SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report <u>correctly</u> 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 Reported by

Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

05/06/2023 15:45 (SGT)

Actual Driver

03/06/2023 19:25 (SGT)

Singapore

HOLLAND ROAD > FARRER ROAD

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNJ73947

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

SKYWAY MOTOR PTE LTD

199904194N

SAM@SKYWAY.COM.SG

(Phone) +65-88551188

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Honda Shuttle

Private hire

No - Claiming third party

Private hire

Auto

1600

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

India International Insurance Pte Ltd D22MFL0004075 01

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

TAN HWA MONG JOSEPH S1550294J 13/05/1962 Outdoor

CAccident report SC1R23650002

Date Of Driving Pass Driving experience

Gender

Mobile Number

Alt. Phone Number

Email Address Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

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? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER ATTCHMENT

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

17/11/1982

40 YEARS AND 7 MONTHS

Male

(Phone) +65-92393549

TANJOSEPH.62@GMAIL.COM 401 ANG MO KIO AVE 10 #13-607

560401

No Hirer

No

Side Swipe Clear Dry

No

2 No

Yes

No

No

No

Yes Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

SNA3419K

Private car

Accident report SC1R23650002

Address			 	_
Address complement				
Postcode				
Insurance Company Name				
Nature Of Damage				
Details of property damaged	d in accider	nt	 	_
No. Of Passenger (Including				

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
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- 3. Information provided must be as frushful and accurate as passible. Any will disrepresentation or withholding of material facts may allow Insurance companies to regudinte policy hability
- 4. The Issue and succeptance of this Form by insurance companies is not an estimission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Traffic Police Department for investigation.
- 6. This report will be forwarded by the Insurers to the GIA Records Management Centre established by the General Insurence 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 thereby 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) ervolved 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' knyorc/law firms, the Monutary Authority of Singapore and any relevant government agency/autivality (such as the police), for the purpose(s) of:

(i) processing, handling and/or deating with my claims including the self-ement of the claims and any necessary investigations relating to

(2) investigating the accident and/or my claims:

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to commenciately my capana prictability die mainty of contespondence, statements, invoices, reports or notices to mis, which could involve disclosure of cortain personal data about mo 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 "Purposas")

(b) an insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' towyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

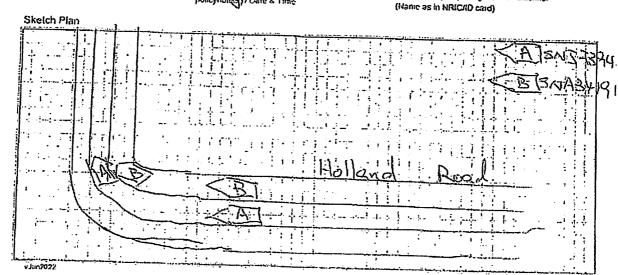
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party source providers or agents (including their lawyershaw fums), which may be sited outside of Singapore, for one or more of the above Purposes.

Poscynolder's Signature / Date & Time

Action Signature of driver is not the

Witnessed by Reporting Centre Personnel

Sama Moorthy



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We declare the foregoing particulars are true in every respect	$A < \delta i$
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INDIA INTERNATIONAL INSURANCE PTE LTD

Co Reg. Ro. 19870/F92k | GST Reg. No. M.5/0070/006/X 61 [Cool Strest | mit] mit] mit ou oz [folk huilding | Singapore (1497). Office (65) 63476100 1 mail from the mixon se

COVER: Third Party Only

Fax (65) 62234174 Website www.iicomsg.

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (HERD PARTY RISKS AND COMPERSATION) ACT (CHAPTER 187) MOTOR VEHICLES (HERD-PARTY RISKS AND COMPERSATION) ROLES, 1500 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (HERD-PARTY RISKS) RELES, 1539 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim,

CERTIFICATE NO.: D22MFL0004075 01 1. Index Mark and Registration Number of Vehicle

SNJ73942.

Chassis No.

GP72208090

2. Name of Policyholder

Effective date of Insurance

SKYWAY MOTOR PTE LTD : 23 Feb 2023

4. Expiry date of Insurance

: 07 Aug 2023

5. Persons or Classes of Persons entitled to drive

Any person who is driving on the Policyholder's order or with his/their permission. The Hirer.

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

Limitations as to use!

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure putposes and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover

(1) Use for racing, pace-making, reliability trial, or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

(3) Use for any purpose in connection with the Motor Trade.

*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).

Agent/Broker : D000052/SKYWAY MOTOR PTE LTD
Date of Issue : 23/02/2023 11:48 32

MZ406 - Hire Car (U/G)

For India International Insurance Pte Ltd

jasmine.ug/01/08/2022 10:53:31

23/02/2023 11:49:51

