

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 ability.
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 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	23/07/2016 10:32
Date Of Accident	22/07/2016 17:45
Exact Location Of Accident	ALONG PIE>CHANGI BEFORE EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YL8454L
Insured/Policyholder	
Name Of Registered Owner	JADIA LOGISTICS PTE LTD
Co Reg No	200701602H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90000000
Alternative Phone No	Office-90000000

Vehicle Particulars

Manufacturer	NISSAN
Model	PU41TA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	B28636659 MKC
Cover Note Number	

Driver

Name of Driver	ZULHARI BIN AMDAN
NRIC No	S9049206C
Date Of Birth	22/12/1990
Occupation	OUTDOOR
Date Of Driving Pass	21/06/2013
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE

Mobile Number	(LOCAL) +65-91163564
Fax Number	
Contact Number	
Email Address	NOEMAIL
Address	BLK 448 TAMPINES STREET 42 #10-60 S-520448 1 YISHUN STREET 23 #06-11 YS-ONE S-768441
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- CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
Was there any video captured by Car Camera?	YES
Number of Passengers (Including Driver)	2

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

THE INCIDENT TOOK PLACE ON THE ABOVEMENTIONED LOCATION. WHILE IN THE MIDST OF TRAVELLING, I SAW AN ACCIDENT INFRONT BETWEEN GU1662P AND FBG9259B I THEN MAKE A SUDDEN STOP. BUT DUE TO WET ROAD CONDITION, UNABLE TO REACT ON TIME AND THUS COLLIDED ONTO THE SAID VAN(GU1662P) THE BIKE RIDER WAS INJURED BUT DID NOT CALL ANY AMBULANCE. THE WITNESS HELP HIM TO BRING TO HOSPITAL INSTEAD. I ONLY MANAGE TO EXCHANGE PARITUCLARS WITH THE RIDER BUT NOT THE VAN. ATTENDED BY SITI

Are accident photos available for attachment?	YES
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GU1662P
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	EAST ASIA TRADING EXPRESS
NRIC/Passport Number	
Contact Number	
Address	491B TAMPINES AVE 09
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBG9259B

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver ELIJA

NRIC/Passport Number

Contact Number 98440748

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name ELIJAH

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn? NO

Was injured conveyed to hospital by ambulance? NO

Address

Postcode

Sketch Plan

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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

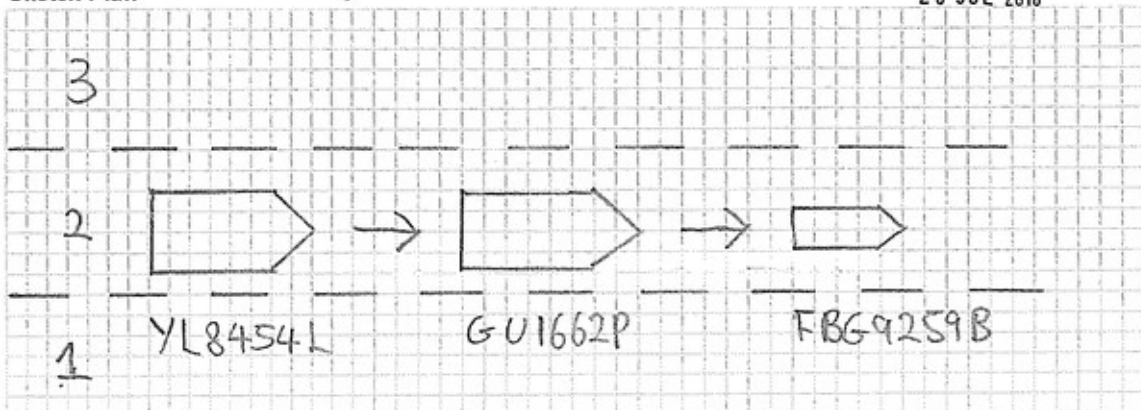
Witnessed by Reporting Centre
Personnel

Policyholder's Signature / Date &
Time

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


Sketch Plan

23 JUL 2016



Describe Circumstances of the Accident

Refer to A Report



Declaration

We declare the foregoing particulars are true in every respect.

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@singnet.com.sg

23 JUL 2016

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan #3



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.2.301	COMMERCIAL VEHICLE
Goods Carrying Vehicle - Sch II	Third Party Fire & Theft
Certificate No. B 28636659 MKC	
1. Index Mark and Registration Number of Vehicle YL8454L	
2. Name of Policyholder Jadia Logistics Pte. Ltd.	
3. Effective Date of the Commencement of Insurance for the purposes of the Act 12/11/2015	
4. Date of Expiry of Insurance 11/11/2016	
5. Persons or Classes of Persons entitled to drive*	
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.	
* Provided that the person driving is permitted in accordance with the licensing or other laws or 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*	
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 (1) Use 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. (3) Use for the carriage of passengers for hire or reward.	
* 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.	
This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).	



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 any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.
Approved Insurers


for Chief Executive Officer

ELYM201511050928

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S90492060**





Name
ZULHAIRI BIN AMDAN
نولخيرى بن امدن

Race
MALAY

Date of birth
22-12-1990

Sex
M


Country of birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S9049206C**
Name:
ZULHAIRI BIN AMDAN

Birth Date: **22 Dec 1990**
Issue Date: **29 May 2009**



001747186F



3814877



NRIC No. **S9049206C**



Date of issue
21-12-2005

Address

**APT BLK 448 TAMPINES STREET 42
#10-60
SINGAPORE 520448**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

C	Class 2B	Motorcycles =< 200 CC	29 May 2009
	Class 2A	Motorcycles between 201 CC and 400 CC	08 May 2015
	Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	21 Jun 2013

S9049206C

S / No. 9000219641

Licence No. S9049206C



NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

