SA1J237I0001 / ASM Automotive Services Pte Ltd ENTRY DATE & TIME: 18/07/2023 10:02 (SGT) SUBMITTED BY: Nicole Ng VERSION: 1 (18/07/2023 10:02 (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 18/07/2023 10:02 (SGT) Reported by **Actual Driver** Date of Accident 29/06/2023 07:50 (SGT) Exact Location of Accident Singapore Additional Location Information At the open carpark along East Coast Parkway (near to AYE) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YP6775C

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner INA ENGINEERING & CONSTRUCTION PTE LTD Company Reg No 198800978N Email Address inaengineering@ina.com.sg Mobile Phone No (Phone) +65-68623887 Alternative Phone No (Office) +65-68623887

VEHICLE PARTICULARS

Manufacturer Isuzu Model NPR85UH5A 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 - Reporting only Vehicle Category Commercial vehicle Transmission Auto CC 2999

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D23MCV0004009

DRIVER

Name of Driver Thangamuthu Rajeshkannan Passport No/FIN G8108141M Date Of Birth 12/05/1986 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	13/02/2017 6 YEARS AND 4 MONTHS Male (Phone) +65-93874120 - inaengineering@ina.com.sg 27 Tuas Avenue 3 #01-01 - 639419 No Employee No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collided into Parked Vehicle Clear Dry
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	No 2 No - Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Jurong East Neighbourhood Police Centre (Phone) +65-18008999999 (Fax) +65-66655791 No. 92 Boon Lay Way Singapore 609962 No
CIRCUMSTANCES OF ACCIDENT	
Refer to police report T/20230715/2039	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes The video footage is from third party car.
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer	UNKNOWN

Vehicle Model

Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	Private car
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)	

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised 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 Police for investigation.
- 6. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknow ledge, 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 flaw firms), which may be sited outside of Singapore, for one or more of the above Purposes,

Policyholder's Signature Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

	ircumstances of the Accident
Lter	to police report T/20230718/2039
I w rear While carpai	ish to state that I didn't realise that my rehicle left side accidentally hit onto a parked car I was reversing my rehicle at the open of East Coast Parkway (near to ATE).

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature r Date &

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

Witnessed by Reporting Centre Personnel











1 of 3

Police Station Of Origin: Jurong East N.P.C 92 Boon Lay Way SINGAPORE 609962 Tel No: 1800-8999999 Report No. T/20230715/2039

REPORT OF	A TRAFFIC ACCIDENT
	Report Made:

Vide Report No.: Station Diary No.: 10

15/07/2023 10:41 Informant's Particulars 27 TUAS AVENUE 3 #01-01 SINGAPORE 639419 Name of Informant: THANGAMUTHU RAJESHKANNAN Contact No.: ID Type / ID No.; Mobile: 93874120 Home/Office: FIN NO / G8108141M Email: Nationality: INDIAN Type of Informant: Date of Birth: Age: Sex: Driver 12/05/1986 37 Male Language: Race: English Indian Driving Licence Information: Occupation: Date of Expiry: 12/02/2027 Class: 3 Construction Worker

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 29/06/2023 07:50	Type of Location Car Park
Location: EAST COAS Weather: Clear	T PARKWAY	Road Surface:		
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis Moving Vehicl	ion: le Against - Parked Ve	hicle		Anyone conveyed by ambulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
YP6775C	Lorry				No Damage	0

Details of V	Details of Vehicle Insurance			
Vehide No.	Insurance Company	Insurance No	Effective	Expiry Date
YP6775C	INDIA INTERNATIONAL INSURANCE PTE LTD	D23MCV0004009	16/06/2023	15/06/2024



Police Station Of Origin: Jurong East N.P.C 92 Boon Lay Way SINGAPORE 609962 Tel No: 1800-8999999



