

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 07/06/2021 13:50 (SGT)
Date of Accident 06/06/2021 18:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information CHONG PANG
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GZ5973P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CHARTERED SURVEY SERVICES CONSULTANTS PTE LTD
Company Reg No 52899966D
Email Address data@chartsvy.com.sg
Mobile Phone No (Phone) +65-65700187
Alternative Phone No (Office) +65-65700187

VEHICLE PARTICULARS

Manufacturer Kia
Model 2700
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 2700

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number D20MCV0002062
Cover Note Number -

DRIVER

Name of Driver MOHD IDRIS BIN KARIM @ MOHD IDRIS BIN ABU
NRIC No S2068591C

Date Of Birth	07/05/1949
Occupation	Outdoor
Date Of Driving Pass	10/02/1977
Driving experience	44 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87000342
Alt. Phone Number	-
Email Address	data@chartsvy.com.sg
Address	BLK 203 SERANGOON CENTRAL #04-86
Address complement	-
Postcode	550203
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 - 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	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

VEHICLE IN FORNT BRAKE. I BRAKE BUT UNABLE TO STOP IN TIME AND HIT ONTO VEHICLE B REAR 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	SMU5339X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KOH PHUAY KENG SAMUEL
NRIC No	S8621326E
Contact Number	-
Address	-

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

SKETCH PLAN

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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.





Policyholder's Signature _____ Driver's Signature (if driver is not the policyholder) / Date
Time _____ & Time _____

Witnessed by Reporting Centre
Personnel

Sketch Plan

Describe Circumstances of the Accident

Vehicle A instant brake, I brake but unable to stop in time and hit onto vehicle B rear portion.

Declaration

We declare the foregoing particulars are true in every respect.




Policyholder's Signature / Date & Time
 CHARTERED SURVEY SERVICES CONSULTANTS PRIVATE LIMITED
 7030 Ang Mo Kio Avenue 5
 #07-44 Northstar @ AMK Singapore 569880
 Tel: 6358 3282 (2 Lines) Fax: 6358 3283
 Email: chartsvy@singnet.com.sg

Driver's Signature (If driver is not the policyholder) / Date & Time
 Witnessed by Reporting Centre Personnel

















INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703728K (SST Reg. No. 522-0024006X)
 95 Cecil Street (05) 6951896/62 | 10th Building, Singapore 069131
 Office (65) 63176100 Email: insurance@india.com.sg
 Fax: (65) 63244171 Website: www.india.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.

CERTIFICATE NO.: D20MCV0002062		COVER: Third Party Fire & Theft
1. Index Mark and Registration Number of Vehicle	: GZ5973P	
Chassis No	: KNCSE061267149282	
2. Name of Policyholder	: CHARTERED SURVEY SERVICES CONSULTANTS PTE. LTD.	
3. Effective date of Insurance	: 01 Apr 2020	
4. Expiry date of Insurance	: 29 Jun 2021	
5. Persons or Classes of Persons entitled to drive*	<p>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.</p>	
6. Limitations as to use*	<p>a) Use in connection with the Policyholder's business. b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. c) Use for social, domestic and pleasure purposes. The Policy does not cover a) Use for hire or reward. b) Use for racing, pace-making, reliability trial or speed-testing. c) Use whilst towing a trailer except the towing of any one disabled mechanically propelled vehicle.</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.		
Hire Purchase Company	: N/A	
FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN EXCESS OF \$2500/- 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).		
Agent/Broker	: A000021/Tan Shi Jock	
Date of Issue	: 01/04/2020 15:16:40	
M.Z. 300C - GOODS CARRYING (ORGANIZATION)		
	<p>For India International Insurance Pte Ltd</p> <p></p> <p>Authorized Signatory</p>	

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