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SN0923140007 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 04/01/2023 16:48 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (04/01/2023 16:48 (SGT))



# SINGAPORE ACCIDENT STATEMENT

IMPORIANT 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 Actual 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

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 of this report will, for a fee, be made available upon application by interested parties.

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

#### 04/01/2023 16:48 (SGT) Date of Submission Driver Reported by 03/01/2023 15:40 (SGT) Date of Accident Bencoolen St, Singapore Exact Location of Accident JUNCTION WITH MIDDLE ROAD Additional Location Information Singapore Country/State of Loss DETAILS OF OWN VEHICLE **GBL8460R** Vehicle Registration Number INSURED/POLICYHOLDER Yes Is company? JJBS INFINITY MAINTENANCE PTE. LTD. Name Of Registered Owner 2XXXXX727E Company Reg No melcolmq@yahoo.com Email Address (Phone) +65-90475313 Mobile Phone No Alternative Phone No VEHICLE PARTICULARS Toyota Manufacturer Hiace Model Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Commercial vehicle Vehicle Category Auto Transmission 2754 CC INSURANCE COMPANY ERGO Insurance Pte. Ltd. Name of Insurance Company DMCG22010708 Policy Number / Cover Note Number DRIVER QUEK THIAM HUAT(GUO TIANFA) Name of Driver SXXXX048A NRIC No 05/07/1971 Date Of Birth Outdoor Occupation

Date Of Driving Pass Driving experience	21/10/2005 17 YEARS AND 3 MONTHS Male
Conder	(Phone) +65-90475313
Mobile Number	(Filone) 100 00 11 11
Alt. Phone Number	melcolmq@yahoo.com
Email Address	6 BEACH ROAD #06-4875
A. I. F	O BEAGITTO IE
Address complement	190006
Postcode	No
Is the driver the policyholder?	18 (
If No Relationship of the Driver with the Insured	Employee
- Own Other Vehicles	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	<del>-</del> -
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Change/cross lane
Type of Accident Weather Conditions	Clear
	Dry
Road Surface	2.,
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
Was any other venicle or property damaged:	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Soliciting/offering accident claims assistance:  Translator's name	_
	-
Translator's ID  Translator's phone number	_
Translator's phone number  Translator's email	_
Translator's email	2
Original language used in the statement	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	o: E.
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OT	HER VEHICLE PROPERTY 1

DETA	ILS OF OTHER	RVEHICLE	PROPERTY 1
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(1) 李州高州大陆(1) 年11日李昭(1) 中人人中117 (1) 中人日17 (1)	
Vehicle Registration Number	SKJ9860S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	₩1
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

Address	
Postcode	
Ingurance 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.
- 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)

Lunderstand, 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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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 Taw yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes. (including #

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident
Describe Circumstances of the Accident  On 03.01-2023 at about 1530 WS, I was travelling along
middle koad. I was on lane d. while heading shaight, all of a sudden a
rehicle SKJ 98608 from my left had swern buto my Lane and colled
onto my lit fant payion.
# 1 188 IN 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
GLI 316 TA

#### Declaration

We declare the foregoing particulars are true in every respect.

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Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Date of Accident	: 03.0/- 2023 Accident Time: 1540 Mrs. (24-HR-Format)
	: Throngon of Bencoden of & middle Road
Accident Place	
Vehicle. No. (Car Plate No.)	: 6DL 9460R Make/Model: 7 Mota Hall DX 2.6 Auto
Insurace Company	: PR60 Policy No: 0m(622016708
Owner or Company Name /IC No.	: JJBS Infinity Maintenance Ptu 4d (202021727E)
Owner or Company Contact No.	:Owner's HpCompany Tel
DRIVER'S Name / IC No.	: Quek Man Huat (Guo Tianfa) S7123048A
DRIVER'S Date Of Birth	: 05-07.197 DRIVER'S License Pass Date 21-10-2005
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others:
DRIVER'S Address	: 6 Beach Rd * 06-4875 s(190006)
DRIVER'S Contact No./ Alt No.	:1)2) 904753[3
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	: melcolmac fahoo com
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including D	priver): PWW only
Was there any video Captured by ca Exact purpose for which vehicle wa Any Injury (If YES, Pls state):	is being used at the time of accident: Private use \ Work purpose
Other	Party Driver's Particular (if any)
Vehicle. No: SKJ 9860 S	Vehicle. No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

\* NEW - Passenger's name & gender:

#### 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

DMCG22010708

Vehicle Registration Number

GBL8460R

Cover Type

Comprehensive

Policy Type

Excess

Commercial Vehicle (Pte Use)

24-Hour Helpline: 6100 1620

Name of Policyholder/Insured

JJBS INFINITY MAINTENANCE PTE. LTD.

Commencement Date of Insurance

03/08/2022

Expiry Date of Insurance

02/08/2023

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

\$\$ S\$

500.00 300.00 100.00 2,500.00

Finance Company/Hire Purchase Owner:

UNITED OVERSEAS BANK LTD

\*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:

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 1) Use in connection with the Policyholder's business

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-Heinz Jung

Authorized Signature

		Contact Number: 63863322
A100003	CAR INSURANCE AGENCY PTE LTD	CP1, 02/08/2022 16:21
Vehicle Chassis	Number : GDH2012018186, Vehicle Engine/Motor Number : 1GD8702266	

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	727E
Vehicle Details	CDI 04/0D
Vehicle No.:	GBL8460R
Vehicle to be Exported:	No
Intended Deregistration Date:	11 Feb 2023
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE DX 2.8 AUTO
Primary Colour:	Silver
Manufacturing Year:	2021
Engine No.:	1GD8702266
Chassis No.:	GDH2012018186
Maximum Power Output:	E-
Open Market Value:	\$34,089.00
Original Registration Date:	14 Jun 2022
First Registration Date:	14 Jun 2022
Transfer Count:	1
Actual ARF Paid:	\$1,705.00
Intended PARF Rebate Details	No.
PARF Eligibility:	No
PARF Eligibility Expiry Date:	(=)
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	13 Jun 2032
COE Expiry Date:	C - Goods Vehicle & Bus
COE Category:	
COE Period(Years):	10
QP Paid:	\$48,889.00
COE Rebate Amount:	\$45,656.00
Total Rebate Amount:	\$45,656.00

The information contained herein is correct as at 04 Jan 2023