

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 18/10/2021 13:50 (SGT)
Date of Accident 16/10/2021 10:53 (SGT)
Exact Location of Accident 484 Admiralty Link, Block 484, Singapore 750484
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNB5853X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SKYWAY MOTOR PTE LTD
Company Reg No 199904194N
Email Address rental@skyway.com
Mobile Phone No (Phone) +65-88760118
Alternative Phone No (Office) +65-63336333

VEHICLE PARTICULARS

Manufacturer Honda
Model Shuttle
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1500

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number D20MFL0004693_01
Cover Note Number -

DRIVER

Name of Driver JEYAKUMAR JASON S/O YASTAIN
NRIC No S7605917I

Date Of Birth	18/02/1976
Occupation	Indoor
Date Of Driving Pass	31/07/2018
Driving experience	3 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81861030
Alt. Phone Number	-
Email Address	jasonyastain@gmail.com
Address	BLK 409, SEMBAWANG DRIVE #02-786
Address complement	-
Postcode	750409
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	LEASING
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 vehicle 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

REFER TO STATEMENT AND SKETCH -TP REVERSING HIT REAR SIDE

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMN6253U
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	STEVEN LIM PENG LEE
NRIC No	S7300681C
Contact Number	(Phone) +65-90051155
Address	-

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
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.



[Signature]

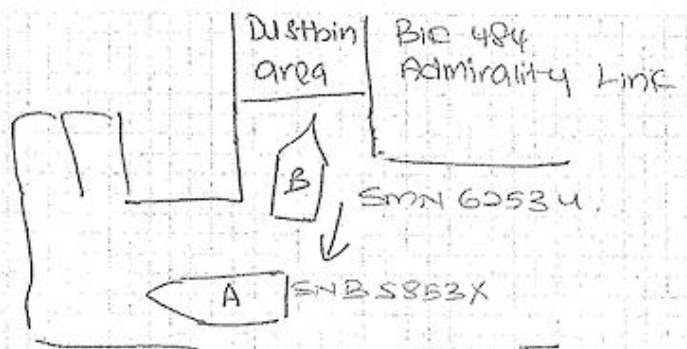
[Signature] 18/10/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Arrived at location Bk 484 Admiralty Circle to fetch my wife, while waiting to park at loading/unloading lot SMN 653 u reversed and hit my right side back even though I honked to alert him, my vehicle was stationary during the accident.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

10/18/21, 11:07 AM

Mail - Rohani Binte Mustafa - Outlook



INDIA INTERNATIONAL INSURANCE PTE LTD

Co Reg No: 1907037226 (GST Reg No: M2 00703063)
 54 Cecil Street, #041 #05 | 406-02 | IOB Building, Singapore 049711
 Office (65) 43476100 Email: india@iia.com.sg
 Fax: (65) 42211174 Website: www.iia.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT, 1987 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D20MFL0004693_01		COVER: Third Party Only
1. Index Mark and Registration Number of Vehicle	: SNR8853X	
Chassis No	: GK82103320	
2. Name of Policyholder	: SKYWAY MOTOR PTE LTD	
3. Effective date of Insurance	: 30 Aug 2021	
4. Expiry date of Insurance	: 07 Aug 2022	
5. Persons or Classes of Persons entitled to drive*	<p>Any person who is driving on the Policyholder's order or with their permission.</p> <p>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>Use only for social domestic and pleasure purposes in connection with the Policyholder's business.</p> <p>The Policy does not cover</p> <p>(1) Use for hire or reward (2) Use for racing, pace-making, reliability trial or speed-testing (3) Use for the carriage of goods (other than samples) in connection with any trade or business. (4) Use for any purposes in connection with the Motor Trade.</p> <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.</p>	
<p>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).</p> <p>Agent/Broker : IR00018/COM/ORTDEL/GRS INSURANCE BROKERS PTE LTD Date of Issue : 30/08/2021 19:09:49 MZ406-Hire Car (Hired Driving)</p> <p style="text-align: right;">For India International Insurance Pte Ltd</p> <p style="text-align: right;"> Authorised Signatory </p>		

