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 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 avance. By the lodgement of this report to the insurers, you hereby consideresaid.	ailable upon application by interested parties. sent to the archiving of this report at the centre and to copies of the report being made available			
	ACCIDENT STATEMENT			
Date Of Report	07/09/2020 11:40			
Date Of Accident	06/09/2020 17:30			
Exact Location Of Accident	CTE TOWARDS BRADDELL ROAD			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	GBE6305G			
Insured/Policyholder				
Name Of Registered Owner	NA MARKETING			
Co Reg No	53071110M			
Email Address	NOEMAIL			
Mobile Phone No				
Alternative Phone No	OFFICE-92279657			
Vehicle Particulars				
Manufacturer	TOYOTA			
Model	HIACE DX 3.0 M			
Exact Purpose for which vehicle was being used at time of accident				
Are you claiming under your own insurance policy for repair to your vehicle?	YES			
If No, Please state action to be taken				

COMMERCIAL VEHICLE Vehicle Category

Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ20-000421
Cover Note Number	02/02/2020 TO 01/02/2021
Driver	

Name of Driver SEOH LI LI NRIC No S7324983Z Date Of Birth 15/07/1973 Occupation **OUTDOOR** Date Of Driving Pass 14/04/2008 **Driving Experience**

12 YEARS AND 4 MONTHS

FEMALE Gender

Mobile Number (LOCAL) +65-92279657

Fax Number **Contact Number**

. .

EMail Address NOEMAIL APT BLK 305B ANCHORVALE LINK #01-57 (S) 542305

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 Registration Number of Driver's Own

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions DRIZZLING

Road Surface WET

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?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

On 06/09/2020 at around 1730hrs, I drove my van GBE6305G along cte towards braddell road moving straight on the left of 2nd lane. There was a car SMN9538D who was filter to right lane in front of me and I kept maintained my speed moving straight. Suddenly car SMN9538D change back into my lane, I immediately applied my braked. However, the distance too close to me and causing me unable to react in time and hit onto the rear of car SMN9538D. After the incident, the car SMN9538D shift his car to the road shoulder and I followed suit. I saw another lorry GZ2188J shift over also. I heard from them that, it was when car SMN9538D who was in front of me when filter to right lane and had an collision with the lorry first. Follow by when car SMN9538D filter back into my lane and had an accident with my van. The driver of SMN9538D told me that the lorry accident with him which not related to me.

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 SMN9538D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver GIAN CHIN CHOON

NRIC/Passport Number

Contact Number 98324389

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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- 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 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 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:
 - (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:

Driver's Signature (If driver is not the policyholder

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

Accident Sketch Plan Pg. 1

SKETCH PLAN Befa		After
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A: CTBE B: SMN		(: GZ 2188]
	with gette	ach.
		-
		4
DECLARATION I/We declare the foregoine particulars		
DECLARATION I/We declare the foregoing particulars No:394 Joo Chiat Road S'pore 427626 Policyholder's Signature		Reporting Centre Personnel's Signal

Accident Sketch Plan Pg. 1

On 06/09/2020 at around 1730hrs, I drove my van GBE6305G along cte towards braddell road moving straight on the left of 2nd lane.

There was a car SMN9538D who was filter to right lane in front of me and I kept maintained my speed moving straight.

Suddenly car SMN9538D change back into my lane, I immediately applied my braked. However, the distance too close to me and causing me unable to react in time and hit onto the rear of car SMN9538D.

After the incident, the car SMN9538D shift his car to the road shoulder and I followed suit. I saw another lorry GZ2188J shift over also. I heard from them that, it was when car SMN9538D who was in front of me when filter to right lane and had an collision with the lorry first. Follow by when car SMN9538D filter back into my lane and had an accident with my van.

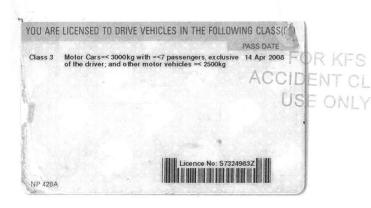
The driver of SMN9538D told me that the lorry accident with him which not related to me.

NA MARKETING 50920 No:394 Joo Chiat Road 570920 No:394 Joo 427626 11:59 mm

Driving License Pg. 1









certificate of insurance Pg. 1

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 reg 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.: DMCPHQ20-000421

Classic Plan - EQ Authorised Workshop Only

Form: LCVP1 Excess: Section 1:

YEID-AC Additional:

S\$500.00 S\$3,000.00

GBE6305G

1. Index Mark and Registration Number of Vehicles

Name of Policyholder NA MARKETING

3. Effective Date of the Commencement of Insurance for the purpose of the Act 02/02/2020

4. Date of Expiry of Insurance 01/02/2021

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

* 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 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 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.

IWE 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

A000322/Neo & Company Insurance Agency Pte Ltd Date of Issue: 30/01/2020 15:39

Authorised Signatory
EQ Insurance Company Limited

Exp No.: DMCPHQ19-000605

A Member of Citystate

EQI Motor Accident Hotline

6311 3211















