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 07/04/2021 16:58 (SGT) Date of Accident 07/04/2021 08:08 (SGT) Exact Location of Accident 1 Ayer Chawan PI, Singapore 627871 Additional Location Information CARPARK OF 1 AYER CHAWAN PLACE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN7327S

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **ENSURE ENGINEERING PTE LTD** Company Reg No 197301219Z **Email Address** anthony@multiheight.com Mobile Phone No (Phone) +65-81007128 Alternative Phone No (Office) +65-63179110

VEHICLE PARTICULARS

Manufacturer Isuzu Model Nhr85aue4a 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 Transmission Auto CC 2999

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMCVSNA00095662000 Cover Note Number

DRIVER

Name of Driver CHINNAKARUPPAN MUTHU Work Permit No G7984495R

Date Of Birth 18/04/1981 Occupation Outdoor Date Of Driving Pass 20/07/2009 Driving experience 11 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-94673512 Alt. Phone Number Email Address JANAKIMUTHU276@GMAIL.COM Address 1 TUAS AVENUE 10 Address complement Postcode 639125 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? 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 - Head to Rear 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? Nο 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT AT 8.08AM, AT EXXONMOBIL DROP OFF POINT, I STOP THE LORRY AND WAS SIGNALING AND WAS ABOUT TO REVERSE INTO THE PARKING LOT. BEFORE REVERSING, I CHECKED BOTH (RIGHT & LEFT) REAR VIEW MIRRORS TO ENSURE THE BACK OF THE LORRY WAS CLEAR AND SUDDENLY THE SMRT TAXI NO. SHB616T MADE A QUICK U-TURN FROM BEHIND AND THE RIGHT FRONT MUDGUARD OF THE TAXI HIT THE BACK OF MY LORRY. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1**

SHB616T

Taxi

Name of Driver Contact Number

Vehicle Registration Number

Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category

Address	
Address complement	
Postcode	<u>-</u>
Insurance Company Name	
Nature Of Damage	
Details of property damaged in ac	cident
No. Of Passenger (Including Drive	er)

SKETCH PLAN

IMPORTANT NOTICE

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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: C · Marie Driver's Signature

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

NRIC/FIN No.:

GIARRAC SketchPlanForm_V

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		are true in every respect. Driver's Signature	WEEDWAY.	13	INEERIN

Date & Time:

NRIC/FIN No.:



Goldbell Engineering Pte Ltd (Main Branch) 10 Tuas Avenue 18 Singapore 638894 Tel: 68640698

RE: Accident at ExxonMobil Pte. Ltd East Entrance Drop Off Point at no. 1 Ayer Chawan Place.

Dear Sir/Ms,

I, Chinnakaruppan Muthu (G7984495R), is the driver of the company's lorry No. YN 7327S.

At 8.08 am, at ExxonMobil drop off point, I stop the lorry and was signaling and was about to reverse into the parking lot. Before reversing, I checked both (right & left) rear view mirrors to ensure the back of the lorry was clear and suddenly the SMRT Taxi No. SHB616T made a quick U-turn from behind and the right front mudguard of the Taxi hit the back of the lorry.

Refer to the sketches.

Refer to photos attached for the accident.

Yours Sincerely,

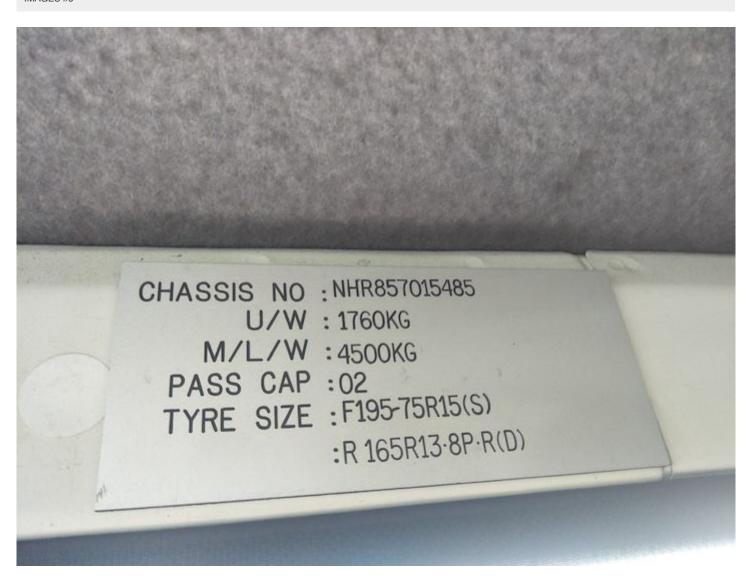
Chinnakaruppan Muthu

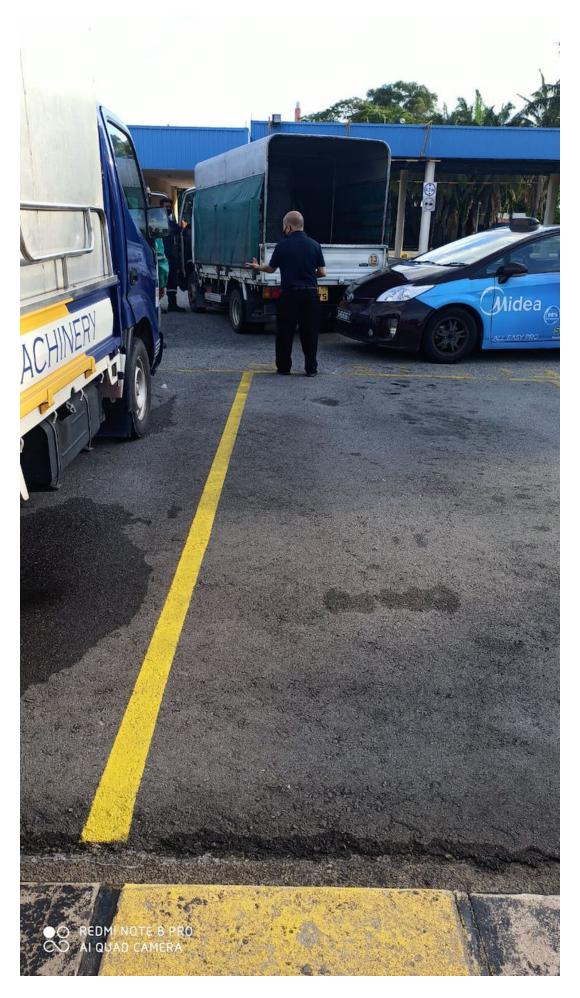


















中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

N SN

BR0060A

Cov. Type:C

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)

CERTIFICATE No.

DMCVSNA00095682000

Engine No.: 4JJ1D0899

Cha. No.: JAANPR85HE7100161

1. Index Mark and Registration

YN4809M

Number of Vehicle

2. Name of Policy Holder

ENSURE ENGINEERING PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

Excess Sect 1. EX ON WINDSCREEN.

\$\$600.00 S\$100.00

4. Date of Expiry of Insurance

30/09/2021

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 or pleasure purposes.

The Policy does not cover (1) Use for hire or reward or 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Moses Chia Wen Jye Authorised Officer

Authorised Signatory

Q6389 6111

@6222 1033

@www.sg.cntaiping.com