# **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.

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   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 13/12/2024 14:29 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 12/12/2024 15:15 (SGT) Exact Location of Accident 7 Kaki Bukit Ave 3, Singapore Additional Location Information **CARPARK** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Nissan

Nv200

Vehicle Registration Number GBH8349B

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ASP AUTOMOTIVE PTE LTD Company Reg No 202001504C Email Address BONG@ASPAUTO.COM.SG Mobile Phone No (Phone) +65-90612201 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model

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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 1461

Vehicle Fuel First Regisration Date

Chassis no

Effective Date/Time of Ownership

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5147998735

DRIVER

Name of Driver **CHEW CHOON TEE** NRIC No S0076360H Date Of Birth 05/03/1954 Occupation Outdoor Driving Pass Date 30/04/2009 Driving License Pass Class Driving License Validity Valid Driving experience 15 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-84855584 Alt. Phone Number Email Address WILLIAMCHEWCHOONTEE@GMAIL.COM Address 551 HOUGANG ST 51 #04-160 Address complement Postcode 530551 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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 Collided into Parked Vehicle Weather Conditions Clear 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 **DETAILS OF POLICE ACTION** Was the accident reported to the police? Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT AS ABOVE DATE & TIME, I WAS DRIVING MY VEHICLE(BH8349B) ALONG THE CARPARK OF 7 KAKI BUKIT AVE 3. VEHICLE B (GBG1420D) WAS IN FRONT OF MY VEHICLE TRYING TO REVERSE INTO A PARKING LOT, HENCE, I SLOWED DOWN AND STOPPED MY VEHICLE WHILE VEHICLE B WAS REVERSING INTO THE LOT VEHICLE B RIGHT PORTION HIT ONTO THE FRONT RIGHT PORTION OF MY VEHICLE. VIDEO ATTACHED ATTACHMENT(S) Are accident photos available for attachment? Yes

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Yes

Was there any video captured by Car Camera?

Vehicle Registration Number	GBG1420D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	BAJARUDEEN ABDUL JALIL
Contact Number	(Phone) +65-85224522
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

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- 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 Traffic Police Department for investigation.

- This report will be forwarded by the insurers to 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.
- 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' lawyers/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' lawyers/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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyfolder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan

Vehicle A: GBH 8349B

Vehicle B: GBG 1420D

Stationery

Stationery

T Kaki Bukit Avenue 3

Perverse ulinhand checking

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Describe Circumstance of the	Accident	
\(\lambda_{\alpha}\) \\ \lambda_{\alpha}\) \\ \lambda_{\alpha}\) \\ \\ \lambda_{\alpha}\) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	t 7	1 1 (( 010 310 0) )
the same	time, I was driving my v	L. B (CBC) 410
In front of m	y vehicle trying to reverse	into a parking lot
hence = slowed	down and stopped my vehicle	e. While vehicle b
vis reversing	into the lot, vehicle B right	portion ni- on-o
the wont right	portion of my vehicle.	
Video footage	atteched	
VIOLO SOLIGE	T. T. CHEO	
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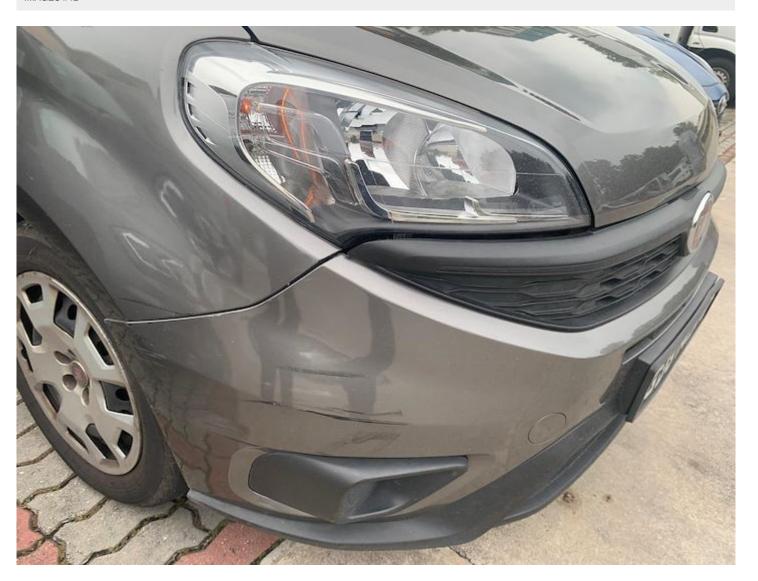














## Certificate of Insurance

Cover: Comprehensive

VSKYBAM20Z0172388

: ASP AUTOMOTIVE PTE LTD

: GBH8349B

: 05 Aug 2024

: 04 Aug 2025

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960.

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

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

Certificate Number: 5147998735

1. Index mark and Registration Number of Vehicle Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance 4. Expiry Date of Insurance

5. 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. 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 for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's or Hirer's business.

This Policy does not cover

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

(b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1) EXCESS (SECTION 2) : S\$2,000 : \$\$1,500

WINDSCREEN EXCESS

: SS100

INSURE WITH COE

HIRE PURCHASE COMPANY

: TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: ALLINK INSURANCE AGENCY PTE. LTD (00000615434)

Date of Issue

: 01 Aug 2024 15:56 hrs

For INCOME INSURANCE LIMITED

Chief Executive



### VEHICLE RENTAL AGREEMENT NO.: ASPRA2024035

## Schedule

This is a Rental Agreement made between us, ASP Automotive PTE LTD (hereinafter referred to as "the Company" which shall include its successors-in-title and assigns), identified as the Lessor and having our registered address 68 Circular Road #02-01 Singapore 049422 AND YOU, the person(s) identified as the Hirer below include (which shall include your successorsin-title and assigns):-

NAME OF HIRER(S) (IN FULL)

NRIC NO. / UEN

**ADDRESS** 

TELEPHONE PERSON IN CHARGE

NAME OF DRIVER(S) (IN FULL) NRIC NO. DATE OF BIRTH DRIVING LICENCE NO.

ISSUE/EXPIRY DATE COUNTRY OF ISSUE

Kian Hup Engineering Pte Ltd

201325392M 81 Ubi Ave4 #11-18

UB One Singapore 408830

6538 1943 Reza - 8722 4503

1. DESCRIPTION OF VEHICLE ("THE VEHICLE")

REGISTRATION NO

MAKE/MODEL

TYPE: PASSENGER/COMMERCIAL\* (\*delete where inapplicable)

Date, Time and Mileage for Collection Date, Time and Mileage for Return

Diesel Level Out

GBH8349B

Nissan NV200 1.5L Manual

15/08/2024 14/08/2025

(Vehicle must be returned with same level of Diesel)

2. RENTAL PERIOD

(12) Twelve months Contract

From 15/08/2024 ("Commencement Date") to 14/08/2025 ("End Date")

Amount excluding Goods Service Tax (GST) is \$\frac{\$\\$51,500.00}{\} per \frac{day/\text{week}}{\}month/\text{year\*} (collectively, "Lease Charges"), payable in advance.

Rates are subject to 9% in year 2024 according to the governing rule in Singapore for Goods and Service Tax.

Signed by the Hirer

Designation: Direct

Signed for and on behalf of

ASP Automotive Pte Ltd

Name: Bong Toh

Designation: Business Development Manager