

Invoice Preparation Checklist		Amt (\$) 1st Bill	Amt (\$) Add Bill
nant's Particulars:-	1) AR : Accident Reporting (\$30);		
er/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
act No:	3) TF : Towing Fee \$40/\$45		
ged Portion:	4) FT : Follow-Through Survey \$120		
	5) FT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
Checked by (Engr-In-Charge):	ON*		
	* N5: Car / Tpl Allowance \$5		
	* N6: Repair Co-ordination \$10		
	* N7: Post Repair Inspection \$25		
	* N8: DV / Collect Source Coordination \$5		
ctors' Comments:-			

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 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 09/02/2023 18:06 (SGT)
Reported by Driver
Date of Accident 08/02/2023 19:45 (SGT)
Exact Location of Accident Singapore
Additional Location Information AIRPORT ROAD HEADING TO PAYA LEBAR
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBD1595Z

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner FOUR SEASONS CATERING PTE LTD
Company Reg No 1XXXXX526E
Email Address kokyawkyawm@gmail.com
Mobile Phone No (Phone) +65-88851351
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv350
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? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 2488

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd
Policy Number / Cover Note Number DMCPHQ22-002255

DRIVER

Name of Driver KYAW KYAW MIN
NRIC No SXXXX980F
Date Of Birth 22/08/1997
Occupation Outdoor

Date Of Driving Pass	01/08/2019
Driving experience	3 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88851351
Alt. Phone Number	-
Email Address	kokyawkyawm@gmail.com
Address	5 ALJUNIED LINK
Address complement	# 06-42
Postcode	360005
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	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	3
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
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	SLW1321D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MOHAMMAD SALIKIN BIN MOHD SALEH
NRIC No	SXXXX333B

Contact Number	(Phone) +65-82627634
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

VEHICLE NO:
DATE OF ACCIDENT:

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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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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' 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.



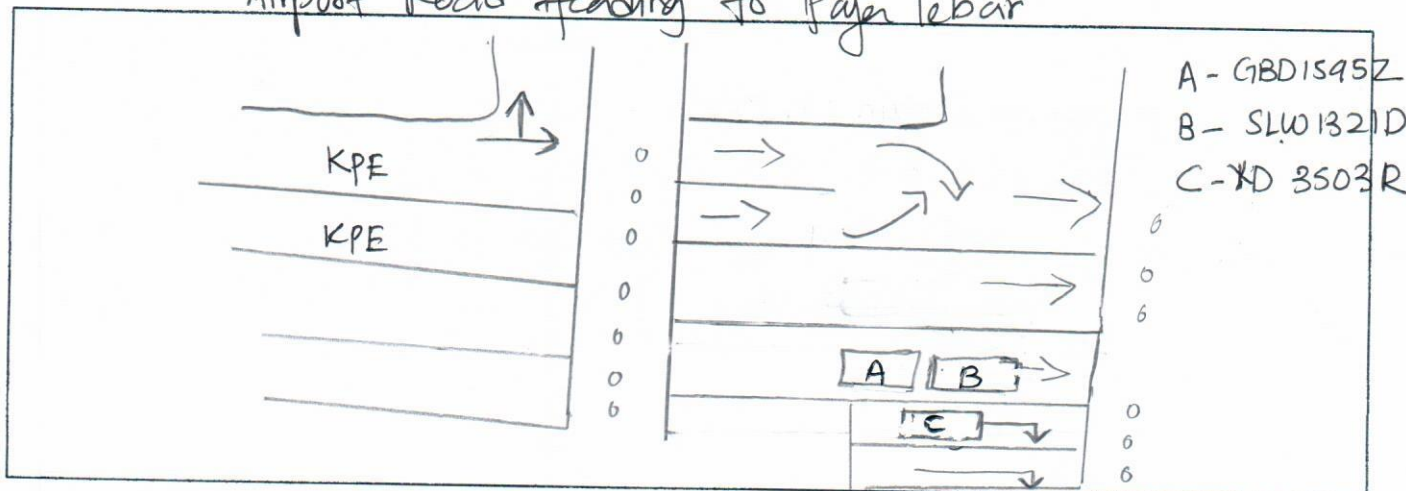
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Airport Road Heading to Paya Lebar



