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# **SINGAPORE ACCIDENT STATEMENT**

#### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

  2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

  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
- 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 norm 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 22/09/2021 11:01 (SGT) Date of Accident 21/09/2021 07:30 (SGT) Exact Location of Accident Pepys Rd, Singapore Additional Location Information Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SGG1958K

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MUTHU RAMAN MURUGAN NRIC No SXXXX918C Email Address murugandeiva@gmail.com Mobile Phone No (Phone) +65-91050499 Alternative Phone No +65-91050499

#### VEHICLE PARTICULARS

Manufacturer Renault Model Scenic 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? Vehicle Category

No - Claiming third party Private car

Auto 1461

#### INSURANCE COMPANY

Transmission

CC

Name of Insurance Company United Overseas Insurance Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DHOM120051732000 Cover Note Number

#### DRIVER

Name of Driver NRIC No

MUTHU RAMAN MURUGAN SXXXX918C

Date Of Birth 17/01/1969 Occupation Indoor Date Of Driving Pass 21/10/2000 Driving experience 20 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-91050499 Alt. Phone Number +65-91050499 Email Address murugandeiva@gmail.com Address BLK 984D BUANGKOK LINK #18-33 Address complement Postcode 537984 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 - Major/Minor Rd Weather Conditions 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 vehicle 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? Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE 21ST SEPTEMBER 2021 AT ABOUT 07:30AM I WANTED TO DRIVE OUT MY CAR OUT OF THE PARKED LOCATION IN A

ON THE 21ST SEPTEMBER 2021 AT ABOUT 07:30AM I WANTED TO DRIVE OUT MY CAR OUT OF THE PARKED LOCATION IN A PARKING (LOT 19) ON PEPYS ROAD OPPOSITE TO THE ENTRANCE OF WEST POINT CONDOMINIUM. I HAD SEEN BOTH LEFT AND RIGHT AND IT WAS CLEAR FOR ME TO DRIVE OUT. SO I DROVE OUT AND CAME OUT ALMOST HALF MY CAR LENGTH. THERE WAS THIS CAR (SLU9909S) WHICH WAS STOPPED AND HAZARD LIGHT BLINKING ON THE ROAD TO MY RIGHT ABOUT 2 CAR DISTANCE AWAY. I THINK THE DRIVER INTENDED TO PARK IN ON LOT TO MY LEFT WHEN THERE WAS A CAR GOING OUT OF THE LOT. WHEN I WAS COMING OUT OF THE CARPARK THIS CAR (SLU9909S) SUDDENLY REVERSED VERY FAST. I THINK TO PARK ON THE EMPTY LOT TOWARDS MY LEFT VACATED BY AN EXITING CAR. I HAD NO REACTION TIME BEFORE I COULD REALISE THAT CAR'S SIDE PORTION OF BODY NEXT TO DRIVER SEAT AND FRONT BUMPER RIGHT SIDE PORTION SCRATCHED MY CAR FRONT SIDE PORTION ON THE RIGHT INCLUDING UP TO HALF OF MY NUMBER PLATE. I HAD ACTUALLY HONKED TO STOP THE CAR BUT IT WAS IN VAIN. THE PERSON ALSO DID NOT SEE HIS DRIVER SEAT WING MIRROR (I SUPPOSE) OTHERWISE HE COULD HAVE STOPPED.

#### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SLU9909S



Vehicle Manufacturer	Mayaadaa
Vehicle Model	Mercedes
Vehicle Variant	-
Vehicle Colour	1.0
Vehicle Category	=
Name of Driver	Private car
Contact Number	÷
	-
Address	-
Address complement	_
Postcode	
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-
Of assoriger (including Driver)	

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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)

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' 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 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre

Personnel

Sketch Plan

HWA	Corney Lee	WESTPOINT	reversing direction
4	1 5 POP		7B
9	PEPYS ROAD		2 SLU 9909
15			POINT OF SNITHCT
33	Carpar	k Lots 1	Lot #19 Lot #18

Describe Circumstances of the Accident
on 21st Sept 21 at about 07:30 am I wanted to drive out
my car out of the parked location in a car park lot #19
on repris road opposite to the emprance of the Line +
Condominium.
I had seen both left and right and it was
Clar for me to drive out. So I drove out and
Cameont almost half my car length.
There was this Card # SLU 9909 S which was
stopped and hazard light blinking on the road to
my right about 2 car distance away. I think
the driver intended to park in an lot to my
left when there was a car going out of the flot.
C- SILL 9909 S . II M & Danie Carpan Miss
le le 1
Vacated by an oriting a by The towards my left
Rolling T ( ) Ol months to the first fine
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Tight site portion scratched my car front builder
portion on the right including noted half of my
hunter plate I had a chilly honked to the
the car but it was in vain. The person also
did not see his driver seat wing minor (I suppose
otherwise he could have stopped!
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## Declaration

