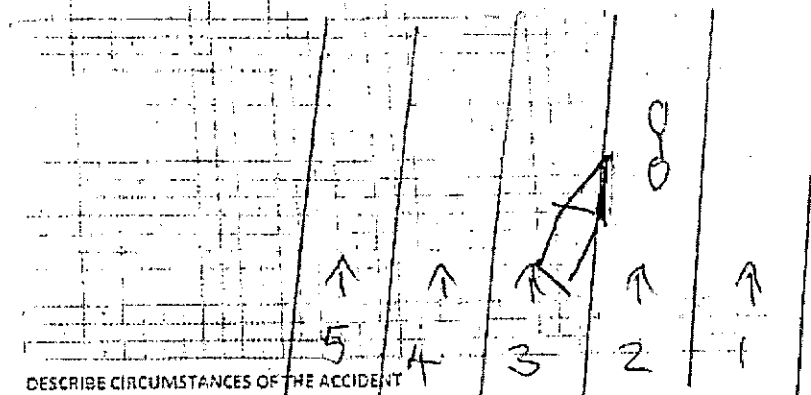
Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 674 16697 Fax: 674 92305
Email: accident@idac.com.sg
Reporting Centre Personnel's Signature
Name:
GRK/RV No. - 5 DEC 2019

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report no T/20191205/2033 &
T/20191205/2038

DECLARATION

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

Hani
Policyholder's Signature
Date & Time:

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

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel: 07-410697 Fax: 67492305
Email: accident@idac.com.sg
Reporting Centre Participant's Signature
Name:
NRIC/FIN No.: 5 DEC 2019



SINGAPORE POLICE FORCE



T/20191205/2033

1 of 3

Police Station Of Origin:
Ang Mo Kio Driving Test Centre
3 Ang Mo Kio Street 62 SINGAPORE 569139
Tel No: 64839213

Report No. T/20191205/2033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/12/2019 11:42		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: HARIDASS S/O MUNIANDY			Address: 23 ELIAS ROAD #08-08 RIS GRANDEUR SINGAPORE 519930		
ID Type / ID No.: NRIC NO / S7775735Z			Contact No.: Home/Office: Mobile: 87405176		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 42	Date of Birth: 14/08/1977	Type of Informant: Rider		
Race: Indian			Language: English		Institution / School Name:
Occupation: Aircraft engine mechanic			Driving Licence Information: Class: 2B Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 03/12/2019 06:05	Type of Location:
Location: Along Road 1 AIRPORT BOULEVARD TOWARDS TERMINAL 2 AIRPORT				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE4950G	Motorcycle	HONDA	ANF125MSS A	Black		0
SHC3076B	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBE4950G	NTUC Income Insurance Co-Operative Limited	5104832701	11/11/2018	10/05/2020



**SINGAPORE
POLICE FORCE**



T/20191205/2033

Police Station Of Origin:
Ang Mo Kio Driving Test Centre
3 Ang Mo Kio Street 62 SINGAPORE 569139
Tel No: 64839213

2 of 3

Report No. T/20191205/2033

CONTINUATION OF REPORT

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION
I WAS TRAVELING ALONG THE SECOND LANE OF AIRPORT BOULEVARD ROAD TOWARDS
AIRPORT TERMINAL 2 WHEN SUDDENLY THE TAXI COLLIDED ONTO ME FROM THE LEFT
CAUSING ME TO LOSE BALANCE SKID AND I THEN FELL ONTO THE ROAD. I WAS THEN
CONVEYED TO CGH AND GIVEN 14 DAYS OF HOSPITAL LEAVE FROM 3/12/2019 - 16/12/2019. I
SUFFERED ABRASIONS ON MY LEFT PALM, LEFT ELBOW AND DISLOCATION ON MY LEFT
SHOULDER.



**SINGAPORE
POLICE FORCE**



T/20191205/2033

Police Station Of Origin:
Ang Mo Kio Driving Test Centre
3 Ang Mo Kio Street 62 SINGAPORE 569139
Tel No: 64839213

3 of 3

Report No. T/20191205/2033

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

TP /

BERNARD KOH REN JUN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI YEO CHUN JIAN

Contact No.: 65476213

Signature Of Informant:

Date/Time:

05/12/2019 11:42

Classification Of Case:

