

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	25/04/2023 11:18 (SGT)
Reported by	Actual Driver
Date of Accident	24/04/2023 13:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Tuas Viaduct towards Tuas South Street 11
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	TRD1175M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	JL TRANSPORT SPECIALIST PTE. LTD.
Company Reg No	201508155E
Email Address	coco.jltransport@gmail.com
Mobile Phone No	(Phone) +65-67412520
Alternative Phone No	(Office) +65-67412520

VEHICLE PARTICULARS

Manufacturer	SIN TRANS ENGRG P L
Model	40' TRI AXLES PLATFORM CONTAINER TRAILER
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?	Yes
Vehicle Category	Mobile equipment
Transmission	Manual
CC	0

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SPMF1000000019

DRIVER

Name of Driver	Rajendran Babu
Passport No/FIN	G6071872K
Date Of Birth	02/04/1984
Occupation	Outdoor

Date Of Driving Pass	04/10/2016
Driving experience	6 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83496465
Alt. Phone Number	-
Email Address	coco.jltransport@gmail.com
Address	45 Sims Drive
Address complement	-
Postcode	380045
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	Fire, explosion or lightning
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	0
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

Refer to attached sketch plan.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

R. Bah

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



Witnessed by Reporting Centre Personnel

Sketch Plan

Not available

Describe Circumstances of the Accident

on 24/4/23 around 13:00 hours, I was driving company vehicle XE4294G with trailer TRD117SM along Tuas Viaduct towards Tuas South Street 11 on the left lane. While driving, suddenly I heard my trailer's left center tyre burst. I then parked my vehicle at the roadside to make a check. When go checking, I noticed that smoke was coming out, I quickly poured my drinking water to put out fire but it was unsuccessful. The tyre started burning and caused damage to my trailer.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

















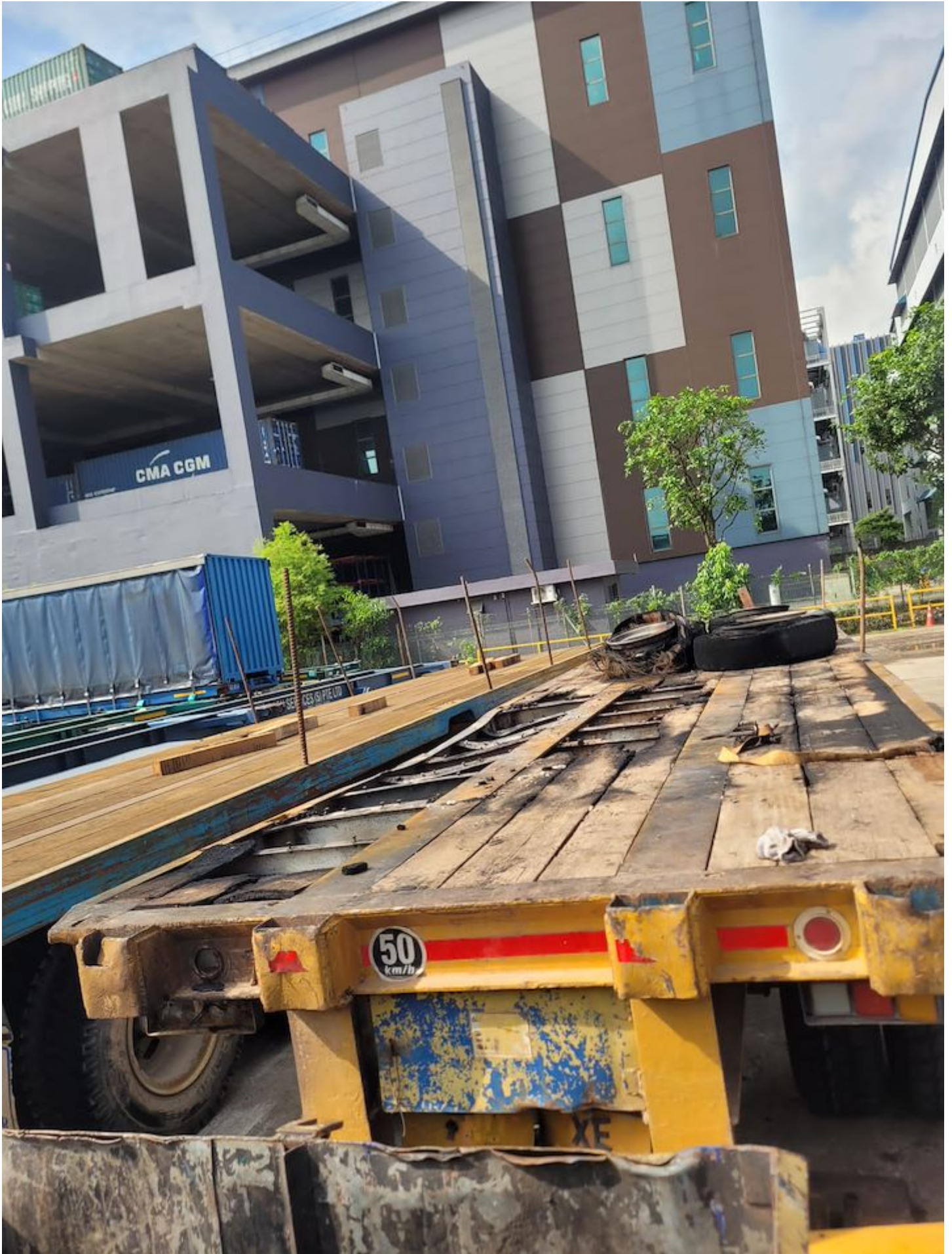


























Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number	: SPMF1000000019
Date of Issue	: 30 September 2022
Coverage	: THIRD PARTY, FIRE AND THEFT
Policyholder	: JL TRANSPORT SPECIALIST PTE. LTD.
Finance Company	: -
Period of Insurance	: 23 October 2022 To 04 July 2023 (both dates inclusive)
Registration Number	: TRD1175M
Chassis Number of Vehicle	: STEPL357615

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
 - (b) Any other person who is driving on the Policyholder's order or with his/her permission or to whom the vehicle is hired.
- * 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 regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use*:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
 - (b) Use for social, domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
- * Limitation rendered inoperative by Section 8 of 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.

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
- (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (c) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

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).

30 September 2022
 Issue Date


 Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000396 ALLINK INSURANCE AGENCY PTE LTD
 Excess : Section 2: Liabilities to Third Parties