

NATIONAL Assessment Centre Services (Call 1-800-555-1234) **SN10823400004**

Date In: 2/10/2023 17:31	Job description	Date & Time Completed	Done by
Ref No: XBA/EO1280047104	SAS e-Mailing		
Vehicle: GRF 6022 S	E-mail (within 24hrs, A/C 2hrs)		
D.O.A: 2104/2023 16:30	1-Motor Claim Form		
OC (79) Reporting Only	1-Motor W/O (within 24hrs, A/C 2hrs)		
TP Insured:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whom		

Preferred Wksp / INC Assign Wksp / QW: () Tel: () Fax: ()

TP Particulars: () Vehicle No: **8FE 5833K** INC () / Non-INC ()

Owner / Driver: () Tel: ()

Policy No: () Period: () Cover Type: ()

Confirmed by: () Date: () Time: ()

Insured/Driver Liability: () % (Note: Hst Status (WO): N: 0-30%, P: 21-79%, F: 80-100%)

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

General Remarks: ()

() Walk-In Customer / Customer's Information strictly Confidential & Strictly NO refer of repair.

() Total Loss Cost: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: ()

Damage: ()

Other: ()

Insurance Particulars:	Invoice Preparation Charge:
Driver/Owner:	1) All: Accident Processing (\$300)
Driver No:	2) DA: Damage Assessment (\$1000) INC (\$50)
Assigned Person: ()	3) TP: Towing Fee (\$100)
Checked by (Engr-In-Charge):	4) PC: Follow-Through Survey (\$100)
Comments:	5) PT: Follow-Through Survey (Barter)
	6) TR: Re-Inspection (\$100)
	7) NI: New DA + SMRT Survey (\$100)
	8) NIUC Additional Fee (\$100)
	9) QC: QC Fee (\$100)
	10) NI: Courtesy Car / Tel Allowance (\$100)
	11) NI: Repair Coordination (\$100)
	12) NI: Post Repair Inspection (\$100)
	13) NI: BY / Collect Excess Coordination (\$100)
	14) NI: TP (Non-INC) / Collect INC (\$100)
	15) NI: Other Items (\$100)
	16) NI: Other Items (\$100)
	17) NI: Other Items (\$100)
	18) NI: Other Items (\$100)
	19) NI: Other Items (\$100)
	20) NI: Other Items (\$100)

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	24/04/2023 17:31 (SGT)
Reported by	Actual Driver
Date of Accident	21/04/2023 16:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS AFTER TOH TUCK EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF6022S
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	INTERLIFT SALES PTE LTD
Company Reg No	1XXXXX090C
Email Address	spinceryeo@interlift.com.sg
Mobile Phone No	(Phone) +65-98508585
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NHR85AUE4AA
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2999

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMCPHQ23-000135

DRIVER

Name of Driver	ANIFA SHAJAKHAN
Passport No/FIN	GXXXX055L
Date Of Birth	02/05/1992
Occupation	Outdoor

Date Of Driving Pass	05/08/2021
Driving experience	1 YEAR AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82815873
Alt. Phone Number	-
Email Address	spinceryeo@interlift.com.sg
Address	3 TUAS DRIVE 1 #06-604
Address complement	-
Postcode	638670
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	4
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)	2
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	-

PASSENGER 1

Name	PARTHIBAN
Gender	Male

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 SKETCH PLAN

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	SJE5833K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Describe Circumstance of the Accident

I am traveling along PIE tuas after Toh Tuck ~~Exit~~ Exit. On my own lane
The traffic was heavy, Suddenly I heard a loud bang
and felt an huge impact from the left rear portion of
my vehicle. I got down and see, I am involved in
a 4 car chain collision.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]

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

[Signature] 24/04/2023
Witnessed by Reporting Centre Personnel

SPINCERYEO & InterLift .com.sg

Date of Accident : 21042023 Accident Time: 1630 pm (24-HR-FORMAT)
Accident Place : PIE towards Tuas TohTuck Exit
Vehicle Reg. No (Car plate No.) : GBS 60225 cc: 2000 Vehicle Make/Model: ISUZU
Insurance Company : EQ Insurance Policy No. DmCPHQ23-000135
Name of Registered Owner : Company / Individual ~~IA~~ Interlift Sales PTE LTD
ID of Registered Owner : Co Reg No: 198306090C Owner's NRIC No: -
OWNER EMAIL ADDRESS: spin ceryeo @ interlift .com.sg Co Contact No: 9850 8585 Owner's Contact No: -
DRIVER'S Name : ANIFA SHAJAKHAN DRIVER'S NRIC No: G2184055L
DRIVER'S Date of Birth : 02051992 DRIVER'S License Pass Date 05082021
Relationship bet. Owner & Driver : Spouse / Parents / Children / Sibling / Employee Others: -
DRIVER'S Address : 3 Tuas drive 1 638670 #06-604
DRIVER'S Contact No./ Alt No. : 1) 82815873 2) -
DRIVER'S Occupation : INDOOR / OUTDOOR (eg. working inside or outside of an ofc)
Email Address : SHAJ1992 KHAN @ 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): 2 Name & Gender: ANIFA SHAJAKHAN / M
Was the accident reported to the police? YES / NO
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
Any injuries, if yes (name of the injured person) NO

Other Party Driver's Particulars (if any)

Vehicle Reg No: SJE5833K	Vehicle Reg No: SMC7301R
Vehicle Make/Model:	Vehicle Make/Model:
Name DRIVER:	Name DRIVER:
IC No. DRIVER:	IC No. DRIVER:
DRIVER'S Contact & add:	DRIVER'S Contact & add:

XE7767P

REPORT FORM EXPLAINED IN: ENGLISH / CHINESE / MALAY / TAMIL OTHERS:

WHO REPORTED THE ACCIDENT: OWNER / DRIVER / ~~BOAT~~

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 PRIVATE (SCH I)

Comprehensive Classic

Certificate No. : DMCPHQ23-000135

Classic Plan - EQ Authorised Workshop Only

Form: LCVP1

Excess:

Section 1:

S\$500.00

YEID-AC Additional:

S\$3,000.00

1. Index Mark and Registration Number of Vehicles

GBF6022S

2. Name of Policyholder

INTERLIFT SALES PTE LTD

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

03/01/2023

4. Date of Expiry of Insurance

02/01/2024

5. Person or Classes of persons entitled to drive*

Goods carrying - (MZ300) Authorised Driver.

Any of the following :-

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

EQI Motor Accident
Hotline

6311 3211



* 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 : UNITED OVERSEAS BANK LIMITED

A000272/Ken Tan Insurance Agency Pte Ltd
Date of Issue : 21/12/2022 15:07

Authorised Signatory
EQ Insurance Company Limited

Exp No. : DMCPHQ22-000155