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.

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 04/10/2021 10:22 (SGT) Date of Accident 01/10/2021 15:30 (SGT) Exact Location of Accident 15 Woodlands Industrial Park E8, Singapore 757610 JUNCTION OF WOODLANDS INDUSTRIAL PARK E7 & Additional Location Information **WOODLANDS INDUSTRIAL PARK E8** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mitsubishi

Vehicle Registration Number YN3402J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner K.U.S METAL WORKS PTE LTD Company Reg No 201618663K Email Address hr_mw@kus.com.sg Mobile Phone No (Phone) +65-81212928 Alternative Phone No (Office) +65-67702226

VEHICLE PARTICULARS

Model Fe83beosrdea Variant Exact purpose for which vehicle was being used at time of accident **Employment** Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Commercial vehicle Transmission Manual CC 2977

Manufacturer

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number D19MCV0000229 02 Cover Note Number

DRIVER

Name of Driver RANA MD SUMON



Passport No/FIN G2165816U Date Of Birth 17/01/1993 Occupation Outdoor Date Of Driving Pass 12/08/2016 Driving experience 5 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-82136929 Alt. Phone Number Email Address hr_mw@kus.com.sg Address 65 SENOKO DRIVE Address complement Postcode 758239 Is the driver the policyholder? No 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 - Major/Minor Rd 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? 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? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT

THE ACCIDENT HAPPEN LAST 01/10/2021 AT E7 & E8 JUNCTION AROUND 3.30PM - 4.00PM IN THE AFTERNOON. THERE ARE VEHICLE PARK AT THE JUNCTION THAT WAS BLOCKING THE VIEW OF DRIVER "RAMA" SO SLOWLY HE GOING IN THE JUNCTION TO SEE INCOMING VEHICLE IS APPROACHING BUT APPARENTLY A BIG TRUCK WAS HIT HIS LORRY.

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 NumberXD1416YVehicle Manufacturer-Vehicle Model-Vehicle Variant-Vehicle Colour-Vehicle CategoryCommercial vehicleName 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

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- 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)

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 &

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

進友成汽車服務私人有限公司 CYS Automobile Services Pte Ltd 38 Woodlands Industrial Park East 1 W07-17 Admiralty Industrial Park Singapore 787700 Tel: 6219 2098 (3lines) Fax: 6219 2096

Witnessed by Reporting Centre Personnel

Sketch Plan

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Declaration

IWe declare the foregoing particulars are true in every respect.

