# **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.

- 4. The issue and acceptance of this is form by instrained 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 Submission 10/12/2020 14:29 (SGT) Date of Accident 09/12/2020 15:10 (SGT) Exact Location of Accident Sims Ave & Lor 1 Geylang, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number XD7678T

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TAT HONG CONSTRUCTION & TRANSPORT PTE LTD Company Reg No 200613703C **Email Address** MEELING2009@HOTMAIL.COM Mobile Phone No (Phone) +65-65623236 Alternative Phone No (Office) +65-65623236

## VEHICLE PARTICULARS

Manufacturer Mitsuhishi Model FV51JJD4RDEA Variant Exact purpose for which vehicle was being used at time of **Employment** accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle

## INSURANCE COMPANY

Name of Insurance Company India International Type of Coverage Comprehensive Fleet Policy Policy Number D18MFL0001926 02 Cover Note Number

## DRIVER

Name of Driver NAVANEETHAN VENUGOPAL Passport No/FIN G8308799X Date Of Birth 06/04/1985 Occupation Outdoor

Date Of Driving Pass 03/03/2011 Driving experience 9 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-93501416 Alt. Phone Number Email Address MEELING2009@HOTMAIL.COM Address 22 ST. MICHAEL'S ROAD #09-05 Address complement Postcode 327981 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE MENTIONED DATE & TIME, I WAS TRAVELLING ALONG SIMS AVE, VEHICLE B WAS DRIVING AT MY LEFT SIDE. WHEN I WAS DRIVING AT THE JUNCTION WITH LORONG 1 GEYLANG, VEHICLE B WAS GETTING CLOSER TO MY VEHICLE AND FINALLY ITS REAR RIGHT PORTION SCRATCHED MY VEHICLE'S FRONT LEFT PORTION. NO ONE WAS INJURED. ATTACHMENT(S)

Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SGN6418H Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver KWANG KENG HOCK NRIC No S1611824I Contact Number

| Address complement                      | - |
|---|---|
| Postcode                                | _ |
| Insurance Company Name                  | _ |
| Nature Of Damage                        | _ |
| Details of property damaged in accident | _ |
| 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.
- 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 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.
- 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.



Policyholder's Signature / Date &

N. Venu grade

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

Witnessed by Reporting Centre

Time 10/12/2020 11:40 am Sketch Plan

B

| Sims Ave, vehicle B was driving at my left side. When I was driving at the junction with Lorong 1                         |
|---|
|   |
|   |
| 102/4014 ) later distinct the 1 1 1 1 0   |
| When I was olving at the junction with Lorong of  |
|   |
| Geylang, relice & was getting closer to my relicle an   |
| finally its rear night portion scratched my vehicle's   |
| front left portion. No one was injured.   |
| N. Venagal  |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
| laration  |
| declare the foregoing particulars are true in every respect.  |
| RANSPORT  |
| yholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Poperting Control |
| 11=40 am.   |







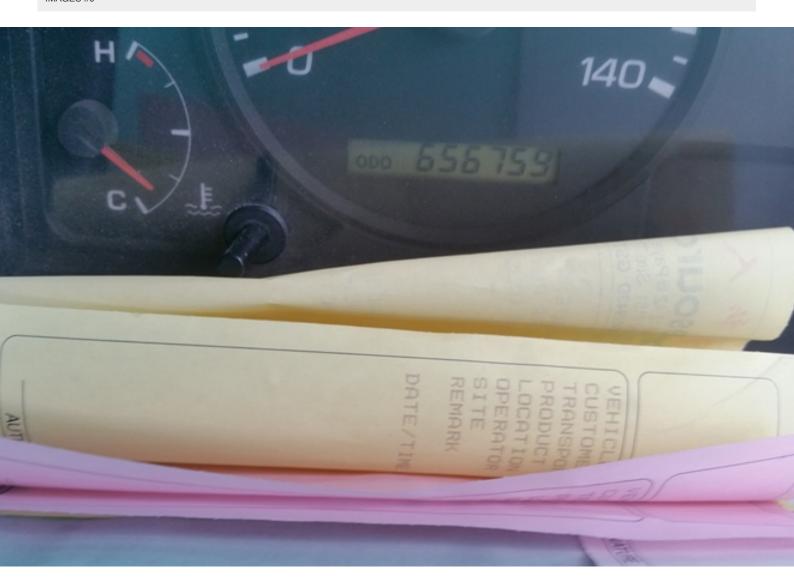




















Received Fax:10 Dec 20, 10:54a Received by:JIN AUTO SERVICES PTE LTD

page.1

PAGE 01/01

10/12/2020 11:02

65623236



#### INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078006-X 64 | Cecil Street | #04 | #05 | #06-02 | 108 Outlding | Singapore 0497 Office (65) 63476100 Email Insure@III.com.sg Fbx (65) 62244174 Website www.iii.com.sg

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 RUAD TRANSPORT ACT, 1967 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

#### CERTIFICATE NO.: D18MFL0001926 02

COVER: Comprehensive

1. Index Mark and Registration Number of Vehicle

XXX76787

Chassis No

: FV51JJA10143

2. Name of Policyholder

: . TAT HONG CONSTRUCTION & TRANSPORT PTE. LTD.

3 Effective date of Insurance

22 Sep 2020

4. Expiry date of Insurance

: 21 Sep 2021

5. Persons or Classes 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

- 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 Policyholder'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 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:

| Excess Section I      | ; | SGD   | 2,500.00 |
|-----------------------|---|-------|----------|
| Excess Section II     |   | SGD · | 2,500.00 |
| Windscreen Excess     | : | SCD   | 200.00   |
| Hire Purchase Company | 5 | N.A   |          |

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR WITH LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$2500.00 ON SECTION I & II (SEPARATELY) WILL BE APPLICABLE.

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).

Agent/Broker : A000012/Lim Beng Lien : 22/09/2020 15:05:39

M.Z. 300C. « GOODS CARRYING(Company's usc)

For India International Insurance Pte Ltd

Authorised Signatory

email add & meeting soog@ hofmail.com

liyun/22/09/2020 15:05:39

22/09/2020 15:07:42