NATIONAL-Assessment Coun	re 'services (: : : : : : : : : : : : : : : : :
Daleln 23/03/2023	Job description Plate & Time Completed
Retho NALEQI23003000 ldc	SAS e-filing
VehNo YP 4094 Y	E-mail (within Stars, A1C Clars,
DOA 20/03/2023	i-Motor Claim Form
	I-Motor W/O (Within: OD 2hrs, TP 4hrs)
OD/TP) Reporting Only	i-Photo Uploaded :
	Assessment/Survey Report
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp
Preferred Wksp / INC Assign Wksp / QW: (Tol: Fax:
TP Particulars: Veh No: V	Q 9 3 3 Y . INC(,)/Non-INC()
Owner / Driver: (Tel:
	Period: () Cover Type: ()
	Date: Time:)
Insured/Driver Liability: (%)) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]
Year of Registration: ()	Warranty: YES ()/NO()
Yoading: S	1,000 ()/\$2,000 ()
General Remarks:	NO safer of repairer
() Walk-In Customer: Customer's in	information strictly Confidential & Strictly NO refer of repairer.
() Total Loss Case : to e-mail Ins	surer URGENTLY.
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SN09233M0004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 23/03/2023 09:56 (SGT) SUBMITTED BY: NIVITHA VERSION: 1 (23/03/2023 09:56 (SGT))

SINGAPORE ACCIDENT STATEMENT

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 actually insurance companies.

3. Intomation produce into the as water states and expension of 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 Reported by Date of Accident	23/03/2023 09:56 (SGT) Actual Driver 20/03/2023 20:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information Country/State of Loss	ALONG PIE TOWARDS TUAS BEFORE JALAN BAHAR EXIT 36 Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP4094Y
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes PRINCE'S LANDSCAPE PTE LTD 1XXXXX496W angel@carway.com.sg (Phone) +65-67637000

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NNR85UH4A
Variant ,	
Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to	Employment
your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2999

INSURANCE COMPANY

Name of Insurance Company	> **************</th <th>EQ Insurance Company Ltd</th>	EQ Insurance Company Ltd
Policy Number / Cover Note Number	102122121121121221211121111111111111111	DMCFHQ23-000002

DRIVER

Name of Driver	SHATISH KUMAR S/O RAMACHANDREN
NRIC No	SXXXX593H
Date Of Birth	08/07/1983
Occupation	Outdoor

Date Of Driving Pass	24/01/2011
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84199626
Alt Phone Number	
Fmail Address	angel@carway.com.sg
Address	APT BLK 58 LENGKOK BAHRU
Address complement	# 07-523
Postcode	150058
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Does Driver Own Other Vehicle Owned by Driver	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	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry
Noad Guillace	
OTHER INFORMATION	
	w.
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
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	•
Original language used in the distance.	
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	
Police Station Address	
Was notice of intended Prosecution given?	
If yes, against whom?	
ii yes, against wildin.	
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED POLICE REPORT - T-2	0230320/2157
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTH	ER VEHICLE PROPERTY 1
Vehicle Registration Number	- YQ933Y
Vehicle Manufacturer	
Vehicle Model	•
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	10 4 1 1770
No Of Passenger (Including Driver)	(-

SKETCH PLAN

MP OR TOUNDTICE

- 2. This Figure to completed by the Policyholder and/or the Actual Driver.
- 3. Inform tight provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insur support to repudiate policy liability.
- 4. The is seind acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any se reporting may be referred to the Traffic Police Department for investigation.
- 6. This restablished by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singer (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the signade available aforesaid.
- 8. Consers tinder the Personal Data Protection Act (PDPA)
- I undersia (athowledge, agree and consent that:
- (a) My lins 17 Th, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose
- and/or processmy personal data/personal information set out in this [form] and any other personal information provided by me or
- pos sessed Aminsurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have it well vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be
- collectively riened to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant specific specific
- (i) processirs shandling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
- ii) investiga in the accident and/or my claims;
- iii) carrying Ottand/or dealing with my instructions or responding to any enquiries by me;
- iv) administ sing my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve size losure of stain 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. (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, se, disclose and/or process my Personal Information for one or more of the above Purposes; and
- c) my Persor ad Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents not uding the Ir lawyers/(em grass), which may be sited outside of Singapore, for one or more of the above Purposes.

licy holder's Signature / Date & Time

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

Witnessed by Reporting Centre Personne (Name as in NR C/ID card)

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	Please Refer to the affineted
	preuse reent go gre agricieo
	Subemen-
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2	
claration	

olicyholder's Signaerie / Date & Time

02 2023.

