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 Actual 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.

- 4. The issue and acceptance of this is form by instrained 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 20/12/2022 17:18 (SGT) Reported by Driver Date of Accident 19/12/2022 16:17 (SGT) Exact Location of Accident 47 Jln Buroh, Singapore 619491 Additional Location Information At Level 2 of warehouse Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XF814H

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CHENG HAI TRANSPORT SERVICE Company Reg No 53122529A Email Address alvin.chenghai@gmail.com Mobile Phone No (Phone) +65-94598127 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Isuzu Model Cyz52r 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 15681

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D18MCV0000884 04

DRIVER

Name of Driver Tee Eng Siang NRIC No S2512480D Date Of Birth 13/01/1958 Occupation Outdoor

Date Of Driving Pass 20/02/1999 Driving experience 23 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-97845337 Alt. Phone Number Email Address alvin.chenghai@gmail.com Address Apt Blk 853 Jurong West Street 81 Address complement Postcode 640853 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 Side Swipe 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? Translator's name Ng Voon Yee Translator's ID T0072410B Translator's phone number (Phone) +65-62650026 Translator's email nicoleng@asmauto.com.sg Original language used in the statement Mandarin 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 19/12/22 around 16:17 hours, I was driving company vehicle XE814H at level 2 of warehouse that is located at 47 Jalan Buroh to collect my cargo. After finishing my collection of cargo, I then went straight and made a left turn to go down the ramp. While doing so, there was another vehicle XE3770E came down from level 3 also made a left turn. His vehicle right side hit onto my vehicle left side. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number XF3770F Vehicle Manufacturer

Commercial vehicle

Vehicle Variant
Vehicle Colour
Vehicle Category

Vehicle Model

Name 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

- 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.
- 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>.
- 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.
- 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 GA 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.

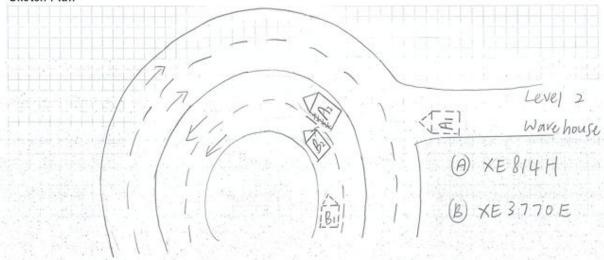


Policyholder's Signature / Date & Time Lest

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident
on 19/12/2022 around 16:17 hours, I was driving company vehicle XE814H at level 2 of Warehouse that is located at 47 Jalan Buroh to collect my cargo. After finishing my collection of cargo, I then went straight and made a left turn to go down the ramp. While doing iso, there was another vehicle XE370E came down from level 3 also made a left turn. His vehicle vight side hit onto my rehicle left side.
company vehicle XE814H at level 2 of Warehouse that
is located at 47 Jalan Burch to collect my cargo. After
finishing my collection of cargo, I then went straight and
made a left turn to go down the vamo, While doing
is there was another vehicle XE3770F came down
Iron level 3 also made a left tren His reliate
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myon sine and only my concre 1041 sine.
No.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

