SS2X24BN0002 / SME MOTOR PTE LTD ENTRY DATE & TIME: 23/11/2024 11:03 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (23/11/2024 11:03 (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 First Submission 23/11/2024 11:03 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 08/11/2024 22:25 (SGT) Exact Location of Accident Selegie Rd, Singapore Additional Location Information SUNGEI ROAD Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Toyota

Vehicle Registration Number SKA90D

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TATSUYA (S) PTE LTD Company Reg No 199806083E Email Address DARYLCHIA0126@GMAIL.COM Mobile Phone No (Phone) +65-97821302 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model

Vios Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1496 Vehicle Fuel First Regisration Date Chassis no

## INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7230031917-01

DRIVER



Effective Date/Time of Ownership

Name of Driver CHIA GUO SHIONG DARYL S9641862J Date Of Birth 06/11/1996 Occupation Indoor Driving Pass Date 20/02/2019 Driving License Pass Class ЗА Driving License Validity Valid Driving experience 5 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-91505757 Alt. Phone Number Email Address DARYLCHIA0126@GMAIL.COM Address 12 KITCHENER LINK #01-26 Address complement Postcode 207224 Is the driver the policyholder? If No, Relationship of the Driver with the Insured **Employee** 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 Collision - Change/cross lane Weather Conditions Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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 SHIRLEY NG Gender Female PASSENGER 2 CHIA XIN ER JOY Gender Female PASSENGER 3 Name SUPARTI BINTI AMAD KADI Gender Female 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

I WAS TRAVELLING ALONG SELEGIE ROAD ON THE SECOND LEFT LANE OF 5 LANES. AS I WAS TRAVELLING ACROSS THE JUNCTION OF SUNGEI ROAD. I FOLLOWED THE ROAD MARKERS. SUDDENLY, ONE M/CAR SLW9602R ON THE LEFT MOST LANE SUDDENLY SWERVED INTO MY LANE, ENCROACHED INTO MY PATH AND THUS COLLIDED ONTO THE LEFT FRONT PORTION OF MY VEHICLE. I SUBMITTED THIS REPORT LATE AS I DONT HAVE COMPANY STAMP AND INSURANCE CERTIFICATE WITH ME AS MY COMPANY IN CHARGE WAS OVERSEAS.

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 Vehicle Manufacturer Vehicle Model Vehicle Variant	SLW9602R - -
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-97426418
Address	_
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	=

#### SKETCH PLAN

### IMPORTANT NOTICE

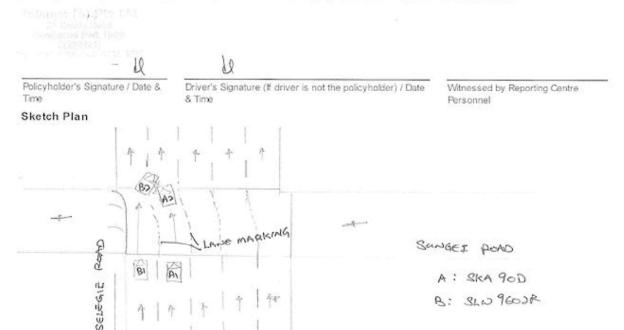
- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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. 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, 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.

