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.

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 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 30/06/2022 16:42 (SGT) Reported by Date of Accident 29/06/2022 10:45 (SGT) Exact Location of Accident Victoria St, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBF6265H**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner QUEK INTERIOR PTE LTD Company Reg No 201009439E Email Address info@quekinteriorpl.com.sg Mobile Phone No (Phone) +65-67415585 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna 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

No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd. Policy Number / Cover Note Number DMCG22000140

DRIVER

Name of Driver TAN KOK HAI NRIC No S1410709F Date Of Birth 17/11/1960 Occupation Outdoor

Date Of Driving Pass 05/05/1981 Driving experience 41 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-93836046 Alt. Phone Number Email Address info@quekinteriorpl.com.sg Address BLK 1 HAIG ROAD #09-571 Address complement Postcode 430001 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 Chain Collision 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 Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON 29/06/2022 AT 1045HRS, I WAS WAITING ALONG VICTORIA STREET FOR THE TRAFFIC LIGHT TO CHANGE TO GREEN. OUT OF A SUDDEN, I FELT A HUGE IMPACT TO THE REAR OF MY LORRY. THE IMPACT CAUSED MY LORRY TO PROPEL FORWARD HITTING THE CAR (VEHICLE C) IN FRONT OF ME. NO ONE WAS INJURED IN THIS ACCIDENT. I REALISED A CAR (VEHICLE B) HAD HIT MY LORRY (VEHICLE A) CAUSING MY LORRY TO MOVE FORWARD, HITTING THE CAR IN FRONT (VEHICLE C). ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLF7788R Vehicle Manufacturer Vehicle Model

Vehicle Variant
Vehicle Colour

Vehicle Category	Private car
Name of Driver	-
NRIC No	S8272546F
Contact Number	-
Address	_
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLG266X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE C
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 liability on the part of the insurance companies
- 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 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.

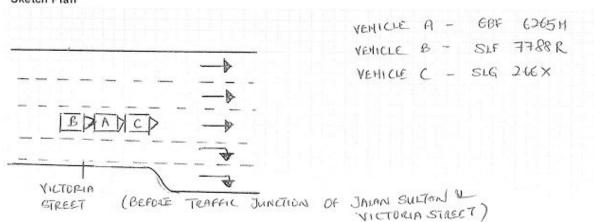


Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnet

Sketch Plan



Describe Circumstances of the Accident
ON 29 JUN 2022 @ 10 45 HRS, I WAS WAITING ALONG VICTORIA
STREET FOR THE TRAFFIC HEHT TO CHANGE TO GREEN. ALL OF A
SHOOEN, I FELT A HUGE IMPACT TO THE REAR OF MY LORRY,
(VEHICLE A) . THE IMPACT CAUSED MY LORRY TO PROPEL FORWARD
HITTING THE CAR (VEHICLE C) INFRONT. NO ONE WIS INJURED IN THIS ACCIDENT. I REALISED A CAR (VEHICLE B) HAD HIT MY
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THE CAR INFRONT (VEHICLE C)
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(*()2)
7418

Declaration

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



A

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: SS2X226 U0008 _____ Vehicle Registration No: ____ GBF 6.26511 Original Report No: ___ Name (as shown in NRIC): TAN KOK HAI __NRIC/FIN/Passport No: __SI410 709F (*Vehicle Driver/Vehicle-Owner) (*) Please delete as appropriate Address: BUK 1 HA16 ROAD #09-571 _____ Singapore (43000)) Contact (Tel):____93836046 Mobile No.: ____ 9386 04も Email Address: __info (a que kinteriorpi- com.sq Date of Accident: _ 29 06 >032 ____ Time of Accident: ___10 - 45 AM Insurance Company: _ EKED INSURANCE 170 PIE (B) ADDITIONAL INFORMATION / AMENDMENTS: I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments: ATTACHED THE AMENDED SILETCH PLAN. Policyholder / Driver's Signature Reporting Centre Personnel's Signature Date: Name: NRIC/FIN No.:

Date:

ERGO

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) ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number

DMCG22000140

Vehicle Registration Number

GBF6265H

Cover Type

Comprehensive

Policy Type

Commercial Vehicle (Pte Use)

Name of Policyholder/Insured

Commencement Date of Insurance

QUEK INTERIOR PTE LTD

06/01/2022

Expiry Date of Insurance

05/01/2023

Excess

EXCESS: (SECTION I)... ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I). EXCESS: WINDSCREEN COVER(VEH BELOW 10 TONS). YOUNG&INEXP DRIVERS(SECTION I)

24-Hour Helpline: 6100 1620

500.00 300,00

100.00 2,500.00

Finance Company/Hire Purchase Owner:

*Persons or Classes of Persons entitled to drive:

- 1. The Policyholder
- 2. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- 1) Use in connection with the Policyholder's business.
- 2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- 3) Use for social domestic and pleasure purposes

This Policy does not cover:

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing
- 2) 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 (*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of ERGO Insurance Pte. Ltd. Approved Insurer

Karl-Vint Jung

Authorized Signature

B000123	RAY ALLIANCE FINANCIAL ADVISERS PTE LTD	
Vehicle Chassis	Number: JTFAT35Y80K207243, Vehicle Engine Number: 1KD2668973	CP1, 29/11/2021 21:02

ERGO Insurance Pte. Ltd. Co. Reg. No.: 199305211H GST Reg. No.: M2-0116930-5 8 Temasek Boulevard #04-01 Suntec Tower Three Singapore 038988 Tel: +65 6829 9199 Fax: +65 6829 9248 www.ergo.com.sg



Co. Reg. No. 201009439E

Tel: 674) 5585 Pax: 6749 5421 Website: www.quekinterior.com.sg

27 May 2022

ERGO Insurance Pte.Ltd.

Dear Sir / Madam,

LETTER OF AUTHORISATION FOR COMPANY VEHICLE GBF6265 H

This is to inform you that our employee Tan Kok Hai , NRIC no. S1410709F is authorised GBF COLEM

to drive the company vehicle, Toyota Hiace Turbo 5DR MT.

Should you require further clarifications, please call our office.

Yours faithfully QUEK INTERIOR PTE LTD