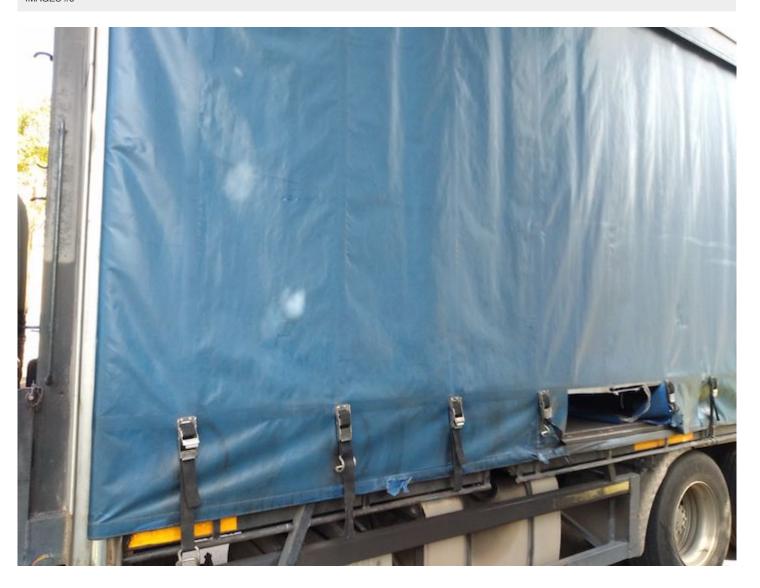
Witnessed by Reporting Centre Personnel

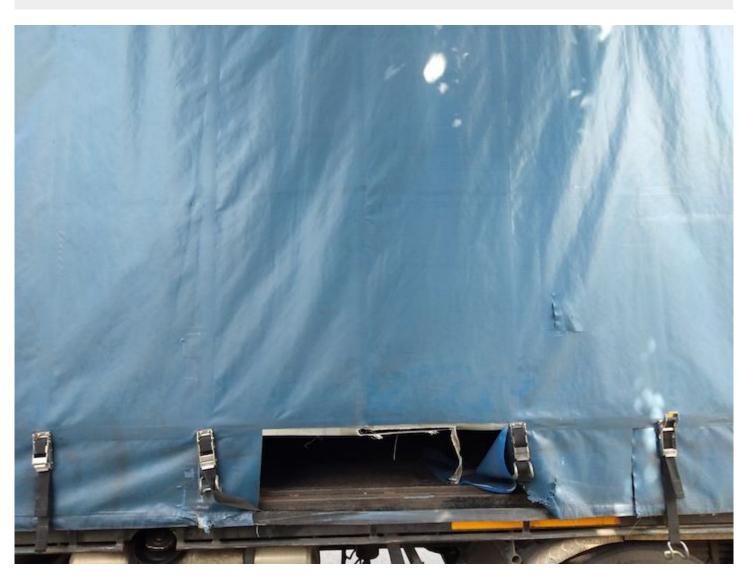


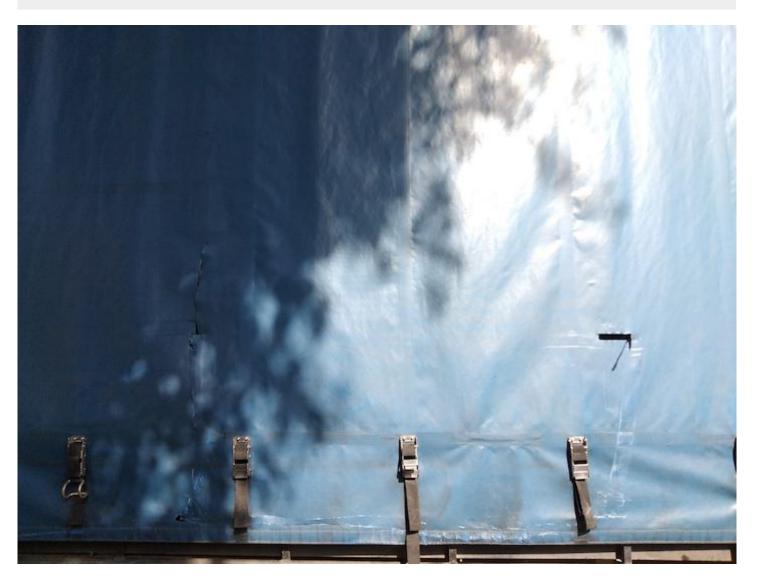


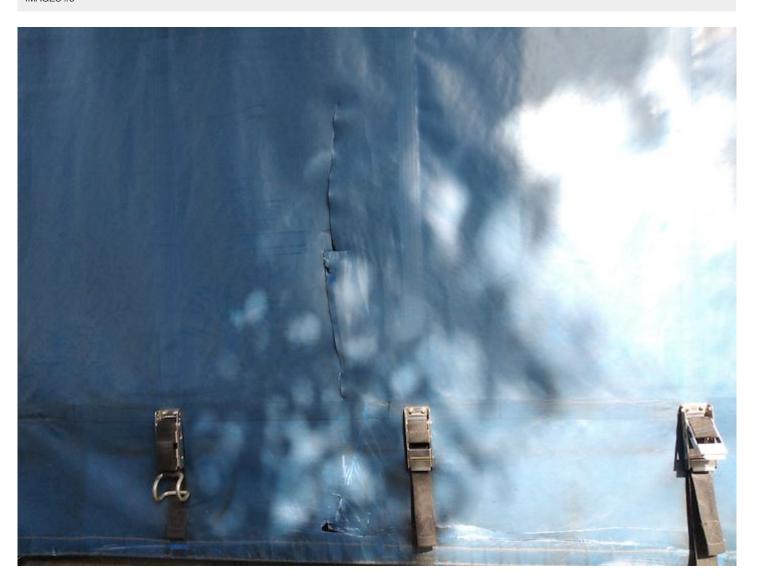




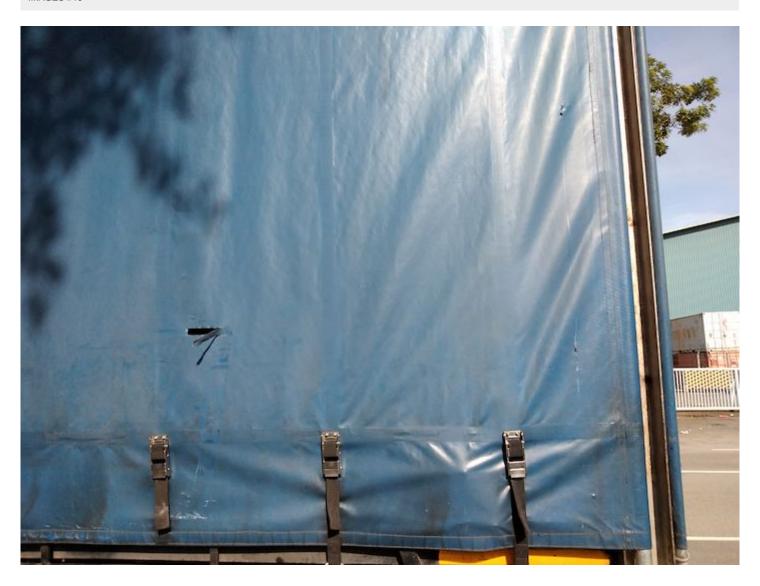




























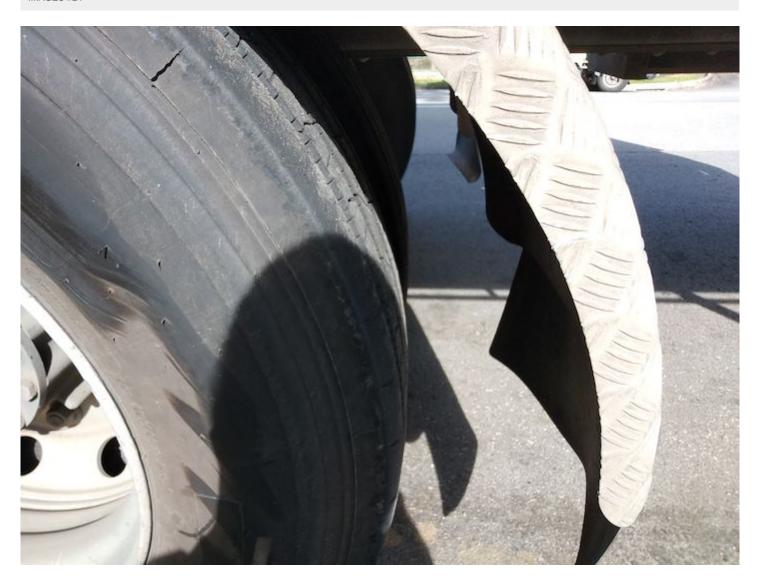






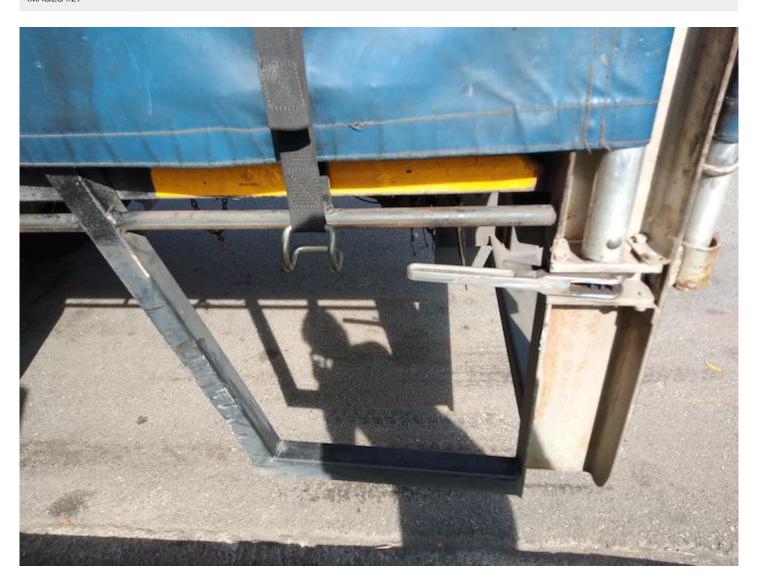
























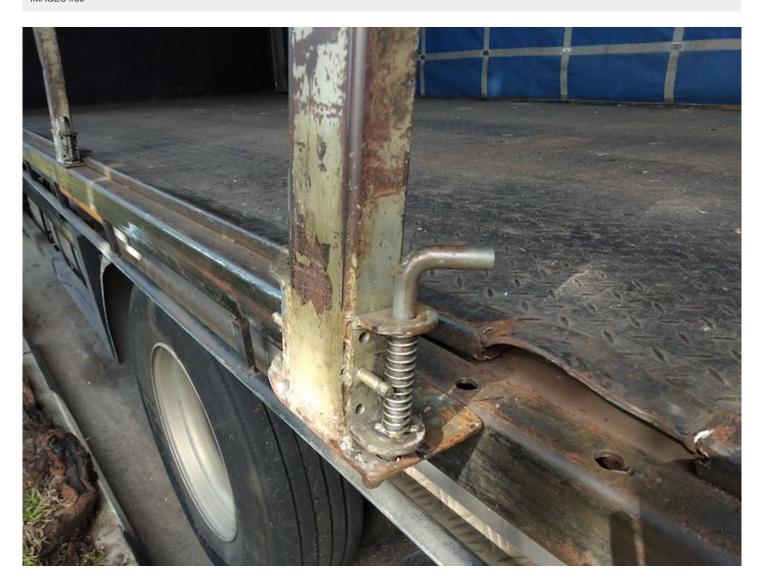
























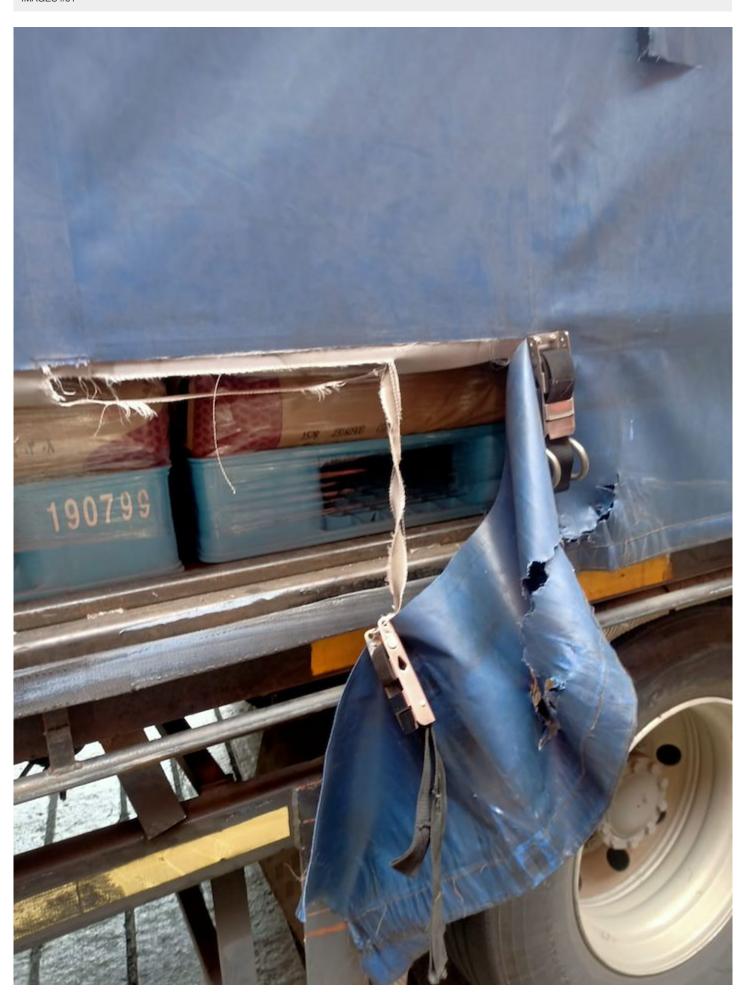












