

# 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 Submission ..... 28/12/2020 11:32 (SGT)  
Date of Accident ..... 24/12/2020 18:30 (SGT)  
Exact Location of Accident ..... 8 Marina Gardens Dr, Singapore 018951  
Additional Location Information ..... CENTRAL BLVDS TWDS MARINA GARDEN DR  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GX8128B

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... LENG YONG MOTOR WORKSHOP  
Company Reg No ..... 2XXXX100D  
Email Address ..... lengyong28@yahoo.com.sg  
Mobile Phone No ..... (Phone) +65-62612773  
Alternative Phone No ..... (Office) +65-62612773

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Dyna  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Employment  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Commercial vehicle

### INSURANCE COMPANY

Name of Insurance Company ..... India International  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... Yes  
Policy Number ..... D19MFL0005521\_01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... ABDUL RAJAK MOHAMED RAFIEEK  
NRIC No ..... SXXXX829D  
Date Of Birth ..... 13/01/1981  
Occupation ..... Outdoor

|                                                                    |                             |
|--------------------------------------------------------------------|-----------------------------|
| Date Of Driving Pass .....                                         | 03/09/2007                  |
| Driving experience .....                                           | 13 YEARS AND 3 MONTHS       |
| Gender .....                                                       | Male                        |
| Mobile Number .....                                                | (Phone) +65-81535786        |
| Alt. Phone Number .....                                            | -                           |
| Email Address .....                                                | lengyong28@yahoo.com.sg     |
| Address .....                                                      | 27A Jurong Port Rd, #01-28, |
| Address complement .....                                           | -                           |
| Postcode .....                                                     | Singapore 619101            |
| 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 .....   | Collision - Change/cross lane |
| Weather Conditions ..... | Raining                       |
| Road Surface .....       | Wet                           |

#### OTHER INFORMATION

|                                                                                                           |     |
|-----------------------------------------------------------------------------------------------------------|-----|
| Was any foreign vehicle involved in the accident? .....                                                   | No  |
| Number of vehicles involved in the accident .....                                                         | 2   |
| 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) .....                                                             | 1   |
| 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 24/12/2020 AROUND 18:30HRS, I WAS DRIVING MY COMPANY VEHICLE GX8128B ALONG CENTRAL BLVDS TWDS MARINA GARDEN DR, I WAS MAKING A RIGHT TURN VEH B SML490B ON MY LEFT SWERVED INTO MY LANE AND BRUSH AGAINST MY FRONT PORTION.

#### 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 ..... | SML490B      |
| Vehicle Manufacturer .....        | -            |
| Vehicle Model .....               | -            |
| Vehicle Variant .....             | -            |
| Vehicle Colour .....              | -            |
| Vehicle Category .....            | Private hire |
| Name of Driver .....              | -            |
| Contact Number .....              | -            |
| Address .....                     | -            |
| Address complement .....          | -            |

Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -

**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:

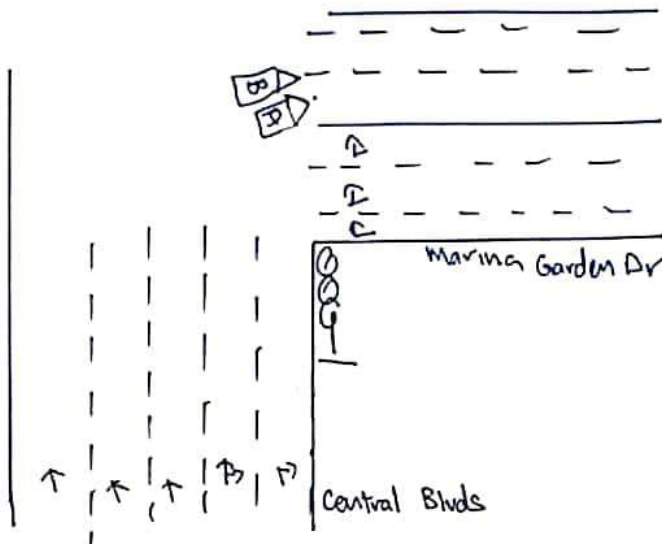


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN



A-GZ8128B

B-SML490B.


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 24/12/2020 around 18:30hrs, I was driving my company veh GZ8128B along Central Blvds. Towards Marina Garden Dr, I was making a right turn veh B SML 490B on my left swerved into my lane and brush against my front portion.

DECLARATION

I/we declare the foregoing particulars are true in every respect

  
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.:

