Report No. T/20230715/2039

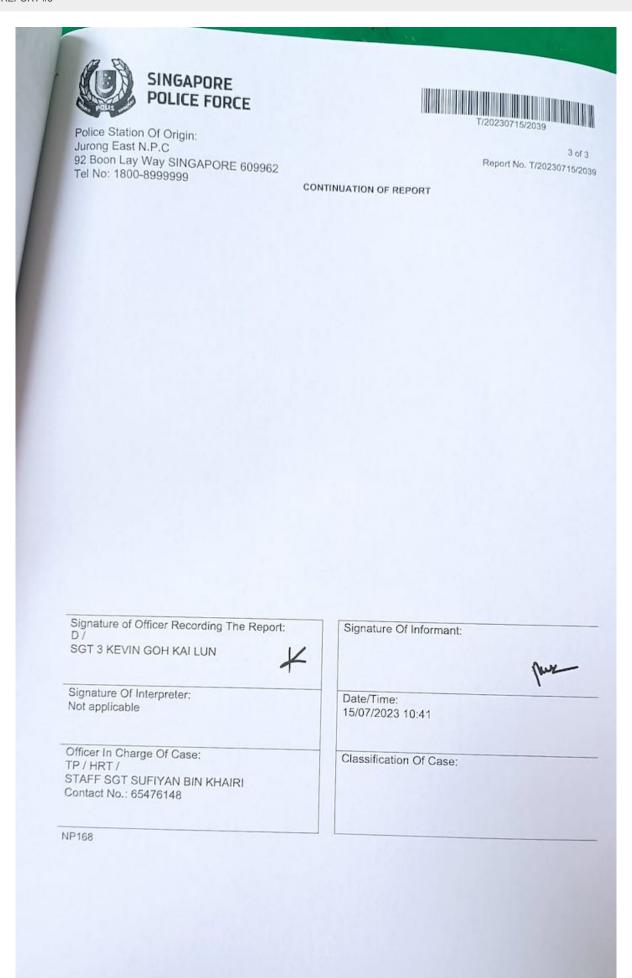
CONTINUATION OF REPORT

Details of Person						
Any Pedestrian In			Lite	f Dodooldoo	0	
No. of Pedestrians Injured: NIL Use of Pe			f Pedestrian	Cross	ing: NA	
Driver						The second second
Name	THANGAMUTHU RAJESHKANNAN		ID No.		G8108141M	
Related Vehicle	YP6775C (Lorry)		Conta	ct No.	93874120	
Hospital/Clinic	NIL		Class Drivin Licend Expire	g	Class: 3 Date of Expiry: 12/02/2027	
Date Treatment			Discharge	NIL		
	ted Medical Leave	NIL	Degr	ee of Injury	NIL	

Brief Details.

On 29/6/2023 at about 0500hrs, I will drop the worker off at ferry terminal. At about 0700hrs, I will usually take a rest for about 30minutes at the open carpark along East Coast Parkway near to AYE before I go back.

I wished to state that I do not know what happened and I did not hit onto any vehicle. I have made a check there were no scratches, dent and damage on my vehicle. I received a police report reference: TP/IP/18659/2023 informing me to make a police report.





INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711

COVER: Comprehensive

Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.iii.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

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

CERTIFICATE NO.: D23MCV0004009

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1. Index Mark and Registration Number of Vehicle : YP6775C

Chassis No : JAANPR85HH7100331

2. Name of Policyholder : INA ENGINEERING & CONSTRUCTION PTE LTD

3 Effective date of Insurance : 16 Jun 2023 4. Expiry date of Insurance : 15 Jun 2024

5. Persons or Classes of Persons entitled to drive*

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

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.

- 6. Limitations as to use*
 - a) Use in connection with the Policyholder's business.
 - b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - c) Use for social, domestic and pleasure purposes.

The Policy does not cover

- a) Use for hire or reward.
- b) Use for racing, pace-making, reliability trial or speed-testing.
- c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

*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.

Excess Section I : SGD750.00 Windscreen Excess : SGD100.00

Hire Purchase Company : DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD

FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$\$2500/- ON SECTION I WILL BE APPLICABLE.

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 : A000126/JBP INSURANCE AGENCY PTE LTD

Date of Issue : 26/05/2023 15:55:36

M.Z. 300C - GOODS CARRYING(ORGANIZATION)

For India International Insurance Pte Ltd



keefeng2/26/05/2023 Page 1 of 1 26/05/2023 15:56:35