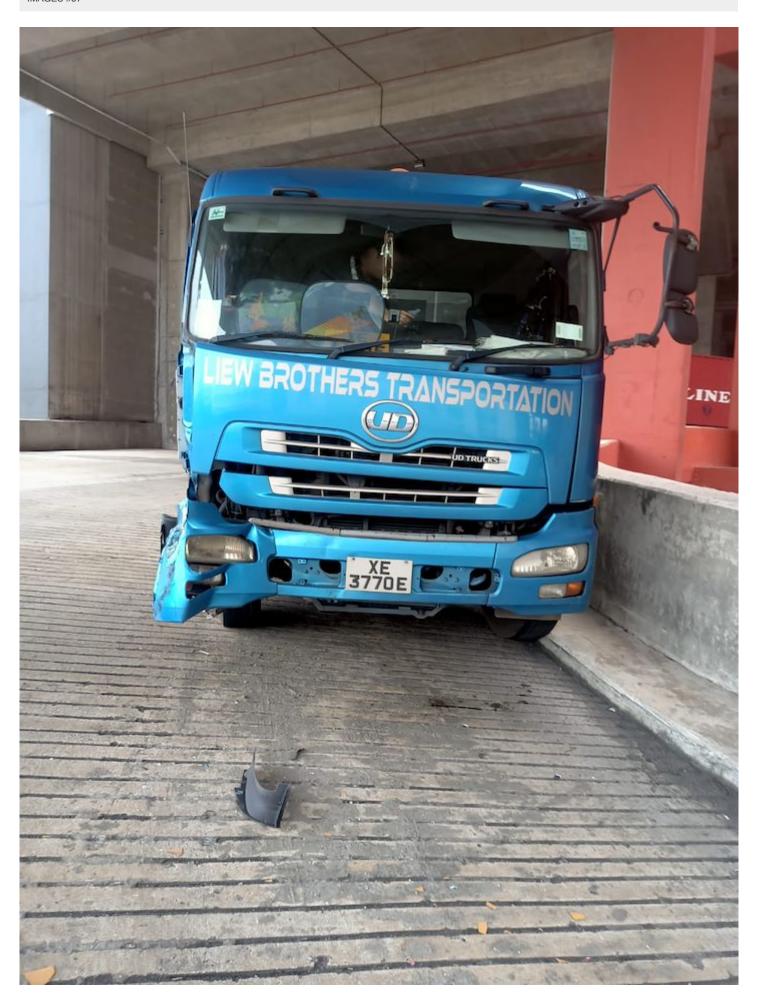




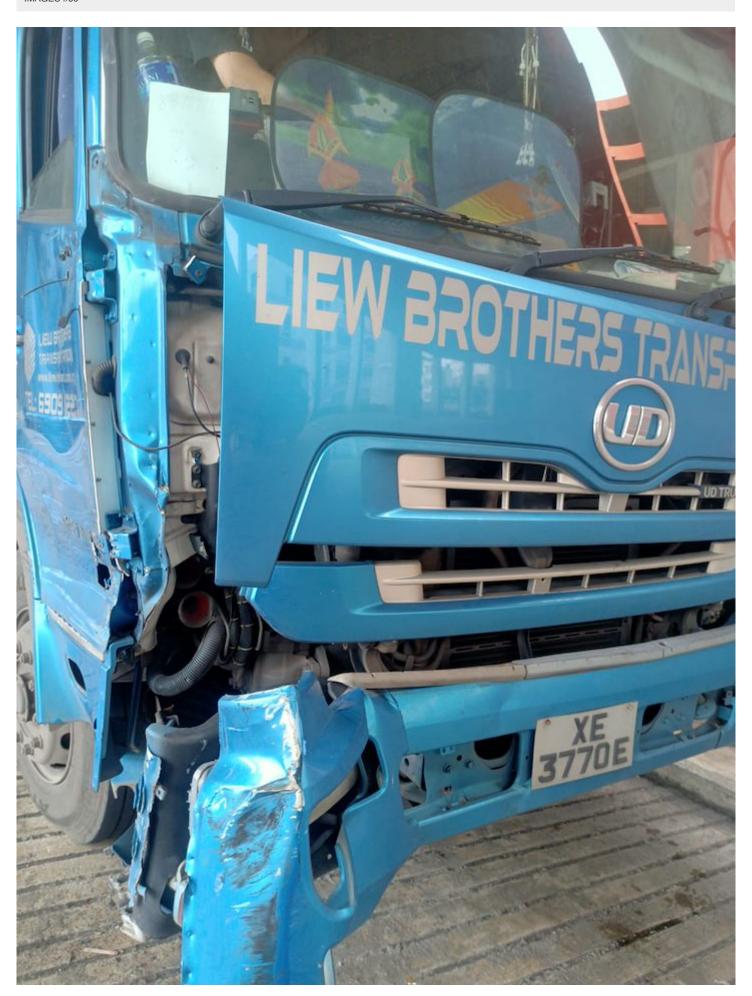




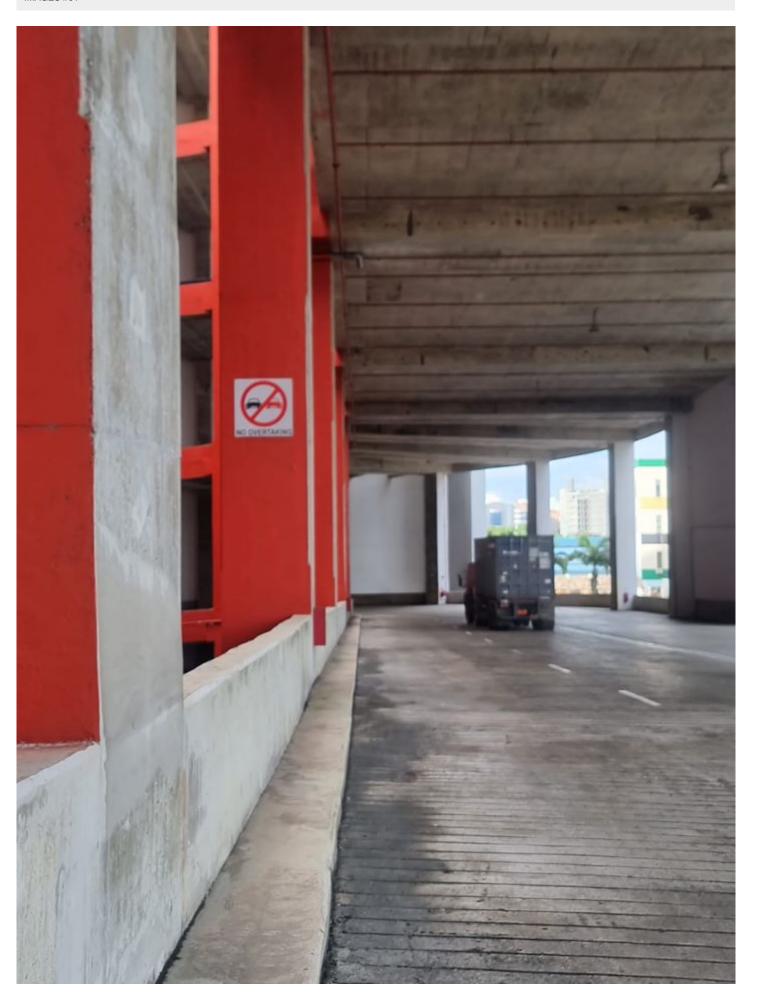








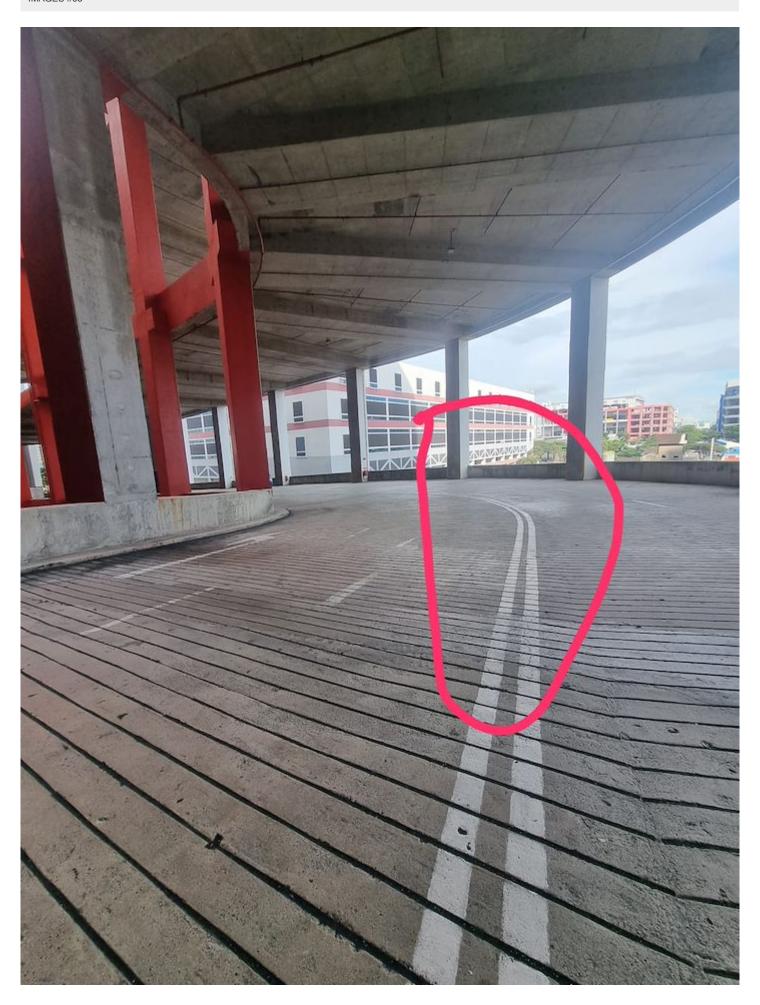














GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 – 17:00 UEN: \$66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

		ADD	ENDUM
A) [PARTICULARS OF PERSON MAKING THE AMENDMENTS:		
(Original Report No	: SA1J22CK0001	Vehicle Registration No: XE814H
i	Name(as shown in NRIC): CHENG HAI TRANSPORT SERVICENRIC/FIN/Passport No : 53122529A		