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

24/09/202/

Policyholder's Signature / Date & Time

02:25 pm

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

Witnessed by Reporting Centre Personnel

## ACCIDENT'STATEMENT

ACCIDENT DATE: (21,09, 2021) (DD/MM/YYY), TIME: (07.30) (HHMM)
LOCATION: PEPYS ROAD
DETAILS OF VEHICLE  a) VEHICLE NUMBER: SGG 1958 K  b) INSURANCE COMPANY: UNITED OVERSEAS INSURANCE LIMITED  c) POLICY NUMBER: DHOM 12005/732000  d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY FIRE & THEF!)  e) MAKE & MODEL: RENAULT GRAND SEENIC III (1.5 Turbo  f) TYPE: (SALOON / COUPE / MPV / VANY LORRY / MOTORCYCLE / OTHERS)
GIVEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  h) PURPOSE OF USING AT ACCIDENT TIME: COMING OUT OF CAPPARK LOT  I) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (YES/NO)  IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)  2. INSURED / POLICY HOLDER  A) NAME: MUTHU RAMAN MURUGAN (MALE / FEMALE)
C)ADDRESS: APT BLK 984D, #18-33  BUANGKOK LINK, SING APORE: 537984
Cludding driver)  Only a sport (1)  Only a sport
*d) DATE OF BIRTH: (17/01/1969) (DD/MM/YYY)  e) OCCUPATION: (INDOOR / OUTDOOR)  f) DATE OF DRIVING PASS 21 OCT 2000  4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES!) NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER'  5. a) WEATHER CONDITION; (CLEAR / RAINING / OTHERS  b) ROAD SURFACE: (DRY / WET? OTHERS  6. WAS ANYBODY INJURED (YES? NO)
7. a) REPORTED TO POUCE (YEST NO) 1  IF YES, PLEASE STATE WHICH POUCE STATION:  8. THIRD PARTY VEHICLE  He of passinger a) VEHICLE NUMBER: SLU 9909 S MODEL.  MERCE DE2
(
Who of passanger of VEHICLE NUMBER:MODEL:  Including deliver of NRIC/FIN/PASSPORT:CONTACT:

email: murugandeiva a gmail. Com



#### United Overseas Insurance Limited

3 Anson Road #28-01 Springleaf Tower Singapore 079909

Tel (65) 6222 7733 Fax (65) 6327 3869 / 6327 3870 Email: ContactUs@uoi.com.sg uoi.com.sg

Co. Reg. No. 197100152R

### 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)

ORIGINAL

CERTIFICATE NO.

Type of Cover

DH0M120051732000

Excess:

\$750/-NAMED DRIVERS - OPTION 2

COMPREHENSIVE

\$1500/-OTHERS

Vehicle Number

\$3000/-APPL TO <25 YRS & OR <3YRS EXP

SGG1958K

\$100/-WINDSCREEN DAMAGE CLAIM

Name of Insured

MUTHU RAMAN MURUGAN

Restricted Driver(s)

NOT APPLICABLE

Period of Insurance 20 April 2020 to 19 April 2022

Engine#

K9KG657D014995

Hire Purchase

MAYBANK SINGAPORE LIMITED

Chassis#

VF1JZ49BJ54857626

PRIVATE CAR - INDIVIDUAL OWNERSHIP [MX 1]

AUTHORISED DRIVER

(1) The Insured

(2) Any other person who is driving on the Insured's order or with his permission

(3) In the event of the death of the Insured

(a) any member of the Insured's family or a paid driver who has been driving the car during the lifetime of the Insured and permission to drive had not been withdrawn prior to the death of Insured and

(b) any other person who has been given permission to drive the vehicle prior to the death and such permission had not been withdrawn by the Insured

LIMITATIONS AS TO USE

Use only for social domestic and pleasure purposes and for the Insured's business

THE POLICY DOES NOT COVER

Use for hire or reward or racing pace-making reliability trial or speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purposes in connection with the

The carriage of passengers pursuant to car pooling arrangements and payments or any of them made by the passengers thereunder towards the running expenses of any vehicle described in the Schedule shall not be deemed to constitute use for hire or reward

Provided that the person 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

\*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

For the Company

MCHHC

Date: 15/04/2020