

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	05/02/2021 13:07 (SGT)
Date of Accident	04/02/2021 10:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	7 JALAN BUROH LEVEL 2 CARPARK / LOADING BAY LOBBY C
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP7404S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	EGGS & MORE PTE LTD
Company Reg No	2XXXXX538Z
Email Address	zhixian.liang@thesoup Spoon.com
Mobile Phone No	(Phone) +65-61491161
Alternative Phone No	+65-90271547

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NPR85
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

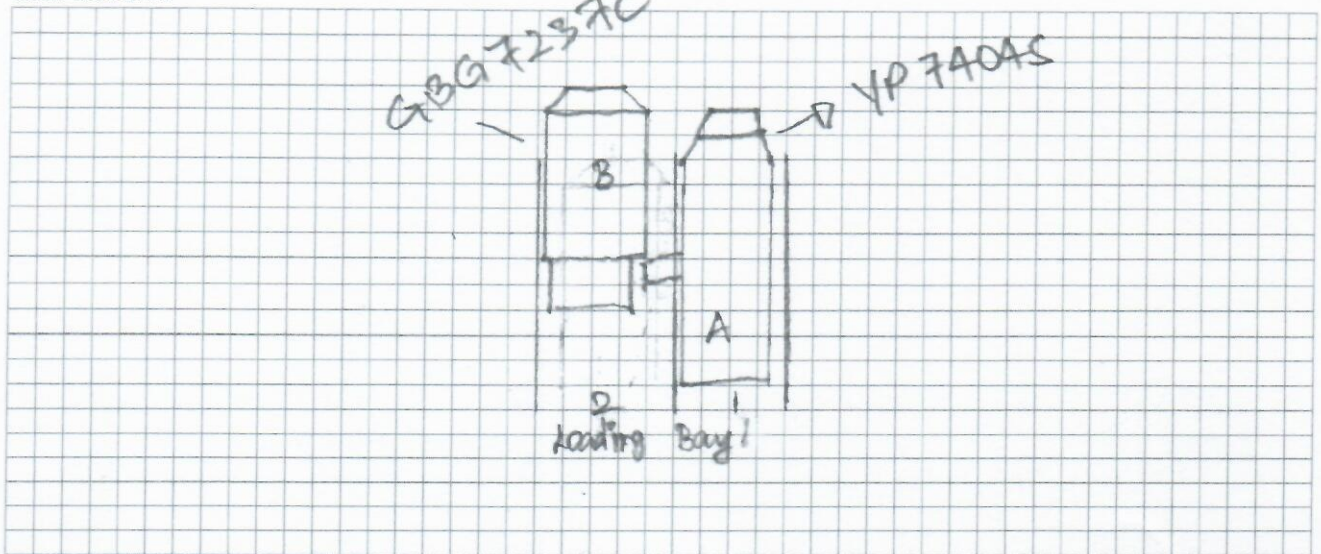
INSURANCE COMPANY

Name of Insurance Company	MSIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A300350601MKC
Cover Note Number	-

DRIVER

Name of Driver	SEKAR SATHISH
Passport No/FIN	GXXXX041U
Date Of Birth	28/12/1987
Occupation	Outdoor

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I Parked my truck in our Company assigned loading bay and i go to take my deliver goods, then i come back with my goods i seen some other 10ft small truck Parked and loading in my truck left side. I waiting for 15 minutes but he haven't complete work so i planned to load my good's at my truck left side chiller door and open the door then one by one i loaded.

Suddenly i hear the cracking sound then turn behind my chiller door crushed between into the small truck tailgate. The driver didn't look properly handle his tailgate so i check my side door it's damaged and bended.

DECLARATION

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



Policyholder's Signature
Date & Time:

[Signature]

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

COMFORTDELGRO ENGINEERING PTE LTD
320 UBI ROAD 3
SINGAPORE 408649

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

Date Of Driving Pass	09/04/2014
Driving experience	6 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90271547
Alt. Phone Number	-
Email Address	zhixian.liang@thesoupspoon.com
Address	BLK 185 BOONLAY AVE #08-160
Address complement	-
Postcode	640185
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	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry

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

REFER TO SKETCH PLAN

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	GBG7237C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-