Actual Driver's Signature (If driver is not the policyholder) Witnessed by Reporting Centre Pers / Date & Time (Name as fr. NINC/ID card)

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athushup

Jalan Bahar Power Station-Jalan Bahar (B31021)

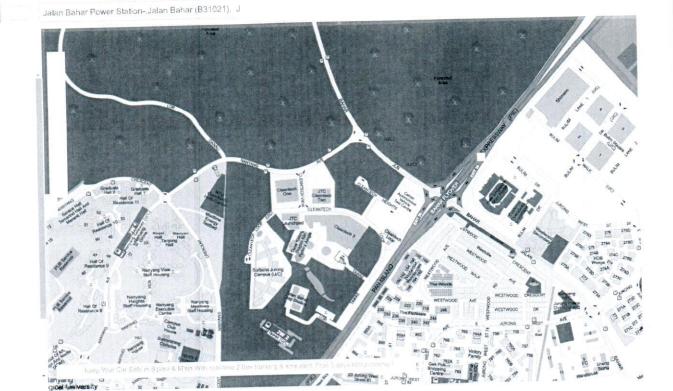
Map Directions

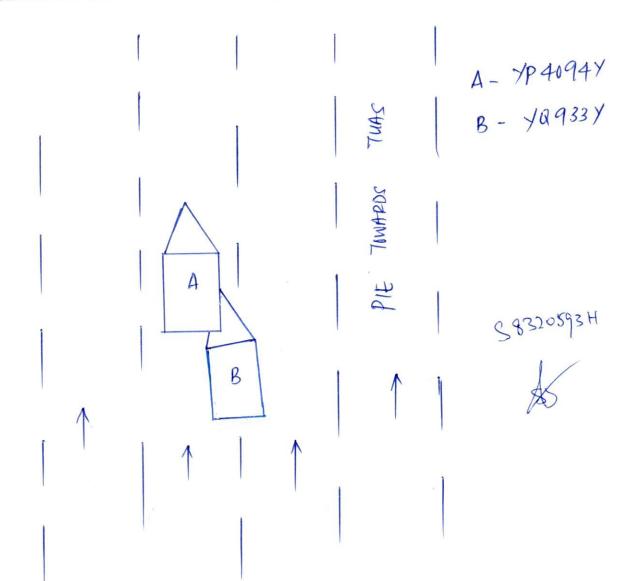
Map

Building Directory

What's Nearby Get Tips

Getting Here





Accident Statement

On 20/03/2023 at about 2020hrs, I was driving my vehicle (YP4094Y) along PIE toward Tuas before Jalan Bahar Exit 36. I was travelling toward tuas along lane 3. Suddenly, my vehicle felt weird and the engine stalled. I tried to start my engine again but it was unable to start.

I alighted from my vehicle to direct the traffic and put the cone a distance away from my vehicle in order to alight oncoming vehicle. Suddenly and without a warning, I notice a lorry (YQ933Y) was driving very fast. I managed to dodge away, and he collided onto my vehicle.

I contacted for ambulance assistance as I noticed that one of the passengers has injury on his left forehead. Shortly after, LTA, EMAS and ambulance came. I saw that someone was being conveyed to hospital. Traffic police arrived and asked some questions and handed over a case card to me and told me to lodge a police report.

The damage to my vehicle was the right tire, right wooden panel, license plate, safety bar and driver's door. The damage of the vehicle (YQ933Y) was the front bumper and the front headlamp.

I am making a claim against third party.

Driver's Name: Shathish Kumar S/O Ramachandren

I/C: S8320593H





1 of 3

Report No. T/20230320/2157

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

REPORT OF A TRAFFIC ACCIDENT

	me Report M 023 23:54	lade:	Vide Report No.: J/20230320/0121	Station Diary No.: 141
Informa	ant's Particu	ılars		
SHATH	of Informant: ISH KUMAR CHANDREN	8/0	Address: APT BLK 58 LENGKO	OK BAHRU #07-523 SINGAPORE 15005
ID Type	/ ID No.: IO / S832059	93H	Contact No.: Home/Office:	Mobile: 84199626
Nationa SINGAI	ility: PORE CITIZ	EN	Email:	
Sex: Male	Age: 39	Date of Birth: 08/07/1983	Type of Informant: Driver	-84
Race: Indian			Language:	
Occupa LANDS		IPERVISOR	Driving Licence Inform Class: 3	mation: Date of Expiry:

Type of Accident:			Date/Time of Accident: 20/03/2023 20:20	Type of Location: Straight Road	
Location:					
PAN-ISLAND	EXPRESSWAY				
Weather: Cloudy		Road Surface: Wet			
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collis Moving Vehic	sion: cle Against - Parked Vehic	le		Anyone conveyed by ambulance: Yes	

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP4094Y	Lorry	9			Seriously Damaged	
YQ933Y	Lorry				Seriously Damaged	6



2 of 3

Report No. T/20230320/2157

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

CONTINUATION OF REPORT

On 20/03/2023 at about 2020hrs, I was driving my vehicle YP4094Y (Yellow lorry) along PIE(Tuas) before Jalan Bahar exit. I was on the way to Tuas along lane 3. Suddenly, my vehicle felt weird and the engine stalled. I then tried to start my engine again, but it was unable to start.