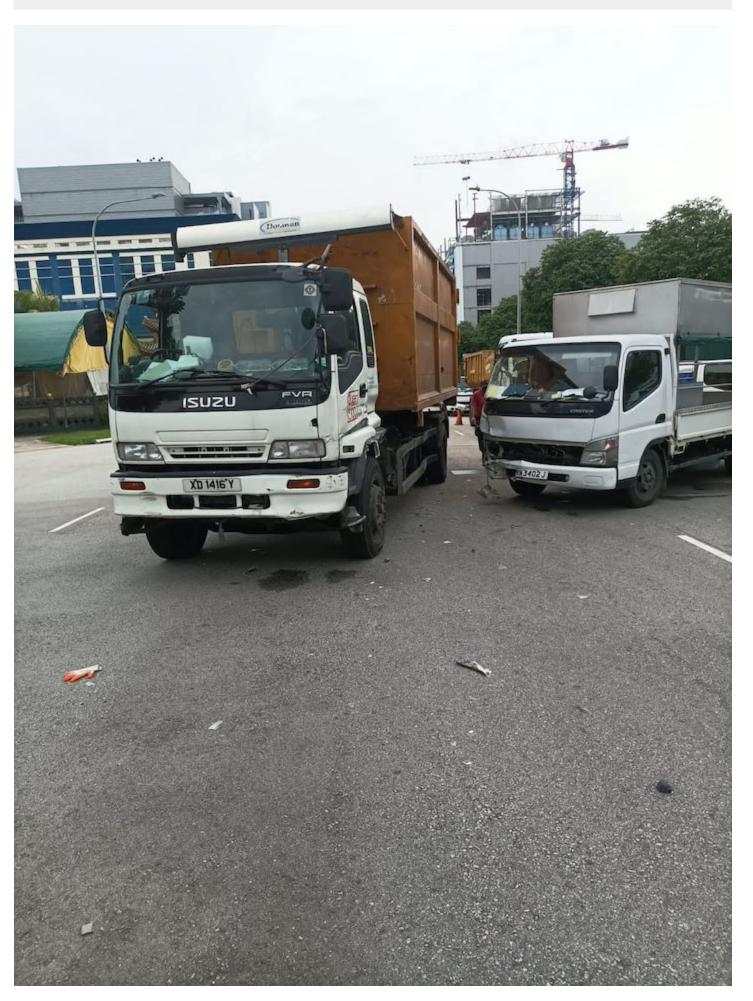
Policyholder's Signature / Date &

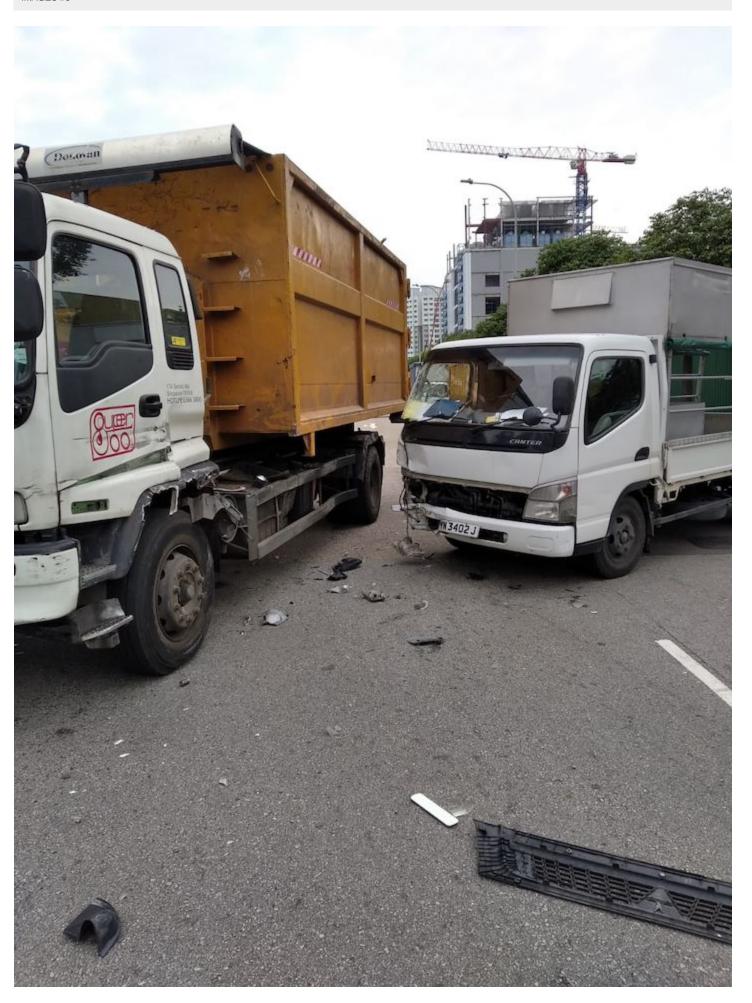
Driver's Signature (If driver is not the policyholder) / Date & Time

進友成汽車服務和人有限公司 CYS Automobile Services Pte Ltd 38 Woodlands Industrial Park East 1 #07-47 Admirally Industrial Park Singapore 757700 Tel: 6219 2096 (3lines) Fax: 6219 2096