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate		
,	Address	:	_Singapore(
	Contact (Tel)	:	Mobile No. : 9459 8127
j	Email Address	:_alvin.chenghai@gmail.co	om
1	Date of Accident	: 19/12/2022	Time of Accident :16:17 hours
i	Place of Accident	: 47 Jln Buroh (At Level 2	of warehouse)
	Insurance Compar	ny: India International Insu	rance Pte Ltd
	make the following To reattach sketo To attach photos	g amendments: ch plan	cident and would like to include additional information or
- 1			

GIARMC addendumform_V3



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Geel Street | #04 | #05 | #06-02 | IDB Building | Singapore 049711 Email insure@iii.com.sg Website www.iii.com.sg Office (65) 63476100

Fax (65) 62244174

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.: D18MCV0000884_04

COVER: Comprehensive

Index Mark and Registration Number of Vehicle

XE814H

Chassis No

JALCYZ52RF7000017

2. Name of Policyholder

CHENG HAI TRANSPORT SERVICE

3 Effective date of Insurance

27 Jul 2022

4. Expiry date of Insurance

26 Jul 2023

Persons or Classes of Persons entitled to drive*

Whilst the vehicle is being used in connection with the Policyholder's business.

Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.

(2) Whilst the vehicle is being used for social, domestic or pleasure purposes. 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.

Limitations as to use*

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 racing, pace-making, reliability trial, or speed-testing.

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

c) Use for the carriage of passengers for hire or reward.

*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 ON LEE CHENG HAI: SGD1000.00

WINDSCREEN EXCESS

: SGD200.00 ONE CLAIM ONLY

Hire Purchase Company: N.A.

FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 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 : A000053/U. I Enterprise

Date of Issue

: 24/05/2022 14:36:23

M.Z. 301C - GOODS CARRYING - HIRE(ORGANIZATION)

For India International Insurance Pte Ltd

Authorised Signatory

keefeng2/24/05/2022

Page 1 of 1

24/05/2022 14:36:52