I alighted from my vehicle to direct the traffic. Suddenly, I notice vehicle YQ933Y (White, lorry) was driving very fast. I managed to dodge away, and he collided onto my vehicle.

I then contact for ambulance assistance as I noticed that one of the passengers has injury on his left forehead. Shortly after, LTA, EMAS and ambulance came. I saw that someone was being conveyed to hospital. Traffic police arrived and asked some questions and handed over a case card to me and told me to lodge a police report.

The damages to my vehicle were the right tire, right wooden panel, license plate, safety bar and driver's door. The damages to vehicle YQ933Y were the front bumper and the front head light.





3 of 3

Report No. T/20230320/2157

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

CONTINUATION OF REPORT

Signature of Officer Recording The Report: J / SGT 2 KOH KAI YAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 20/03/2023 23:54
Officer In Charge Of Case: TP / GIT / SGT 3 INTAN WULANDARI BUDDY SANTOSO Contact No.: 65476415	Classification Of Case:
NP168	

ACCIDENT DATE (20, 03, 2023) (DD/MM/YYYY), TIME (20 : 20) (HH:MM)
Along PIE Towards Tuals before Julen Bahar Exit 36
DETAILS OF THE STATE STA
1. DETAILS OF VEHICLE
DIVEHICLE NUMBER: YP4094Y DINSURANCE COMPANY: 60
CIPOLICY MILLIANTE DM CELL
C)POLICY NUMBER: DM CF HQ 23 - 000002
DISE/SALDON: ISUZY/NNR&SUHAA : Quad manual
MARION / PONDE / LONG AV.
B) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL MOTORCYCLE) D) PURPOSE OF USING AT ACCIDENT TIME WOHLING TIME.
DARE YOU CLAIMING HINDER YOUR AND WORK THE
IF NO. PLEASE STATE (THIRD PARTY CLAIM) REPORTING ONLY) 2. INSURED / POLICY HOLDER
2. INSURED / POLICY HOLDER LEAND REPORTING ONLY] A) HAME: Proce's Landsceipe pte Hd [MALE / FEMALE] b) NRIC/FIN/BASSPORT: 1995
D) NRIC/FIN/RASSPORT: 1995064 96W CONTACT: 6763 7000
LUID O POUCY HOLDER CONTINUE TO S. O IF DRIVER ALSO POUCY HOLDER Child D. V. March S. O. C.
(01) Shufish Kumar Sto Ramachandre RALE FEMALE (01) DINRIC/FIN/PASSPORT: \$8320593H CONTACT: 84199626
The Die of
"d) DATE OF BIRTH: (08, 07, 1983) (DD/MM/YYYY)
- INDOOR INDOOR
1) YEARSOF DRIVING EXPRERIENCE 24/01/2011 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES) NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: 5. GIVENTHER CONDING N: CLEAR / RAINING / OTHERS DIROND SURE A CENTRE OF THE DRIVER WITH INSURED:
7. DIREPORTED TO POLICE (YES)
IF YES, PLEASE STATE WHICH POLICE STATION: Nanuary
of Mender of VEHICLE NUMBER: YQ 433Y
Gluding chiver) DI DRIVER'S NAME
() PARTY VEHICLE CONTACT:
LE PROSTUMBER:
cluding driver) for into the property of the contract of the c
CONTACT:

Smarl = angel@canvay · com · sg

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



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 FLEET Comprehensive

Certificate No.: DMCFHQ23-000002

 Index Mark and Registration Number of Vehicles YP4094Y Form: LCVP1
Excess:

Section 1

SGD750.00

YEID-AC Additional SGD3,000.00

2. Engine No. and Chassis No. 4JJ12M6042 / JAANNR85HG7100056

3. Name of Policyholder PRINCE'S LANDSCAPE PTE LTD

4. Effective Date of the Commencement of Insurance for the purpose of the Act

5. Date of Expiry of Insurance 31/01/2024

EQI Motor Accident Hotline

6311 3211



6. Person or Classes of Persons entitled to drive*

Goods carrying - (MZ300) Authorised Driver. Any of the following :-

The Policyholder

2. Any person on the order or with the permission of the Policyholder

*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 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 has not been cancelled at the time of accident loss or damage.

7. Limitations 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.

HP: As Per Schedule / Endorsement unwsbh/HO/A000298/Tong Hin Insurance A

Authorised Signatory EQ Insurance Company Limited