Authentication Stamp

NP168



**SINGAPORE
POLICE FORCE**



T/20191205/2038

1 of 2

Report No. T/20191205/2038

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20191205/2033

Report Number T/20191205/2038

Vide Report Number

Date/Time of Report Made 05/12/2019 11:52

Place Report Lodged Traffic Police

Type of Informant Rider

Name of Informant HARIDASS S/O MUNIANDY

ID Type / ID No. NRIC NO / S7775735Z

Home/Office

Mobile 87405176

Email

Type of Accident Injury / Conveyed By Ambulance

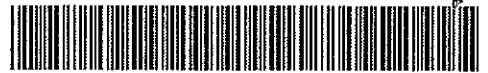
Drink Drive No

Anyone conveyed by ambulance Yes

Date/Time of Accident 03/12/2019 06:05

Brief Facts.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION
I WAS TRAVELING ALONG THE SECOND LANE OF AIRPORT BOULEVARD ROAD TOWARDS
TERMINAL 2 AIRPORT WHEN SUDDENLY A TAXI COLLIDED ONTO ME FROM THE LEFT HAND
SIDE CAUSING ME LOSE BALANCE AND FELL ONTO THE ROAD. I WAS CONVEYED TO CGH AND
GIVEN 14 DAYS OF HOPSITAL LEAVE FROM 03/12/2019 TO 16/12/2019. I SUFFERED ABRASIONS
ON MY LEFT PALM, LEFT ELBOW, LEFT LEG AND DISLOCATED MY LEFT SHOULDER THATS ALL.



T/20191205/2038

2 of 2

Report No. T/20191205/2038

Continuation of CSF For NP168


Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Case Sensitivity	No
Officer-In-Charge of Case	TP / GIT / YEO CHUN JIAN
Classification of Case	1) INJURY / CONVEYED BY AMBULANCE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7775735Z



Name
HARIDASS S/O MUNIANDY

Race
INDIAN


Date of birth
14-08-1977

Sex
M

Country of birth
MALAYSIA

S7775735Z

REPUBLIC OF SINGAPORE DRIVING LICENCE




HARIDASS S/O MUNIANDY

Birth Date: 14 Aug 1977

Issue Date: 14 Jul 2006

001431557H

877.1962



NRIC No. S7775735Z

Nationality
MALAYSIAN

Date of issue
27-04-2006

23 ELIAS ROAD #08-08
SINGAPORE 519930

NRIC No: S7775735Z

Date: 12/04/2018

COULD BE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

CLASS DATE

Class 2B Motorcycles <= 200 cc

21 Jul 2003

NP 428A

Licence No: S7775735Z

Certificate of Insurance

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)

Certificate Number : 5104832701

Cover : Third Party, Fire & Theft

- | | |
|--|-------------------------|
| 1. Index mark and Registration Number of Vehicle | : FBE4950G |
| Chassis Number | : NF125MM5001272 |
| 2. Name of Policyholder | : HARIDASS S/O MUNIANDY |
| 3. Effective Date of Insurance | : 11 Nov 2018 |
| 4. Expiry Date of Insurance | : 10 May 2020 |

5. Persons or Classes of Persons entitled to drive#

- (a) Named Driver(s) Only.

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.

6. Limitations as to Use#

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: HARIDASS S/O MUNIANDY
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : BENJAMIN LEE KHIAN HAN (00000602475)

Date of Issue : 19 Oct 2018 11:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

EROFIA MOTOR TRADING PTE LTD

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

Co. Reg No. 201202259N

Owner : Haridass S/O Muniandy

Accident Date : 3-Dec-19

Vehicle No : FBE 4950 G

Vehicle Model : Honda Wave

Estimated Repair Costs

<u>Qty</u>	<u>Description</u>	<u>Amount S(\$)</u>
	<u>List Items</u>	
2	Fork inner tubes	\$ 240.00
2	Fork outer tubes	\$ 250.00
1	Fork under bracket	\$ 185.00
1	Front sport rim	\$ 320.00
1	Front rim shaft	\$ 42.00
1	Front rim bearing	\$ 38.00
1	Front brake disc	\$ 155.00
1	Headlamp	\$ 95.00
1	Side mirror -L/H	\$ 48.00
1	Front signal -L/H	\$ 50.00
1	Handle-bar	\$ 105.00
1	Hand grip (1 set)	\$ 50.00
1	Front footrest bracket	\$ 55.00
1	Front footrest rubber -R/H	\$ 28.00
1	Brake pedal	\$ 42.00
1	Rear footrest -R/H	\$ 38.00
1	Rear footrest bracket	\$ 65.00
1	Rear taillamp	\$ 88.00
1	Rear fender	\$ 68.00
1	Main stand	\$ 90.00
1	Side stand	\$ 75.00
1	Fairing assy (1 set)	\$ 485.00
		<hr/>
		\$ 2,612.00
	Less 10%	\$ 261.20
		<hr/>
		\$ 2,350.80

c/f: \$ 2,350.80

Special Nett Items

1	Number plate (1 set)	\$	28.00
2	Fork oils	\$	30.00
2	Fork oil seals	\$	56.00
1	Steering cone bearing (1 set)	\$	85.00
1	Rear box	\$	250.00
1	Rear box bracket	\$	100.00
1	ERP IU	\$	175.00
1	Helmet	\$	95.00
		\$	<u>819.00</u>

<u>S/No.</u>	<u>Labour</u>		
1	To provide towing service.	\$	50.00
2	To check wiring and reset headlamp focusing	\$	80.00
3	To provide labour.	\$	380.00
4	To repair body frame.	\$	400.00
		\$	<u>910.00</u>

Grand Total \$ 4,079.80


EROFIA MOTOR TRADING PTE LTD