Describe Circumstances of the Accident VEHICLE NO:

DATE OF ACCIDENT:

I was exiting from kpe first lane. Vehicle B also exiting from kpe second lane. I was driving straight, then vehicle B get into my lane which is second lane. Then I switch to first lane and then vehicle B was at second lane and also continue switching to first lane. then he jam brake then I follow suit. then we stop in the middle of the road and he show middle finger to me. then he drive again and jam brake and I follow suit and hit his rear portion of the vehicle. Vehicle B and me come out from our car and was talking and his car door was open so suddenly vehicle C hit his car door.

REPORTING ONLY ()

OWN DAMAGE ()

THIRD PARTY ()

OWN WORKSHOP ()

Declaration NOTE: DO NOTE THAT YOU MAY HAVE 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.

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



Policyholder's Signature / Date & Time

Kyau
09-02-2023

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

gumud 9/2/2023

Witnessed by Reporting Centre Personnel

Date of Accident : 08/02/2023 Accident Time: 19 45 (24-HR-Format)
Accident Place : Airport Road heading to Paya Lebar
Vehicle Reg. No. (Car Plate No.) : GBD 1595Z
Vehicle Make/Model : _____
Insurance Company : EQI Policy No. DMCPHQ22-002255
Owner or Company Name /IC No. : Four Seasons Catering Pte Ltd (199702526E)
Owner or Company Contact No. : _____ Owner's Hp 8800 3003 Company Tel _____
DRIVER'S Name / IC No. : Kyaw Kyaw Min (S90259805F)
DRIVER'S Date Of Birth : 22/8/1997 DRIVER'S License Pass Date 01/08/2019
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling ☒ Employee \ Others: _____
DRIVER'S Address : 5 Aljunied Link # 06-42, S360005
DRIVER'S Contact No./ Alt No. : 1) 88851351 2) _____
DRIVER'S Occupation : INDOOR ☒ OUTDOOR (e.g. working inside or outside office)
Email Address : kokyawkyawm@gmail.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 Driver): 1
Was there any video Captured by car camera: YES ☐ NO
Exact purpose for which vehicle was being used at the time of accident: Private use ☐ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: SLW1321D

Vehicle Reg. No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name Driver: Mohammad Salikin Bin Mohd Saleh

Name Driver: _____

IC No. Driver: 87443333B

IC No. Driver: _____

Driver's Contact & Add: 82627634

Driver's Contact & Add: _____

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978 00490 N

eqinsurance
You're Got a Friend

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**COMMERCIAL VEHICLE PRIVATE (SCH I)
Comprehensive Classic**

Certificate No. : DMCPHQ22-002255

Classic Plan - EQ authorized workshop only
Form: LCVP1
Excess:
Section 1:
YEID:
WindScreen:

Additional
S\$500.00
S\$3,000.00 All Claims
S\$100.00

1. Index Mark and Registration Number of Vehicles
GBD1595Z

2. Name of Policyholder
FOUR SEASONS CATERING PTE LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act
09/07/2022

4. Date of Expiry of Insurance
08/07/2023

5. Person or Classes of persons entitled to drive*
Goods Carrying - (MZ300) Authorised Driver. Any of the following:-
(a) The Policyholder
(b) Any other person who is driving on the Policyholder's order or with his permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

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

THE POLICY DOES NOT COVER:

- 1) Use for hire or reward or for racing pace-making reliability trial or speed testing.
- 2) Use whilst drawing a greater number of trailers in all than is permitted by Law.
- 3) Use for the carriage of passengers for hire or reward.
- 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

*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.

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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Maybank Singapore Limited

B000006/Anika Insurance Brokers & Consultants Pte Ltd

Date of Issue : 01/07/2022 14:51



Authorised Signatory
EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

