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SN09216H0004 / National Assessment Centre Services [408933] SNU9Z16HUU04 / National Assessment Certife Si ENTRY DATE & TIME: 17/06/2021 17:14 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (17/06/2021 17:14 (SGT))

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 as truthful and accurate as possible.

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 insurance of the CIA Decord Management Control established by the Control Insurance Association of Cia 5. Any false reporting may be reterred 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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

17/06/2021 17:14 (SGT) 15/06/2021 20:14 (SGT) PIE, Singapore EXIT PAYA LEBAR RD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBE6274L

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address**

Mobile Phone No Alternative Phone No Yes

SIANG HOCK CAR RENTAL PTE, LTD.

2XXXXX271R

car.rental@sianghock.com.sg (Phone) +65-62568888 (Office) +65-62568888

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Toyota Dyna

Employment

No - Claiming third party Commercial vehicle

Manual 2982

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy Policy Number

Cover Note Number

MS First Capital Insurance Ltd

Comprehensive

D-21097524MFCV/34

DRIVER

Name of Driver

Passport No/FIN

KANDASAMY KANNAN

GXXXX691K



15/05/1972 Date Of Birth Indoor 19/11/2014 Occupation 6 YEARS AND 7 MONTHS Date Of Driving Pass Driving experience Male (Phone) +65-83047126 Gender Mobile Number car.rental@sianghock.com.sg Alt. Phone Number BLK 120 POTONG PSIR AVE 1 Email Address #10-812 Address Address complement Postcode No Is the driver the policyholder? Hirer If No, Relationship of the Driver with the Insured No 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 Collision - Head to Rear

Type of Accident Collision - Head to Rear
Weather Conditions Dry
Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

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

PLS REFER TO THE ATTACHED STATEMENT.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust 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 sability 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)

l understand, acknowledge, agree and consent that :

- (a) My insurer , my w orkshop 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/max packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

- (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.

Witnessed by Reporting Ce Driver's Signature (if driver is not the policyholder) / Date Policyholder's Signature / Date & Personnel Term Sketch Plan

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Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Timo

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

On 15.06.2021 at 20.14Hrs, I was driving my lorry GBE6274L along PIE exit towards PAYA LEBAR Road.

While moving along the slip road I waited at junction to make the way for the oncoming traffic.

While stationary at the junction, I suddenly felt an impact on the rear side of my vehicle.

When checked I noticed SMK2463Y had collided onto my rear portion causing the damages.

Nobody was injured, we shared details and proceed.

KANDAJANY KANNAN G 62747691 K 16/06/2021 L6.00

ACCIENT STATEMENT

ACCIENT STATEMENT	0
ACCIDENT DATE: (15) 66 120)(DD/MM/YYYY), TIME(08: 14)(HH:MM)	M
LOCATION: PIE EXIT PAYA FABER ROAD	
1.DETAILS OF VEHICLE	
a) VEHICLE NUMBER: GBE62744. b) INSURANCE COMPANY: MS PIRST CAPITAL. c) POLICY NO: d) POLICY TYPE: (COMPREHENSIVE/THIRD PATY/THIRD PARTY FIRE & THEFT) e) MAKE/MODEL: TOTOTA DYNAM f) TYPE: (SALOON/COUPE/MPV/VAN/LORRY/MOTORCYCLE/OTHERS) g) VEHICLE CATEGORY: (PRIVATE/COMMERCIAL/MOTORCYCLE)	
b) PURPOSE OF USING AT TIME OF ACCIDENT: i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE: (YES/NO) IF NO, PLEASE STATE (THIRD PARTY CLAIM/REPORTING ONLY)	
2. INSURED / POLICY HOLDER A) NAME: CIENTE HOLK CAR DENTAL DIE 10. (MALE/FEMALE)	
B) NRIC/FIN/PASSPORT: CONTACT	
*CONTINUE TO 3.D IF DRIVER ALSO POLICY HOLDER	
A) NAME: KANDASAHY KANWAN (MALE/FEMALE) B) NRIC/FIN/PASSPORT: G 6247691 K CONTACT: 8709726 C) ADDRESS: 24 20, 10-812 POTENT POSIX AND - 800120	52047126
D) DATE OF BIRTH: (151 D51 (991)(DD/MM/YYYY) E) OCCUPATION: (INDOOR/OUTDOOR) F) YEARS OF DRIVING EXPERIENCE: 6 YES + 19/11/2014	
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:	
5.A) WEATHER CONDITION: (CLEAR/ RAINING/OTHERS) B) ROAD SURFACE: (DRY/WET/OTHERS)	
6. WAS ANYBODY INJURED: (YES/NO) 7. REPORTED TO POLICE: (YES/NO) 1F YES PLEASE STATE WHICH POLICE STATION:	
8. THIRD PARTY VEHICLE: A) VEHICLE NO: SM K2463 Y MODEL:	-
B) DRIVER'S NAME :CONTACT:	-
9. THIRD PARTY VEHICLE: A) VEHICLE NO: MODEL: B) DRIVER'S NAME: CONTACT:	
B) DRIVER'S NAME :CONTACT:	

16/06/21 working for a



MS First Capital Insurance Limited Co. Reg. No. 195000106C GST Reg. No. M2 0001676-9

6 Raffles Quay #21-00 Singapore 048580

Tel: (65) 6222 2311 Fax: (65) 6222 3547

Ctaims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849

www.msfirstcapital.com.sg

CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy

COMMERCIAL VEHICLE - FLEET

Type of Cover.

: Comprehensive

Certificate No.

D-21097524MFCV/34

Vehicle No / Chassis No

GBE6274L / JTFAT35Y00K205874

Name of Insured

SIANG HOCK CAR RENTAL PTE LTD

Period Of Insurance

01.04.2021 To 31.03.2022

Insured Estimated Value

Market Value At Time Of Loss THINK ONE CREDIT PTE LTD

Financial Institution

Authorised Driver ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

(1) Whilst the vehicle is being used in connection with the Insured's business:-

(a) Any person provided he is in the Insured's employ and is driving on their order or with their permission.

(2) Whilst the vehicle is being used for social, domestic or pleasure purposes:-

(a) Any person who is driving on the Insured's order or with their permission.

For drivers with more than 1 year driving experience and/or not less than 21 years of age

Excess: S\$1,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)

S\$2,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)

S\$1,000.00 on Section I & II separately (for Staff)

For drivers with less than 1 year driving experience and/or less than 21 years of age

Excess: S\$3,000.00 on Section I & II separately (for Long Term Lease - 1 year or more)

S\$4,500.00 on Section I & II separately (for Short Term Lease - less than 1 year)

* 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.

Limitations as to use

Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business

Use for social, domestic and pleasure purposes.

The Policy does not cover-

(1) Use 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.

(3) Use for the carriage of passengers for hire or reward.

*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)

MS First Capital Insurance Limited (Approved Insurers)

LILIA/D0067/MZ301A9

Issued at Singapore on 01.04.2021

Authorised Signature

A Member of MS&AD INSURANCE GROUP