Accident Reporting Draft

VEHICLE NO: GBG8089G

MODEL: MAXUS G10



DATE OF ACCIDENT	6/9/2021 C.C: 1,850		
TIME OF ACCIDENT	1430 HRS AM/PM		
LOCATION OF ACCIDENT	SUNGEI KADUT AVE		
EXACT PURPOSE USE DURING ACCIDENT			
NAME OF OWNER	EASTERN TUNNELLING PTE LTD		
CONTACT NO.	67571737, 97571737 EMAIL: terrislimridong@yahoo.com.sg		
NRIC	200809964E		
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY 3P		
INSURANCE CO.	NTUC		
TYPE OF COVERAGE	COMPREHENSIVE/ THIRD PARTY/ THIRD PARTY FIRE & THEFT		
POLICY NO.			
NAME OF DRIVER	AS ABOVE / IF (10): LIM AH MEE, TERRY		
NRIC	S0026855J ANY PASSENGER: 1		
DATE OF BIRTH	27/8/1952 F. Irong Lim		
OCCUPATION	OUTDOOR /INDOOR		
DATE OF DRIVING PASS	11/1/2014		
GENDER	MALE / FEMALE		
CONTACT NO.	67571737, 97571737 EMAIL: terrislimridong@yahoo.com.sg		
ADDRESS	3 SUNGEI KADUT AVENUE S(729640)		
DOES DRIVER OWN OTHER VEHICLES	(NO) IF YES: REG NO.		
RELATIONSHIP	EMPLOYEE/JF NO:		
WEATHER CONDITION	CLEAR / RAINY/ OTHER: CLEAR		
ROAD SURFACE	(DRY)/ WET/ OTHER: DRY		
ANY INJURIES	NO / IF YES: NO		
CONTACT NO.	NO		
POLICE REPORT	NOY IF YES: NOTICE OF INTENDED PROSECUTION GIVEN?		
VIDEO RECORDING	NO/ YES NO/IF YES: WHO? no		
AUDIO RECORDING	NO YES SCENE PHOTO(S) NO / YES		
VEHICLE B NO.	FBH2962U ANY PASSENGER:		
NAME			
CONTACT NO.			
VEHICLE C NO.	5025S ANY PASSENGER:		
VEHICLE D NO.	SDA9038F ANY PASSENGER:		
VEHICLE E NO.	YP859J ANY PASSENGER:		
VEHICLE F NO.	YN2772Y ANY PASSENGER:		
ANY WITNESS	G-SMR644T		
WITNESS CONTACT NO.			
PARTICULAR WORKSHOP			
MOBILE NO.	Ryder Auto Pte Ltd		
CONTACT PERSON			
FAX NO.	2 Kaki Bukit Ave 2, #02-19/22 @ Kaki Bukit Auto Hub,		
HAVE YOU BEEN APPROACHED BY UNKNOWN PERSON SOLICITING(S)/ OFFERING ACCIDENT CLAIMS	Singapore 417921 Email: ryderautoworkshop@gmail.com Tel: 67418277 Fax: 67468277		
ASSISTANCE? NO / YES			

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly 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 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 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)

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' 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/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

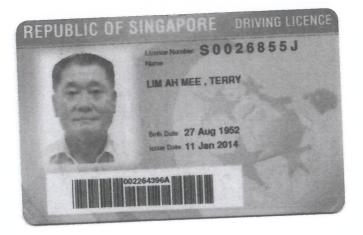
(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' 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 CIA to their third party service providers or assets

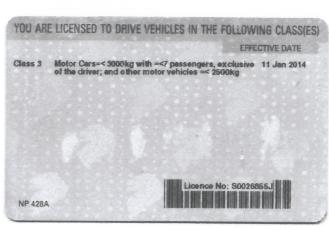
(including their law yers/law firms), which may be sited outside of Singapore, for one or more of the	
THELLING .	
Policyholder's Signature (bate of policyholder) / Date Time	Witnessed by Reporting Centre Personnel
Sketch Plan	roisonnoi
SUNGET KADUT AVE	A-4BG80894
	B-FBH2962U
G F E	6- 20258
- 2 0 0 × A	D. SDA 9038F E. YP85 QJ F. YN 2772Y
Name and the second of the sec	17 CMR 6447

Describe Circumstances of the Accident	,
I WAS STATIONARY ALONG SUNGEL KADUT AVE AS THE TRAF	FIC LIGHT WAS RED.
SUDDENLY VEHICLE B (FBH2962U) HIT THE LEFT SIDE OF MY	VEHICLE, VEHICLE C
WITH THE VEHICLE TRADING PLATE (5025S) SWERVE LEFT A	ND RIGHT AND HIT ONTO
ALL THE VEHICLES STATED IN THE DRAWING.	THE THICK THE PARTY OF THE
THE THE VEHICLES STATES IN THE STOATHO.	*
Declaration	
We declare the foregoing particulars are true in every respect.	
you wish to claim against your own policy, please be advised that your insurer may have a fourte	en (14) days clause whereby the claim
nust be made within the stiputated time frame from the day of occurrence. Kindly check with your in	isurer for more details.
ZXXX III	
olicyholder's Signature (If driver is no the policyholder) / Date	
olicyholder's Signature (If driver is no the policyholder) / Date	Witnessed by Reporting Centre Personnel











Certificate of Insurance

Cover : Comprehensive

: EASTERN TUNNELLING PTE LTD

: LSKG4GL10HA061686

: GBG8089G

: 20 May 2021

: 19 May 2022

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5122209433

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)

EXCESS (SECTION 2) : N/A

WINDSCREEN EXCESS : 5\$100

INSURE WITH COE : YES

: SWEE SENG CREDIT PTE LTD HIRE PURCHASE COMPANY

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

: INXPRESS INSURANCE AGENCY PTE. LTD. (00000610870)

Date of Issue

: 20 May 2021 13:49 hrs

FOR NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive