SJ0E22C50005 / Jin Auto Services Pte Ltd ENTRY DATE & TIME: 05/12/2022 16:24 (SGT) SUBMITTED BY: Lim Hong Guo VERSION: 1 (05/12/2022 16:24 (SGT))

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.

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 05/12/2022 16:24 (SGT) Reported by Driver Date of Accident 01/12/2022 23:30 (SGT) Exact Location of Accident 87 Defu Lane 10, Singapore 539219 Additional Location Information **CARPARK** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBM678C

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner NATURAL COOL AIRCONDITIONING & ENGINEERING PTE LTD Company Reg No 1XXXXXX014C Email Address chiawei.loo@naturalcool.com.sg Mobile Phone No (Phone) +65-65931113 Alternative Phone No

Foton

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VEHICLE PARTICULARS

Manufacturer

Model **IBLUE V6** Variant **IBLUE V6** 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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SD22V07773 /VCV /R02

DRIVER

CC

Name of Driver SAIFOL HELMI BIN SIRON Passport No/FIN GXXXX921X Date Of Birth 20/10/1981 Occupation Outdoor

Date Of Driving Pass 19/07/2013 Driving experience 9 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-86698779 Alt. Phone Number Email Address chiawei.loo@naturalcool.com.sg Address 87 DEFU LANE 10 #06-01 Address complement Postcode 539219 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 My vehicle was parked stationary at the carpark. Suddenly, i received a call from my office that my vehicle has been damaged. Then i

realised that vehicle C has collided to vehicle B and the impact has caused vehicle B to collide to my vehicle. No one was injured. My office only managed to get all these information on 02-12-2022

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 **GBC7176R** Vehicle Manufacturer Toyota Vehicle Model Hiace Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle

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)	0

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	YQ8585R - -
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	HO TONG SIONG
NRIC No	SXXXX246Z
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	-

	My vehicle us parked stationery at the company.
200000000000000000000000000000000000000	, I received a call , that my vehicle has been
Sudenly	, I received a call , that my which has been
dancy d.	Then I realised that vehicle a has contraded to
vehicle	B and the import has causal vehicle B to coulide
to my	vehicle. No are was injured, my office only manage to get
all there	information on 02/12/2022.

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

NATURAL COOL Airconditioning & Engineering Pte Ltd Natural Cool Building 81 Defa Lane 10 Singapore 539217

rs Signature / Date & Time 05/13/32

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID cord)

SKETCH PLAN

IMPORTANT NOTICE

- 1 Please report <u>correctly</u> the details of the accident to speed up the claims process
- 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
- Any false reporting may be referred to the Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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 (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/mailipackages); 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

NATURAL COOL
Airconditioning & Engineering Pte Ltd
Natural Cool Building
10 Defu Lane 10 Singapore 539217

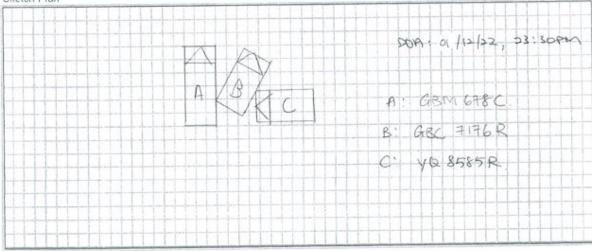
Policyholder's Signature / Date & Time בכ/וב/ב Driver's Signature (if driver is not the policyholder) / Date

ACCUPATION OF THE PROPERTY OF

Witnessed by Reporting Centre Personnel

Jordan

Sketch Plan



1