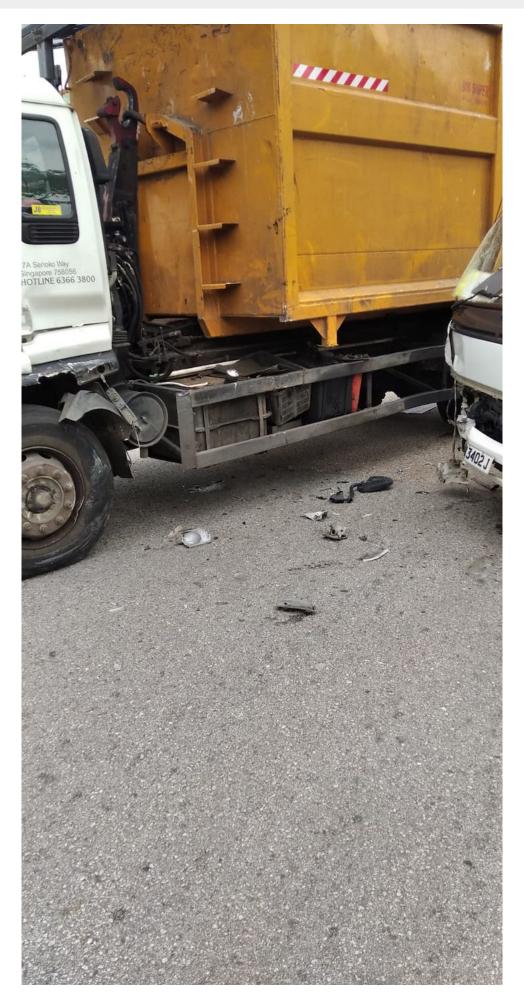
Witnessed by Reporting Centre Personnel





























Vehicle Registration Details

Vehicle No. YN3402J	Make/ Model MITSUBISHI /FE83BEOSRDEA	Vehicle Scheme -				
Current Propellant	Chassis No.	Vehicle Type				
Diesel	FE83BEA20939	Goods (Open) Lorry (Metal Body)/Pickup				

Owner's Details

Owner Name:

Owner ID Type:

K.U.S METAL WORKS PTE. LTD.

Company

NRIC/Passport/Company Cert No.:

Registered Address

201618663K

65 SENOKO DRIVE SINGAPORE 758239

Mailing Address:

Birth Date

Registration Details

Previous Vehicle No.:

Effective Date of Ownership:

28 Feb 2018

Original Registration Date:

Registration Date:

04 Jan 2013

04 Jan 2013

No. of Transfers:

IU Label No.:

1510793937

Vehicle Specifications

Engine No.:

Chassis No.:

4M42A91339

FE83BEA20939

Year of Manufacture:

Primary Colour:

2012

White

Secondary Colour:

Passenger Capacity:

Engine Capacity / Power Rating:

Maximum Power Output:

2977 cc/-

Max Unladen Weight:

Maximum Laden Weight:

2480 kg

5000 kg

Vehicle Attachment 1:

Vehicle Attachment 2:

With Hood

Vehicle Attachment 3:

Additional Registration Fee (ARF) and COE Information

Open Market Value:

Additional Registration Fee Rate:

\$29,993.00

5.00 %

Actual ARF Paid:

Vehicle Lifespan Expiry Date:

\$1,500.00

03 Jan 2033

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

No

\$63,035.00

COE No.:

COE Expiry Date:

2013010105000157Z

03 Jan 2023

COE Category:

COE Registration Category:

C - Goods Vehicle & Bus

C - Goods Vehicle & Bus

Quota Premium (QP) / Prevailing Quota Premium:

Actual QP Paid

\$63,035.00

\$63,035.00/-

QP (Regn Cat):

\$63,035.00

PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

No

Minimum PARF Benefit:

Vehicle Emissions Details

CO2 Emission:



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | 108 Building | Singapore 049711

Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.iii.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.: D19MCV0000229 02

COVER: Comprehensive

1. Index Mark and Registration Number of Vehicle

: YN3402J

Chassis No

: FE83BEA20939

2. Name of Policyholder

: K.U.S METAL WORKS PTE. LTD.

3 Effective date of Insurance

: 04 Jul 2021

4. Expiry date of Insurance

: 03 Jul 2022

5. 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.

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 or for racing, pace-making, reliability trail, or speed-testing.

b) 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.

Excess Sect I

: SGD750.00

Windscreen Excess: SGD100.00

Hire Purchase Company : GF MOTOR TRADING ENTERPRISE

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I 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

: A000052/TAN BROTHERS INSURANCE AGENCIES PTE LTD

Date of Issue

: 14/06/2021 09:57:02

M.Z. 300C - GOODS CARRYING(ORGANIZATION)

For India International Insurance Pte Ltd

Authorised Signatory

suguna/14/06/2021

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14/06/2021 09:58:04