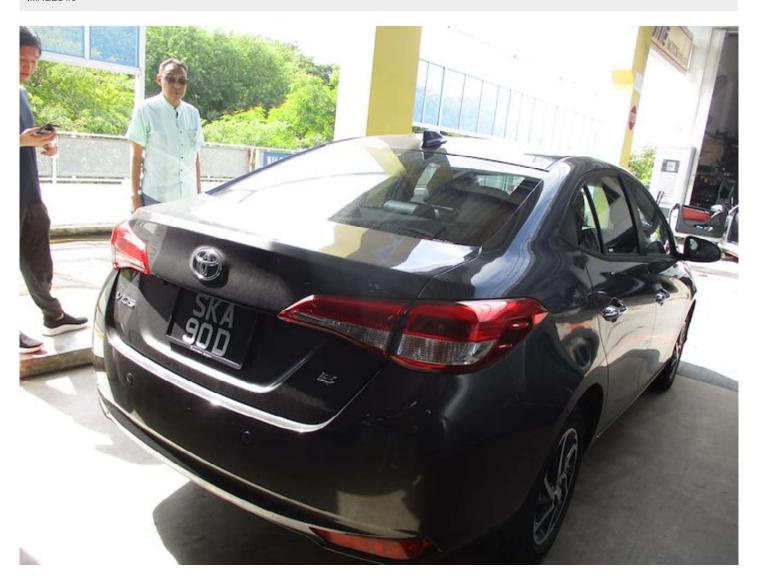


Describe Circumstances of the Accident

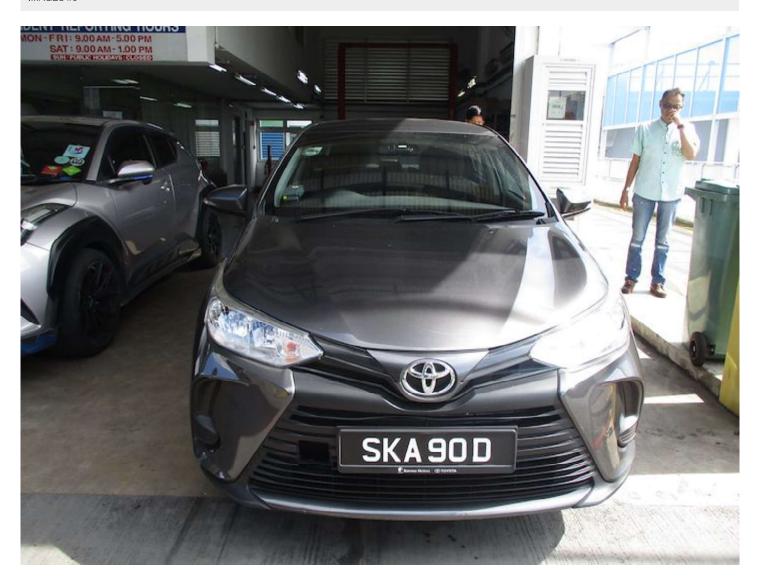
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SUNGET POAD,	I FOURTH THE ROAD MARKERS	supposity one michae
8109603 B CN 7	THE LEFT MOST LANG SUDDENLY SWEEVED	, INTO MY LAND , EN CRONENCO
INTO MY PATH ANT	Thus coulded onto the LEFT FRONT	POETION OF MY VEHICLE.
I SUBMITTED	THIS REPORT LATE AS I DON'T HAVE	& Company Stamp
AND INSURANCE	CERTIFICATE WHY ME AS MY CO	MARRY IN CHARGE WAS
OVER SEA .	9	3
		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
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	20 (2011)	
	139 11	
Declaration		
We declare the foregoing particula	rs are true in every respect.	
Teasing (S) (Stell)		
	10	
The state of the s	U	
Policyholder's Signature / Date &	Driver's Signature (if driver is not the policyholder) / Date	Witnessed by Reporting Centre
Time	& Time	Personnel





















# CERTIFICATE OF INSURANCE

#### TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TATSUYA (S) PTE. LTD. Vehicle No. : SKA0090D Period of Insurance : 29 Mar 2024 To 28 Mar 2025 Engine/Motor No. : 2NR5599772 Policy No. : 7230031917-01

Engine/Motor No. Endorsement No.

Chassis No. : MR2B23F3801253222 Issued Date : 20 Feb 2024 0:48

ABOUT THE COVER

Make/Model : TOYOTA VIOS 1.5

Engine Capacity/Tonnage : 1,496.00 CC Sum Insured : Market Value First Year of Registration : 2023 Off Peak Car : No Driver Restriction : NA Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive":

Pay posted with its criting to the Pakeyhelder's order or with their perception.

The Postey will industry the Pale photoer or any subground diversity of the streeness the specified upon condition.

You have to pay an additional sum of \$55,000 as "Young and or inexperienced Diver Excess" ("YOM") if You are or Your Justicised Diver interned or unramed its under the age of 21 and or has less

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use\*

Use dray for social discretic and phasone purposes and for line Possyholder's business.
This Policy does not execute for fine or research drawng busins, designed pace making results by the or speed testing, the considered goods other than samples in connection with using that does not business of used for any purpose in connection with story trade.

Loss of Use 1500cc - 1600cc

\* Limitatoria rendeced inoperative by piecose is of the Motor Vehicles (Timo Party Ross and Compensation) Act 1990, Section to let the Head Transport Act, 1997 (Malaysia) and Hoad Humsport (Amendment) Act 2019, are not to be included under those Peadings.

#### EXCESS

Section 1 File - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

Section 2 Property Damage - 50

Windstreen: \$100

Named Driver and Excess (where applicable)

# APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Toyota Booychie Centre (For accident input & socident importing). Add. 2 Pandan Crescert Singapore. 128467. Tel. 6631. 2 Toyota Booychie Centre (For accident input & accident importing). Add. 17 Util Road 4 Singapore. 106611. Tel. 6631. 1688.

For effer Approved Renorming CentroviAlG Authorised Replances, clease contact our 24 hour accident emergency before at 465 6138 6200. Advantagely, you may refer to ArG website warving significant

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Toyota Financial Services Singapore Pte Ltd

Dire hereogic entity that the policy to which this Certificate of Insurance relives is issued in accordance with the provisions of the Materi Vehicles (Third Party Basis and Compensation) Act 1960, Part IV of the Road Transport Art, 1987 (Malaysia), Hoad Transport (American Act 2019 and Motor Vehicles (Third Party Biose) Roads, 1969 (Malaysia)

0504667249

INCHCAPE AUTO TOYOTA - BSTU020

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

33 LENG KEE ROAD SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

MISCHOGERAPP

ton Way #09-16 AIG Building 5079120 | T:+65 6419 3000 | www.nig.sg

AIG Asia Pocific Insurance Pte. Ltd.