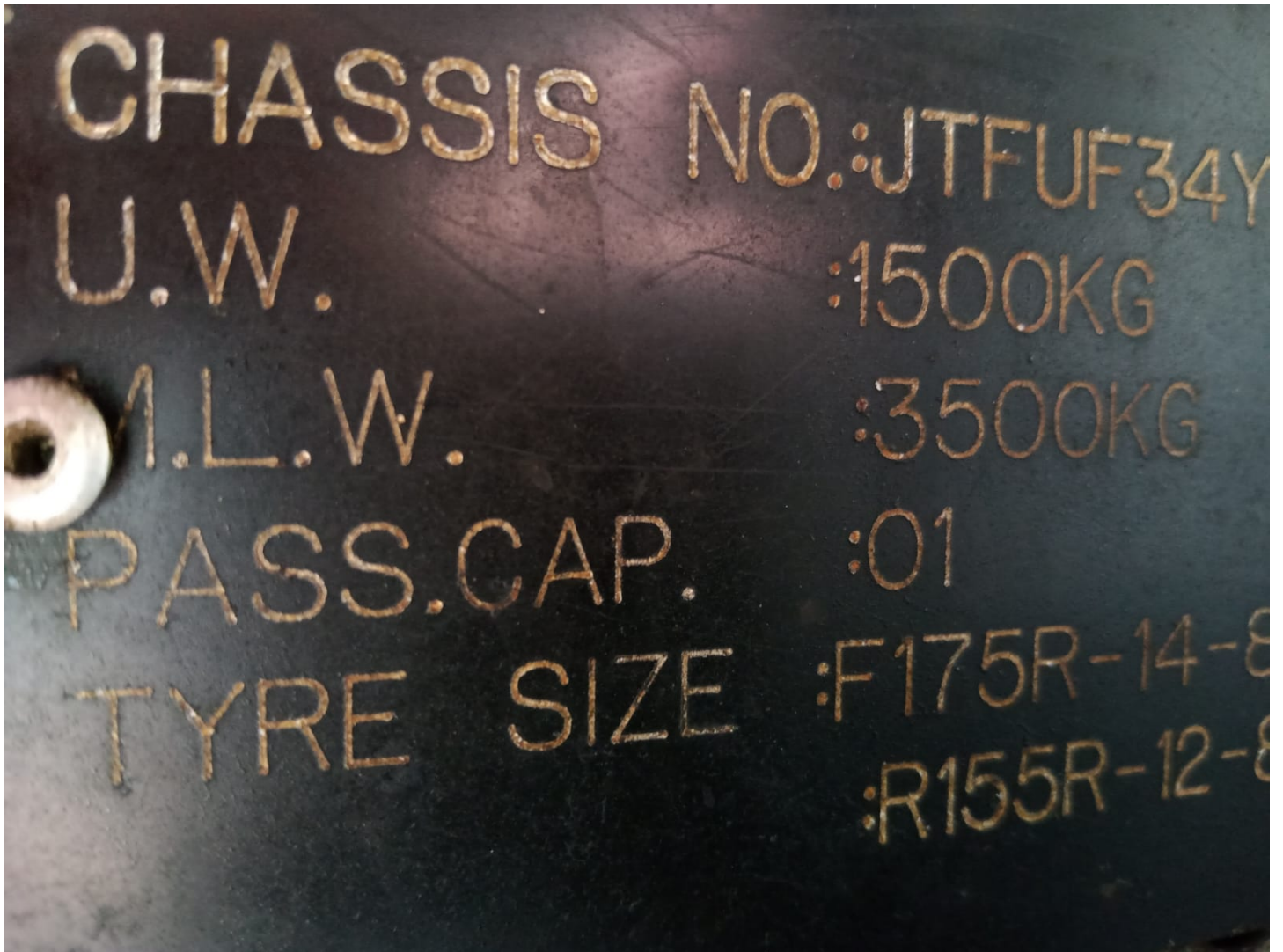














## INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 190703792K | GST Reg. No. M2-0070000-X  
 64 | Cecil Street | #04 | #05 | #06-02 | 10B Building | Singapore 049711  
 Office (65) 63476100 Email: insured@iil.com.sg  
 Fax (65) 62244174 Website: www.iil.com.sg

## 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)

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

|                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| <b>CERTIFICATE NO.: D19MFL0005521_01</b>                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>COVER: Third Party Only</b> |
| <b>1. Index Mark and Registration Number of Vehicle</b>                                                                                                                                                                                                | : GX8128D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                |
| <b>Chassis No</b>                                                                                                                                                                                                                                      | : JTFUF34YX03002782                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                |
| <b>2. Name of Policyholder</b>                                                                                                                                                                                                                         | : LENG YONG MOTOR WORKSHOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                |
| <b>3. Effective date of Insurance</b>                                                                                                                                                                                                                  | : 01 Nov 2020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                |
| <b>4. Expiry date of Insurance</b>                                                                                                                                                                                                                     | : 31 Oct 2021                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                |
| <b>5. Persons or Classes of Persons entitled to drive*</b>                                                                                                                                                                                             | <p>(1) Whilst the vehicle is being used in connection with the Policyholder's business.<br/>         Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.</p> <p>(2) Whilst the vehicle is being used for social, domestic or pleasure purposes.<br/>         Any person who is driving on the Policyholder's order or with their permission.</p> <p>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</p>                                                                                                 |                                |
| <b>6. Limitations as to use*</b>                                                                                                                                                                                                                       | <p>(1) Use in connection with the Policyholder's business.<br/>         (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.<br/>         (3) Use for social, domestic and pleasure purposes.</p> <p><b>The Policy does not cover</b></p> <p>(1) Use for racing, pace-making, reliability trial, or speed-testing.<br/>         (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.<br/>         (3) Use for the carriage of passengers for hire or reward.</p> <p>*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.</p> |                                |
| <b>Excess All Claims</b>                                                                                                                                                                                                                               | : SGD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1,250.00                       |
| FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE & OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF \$52500 - ON ALL CLAIMS 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). |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>Agent/Broker</b>                                                                                                                                                                                                                                    | : A000047 SINCL PTE LTD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                |
| <b>Date of Issue</b>                                                                                                                                                                                                                                   | : 26/10/2020 16:27:02                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                |
| <b>M.Z. 301C - GOODS CARRYING - HIRE(Company's use)</b>                                                                                                                                                                                                | <p>For India International Insurance Pte Ltd</p> <p><i>[Signature]</i></p> <p>Authorised Signatory</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                |

hucywen/26/10/2020 16:27:02

26/10/2020 16:28:41