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Preferred Wksp / INC Assign Wksp / QW: (			Telt	Fax:		
TF Particulars: Veh No: G	BC 9565 M	, INC (	)/Non-INC(	)		
Owner / Driver: (	*****		Tel		1	
Policy No: ( ) Perio	ed. (	)	Cover Type: (		)	
Confirmed by : (		Date:	Tinici		).	
Insured/Driver Liability: ( %) [No	ote-Est Status (V	WO): N: 0-2	0%; P:21-79% 1	F: SO-150%	]	
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General Remarks;-				a serious and	51.1.	
( ) Walk-In Customer: Customer's inform	nation strictly Co	nfidential & S	triatly NO refer of re	palrer.		
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Drive-In ( )/Towed-In ( ); Invoice.	IES( )/:	101 ) ;				
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## 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 Authorised 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 ability.
- 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. 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

ACC	IDEN	IT STA	T = 1/	HENT
ACC	IDEN	11 314		

23/01/2018 09:27 Date Of Report 23/01/2018 07:00 Date Of Accident

BLK 34A BEDOK SOUTH AVE 2 CARPARK Exact Location Of Accident

SINGAPORE Country/State of Loss

## **DETAILS OF OWN VEHICLE**

GBC6967G Vehicle Registration Number

Insured/Policyholder

SHANGHAI TONG LEE HARDWARE PTE LTD Name Of Registered Owner

Co Reg No

NOEMAIL Email Address

Mobile Phone No

OFFICE-62987211 Alternative Phone No

**Vehicle Particulars** 

NISSAN Manufacturer CABSTAR Model

Exact Purpose for which vehicle was being used at PARKED

time of accident

NO

Are you claiming under your own insurance policy

for repair to your vehicle?

THIRD PARTY

If No. Please state action to be taken

COMMERCIAL VEHICLE Vehicle Category

**Insurance Company** 

AIG ASIA PACIFIC INSURANCE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

NO Fleet Policy

2100345891-04000 Policy Number

Cover Note Number

Driver

ISMAIL BIN ALI Name of Driver S1189379A NRIC No 05/11/1956 Date Of Birth INDOOR Occupation 01/10/1977 Date Of Driving Pass

40 YEARS AND 3 MONTHS **Driving Experience** 

MALE Gender

(LOCAL) +65-93703090 Mobile Number

Fax Number

Contact Number NOEMAIL EMail Address

Address

BLK 34 BEDOK SOUTH AVE 2 #02-377

Postcode

460034

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

Was any body injured in the Accident?

NO

NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

YES NO

Number of Passengers (Including Driver)

0

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

#### Circumstances of Accident

ON 22/01/2018 AROUND 1900HRS, I PARKED MY VEH AT THE BLK 34A BEDOK SOUTH AVE 2 CAR PARK, BEFORE I LEAVE MY VEH, EVERYTHING WAS INTACT. ON THE NEXT MORNING, I WENT BACK TO MY VEH AND REALIZED VEH B (BEARING NO GBC9565M) HEAD ON HIT ONTO MY VEH FRONT PORTION.

### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBC9565M

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE

Vehicle Category Name of Driver

MR LEE

NRIC/Passport Number

Contact Number

90472808

Address Postcode

Insurance Company Name

Nature Of Damage

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 Form must 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 lodgment 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)
  - (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
- 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

SHANGHAI TONG LEE HARDWARE PIE LYD.

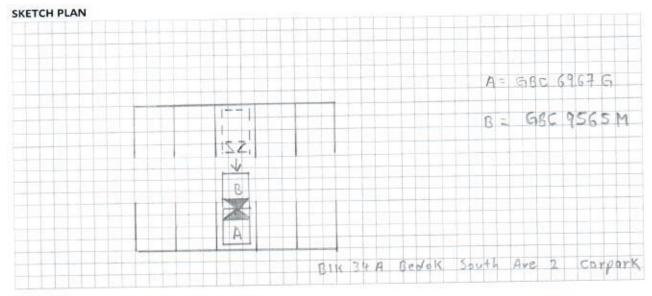
Policyholder's Signature

Date & Time:

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:



#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please	Refer	to	Statement	
		<i></i>		

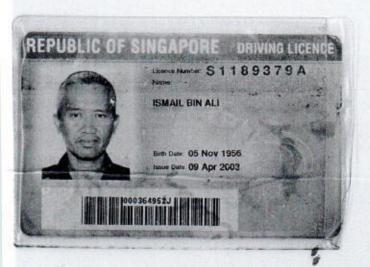
## DECLARATION

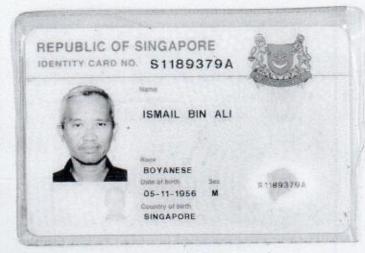
I/We declare the foregoing particulars are true in every respect.

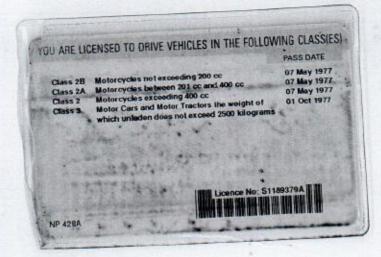
SHANGHAI TONG LEE MARDIVARE PTE LTD.

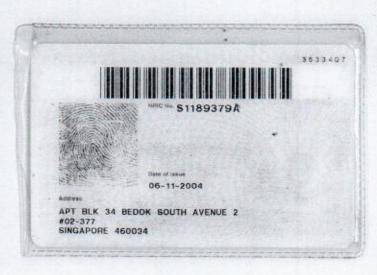
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

Name: NRIC/FIN No.:











HOTLINE TEL: (65) 6419 3000 FAX: (65) 6415-3723

# 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)

M.Z.300

NISSAN COMMERCIAL AUTO PROTECTOR

OWN DAMAGE EXCESS WINDSCREEN EXCESS

S\$800.00(1) 5\$100.00

CERTIFICATE NO. 2100345891 04000

(for policies with effect from 1st November 2002)

Market Value

SUM INSURED INSURING WITH COE/PARF

Yes

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

Shanghai Tong Lee Hardware Pto Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

10 Jul 2018

11 Jul 2017

GBC6967G

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \*

Any person provided he is in the histored's employ and is driving on their order or with their permission. A Young and/or Inexperienced Driver Excess ("YIDR") of \$53,000.00; in additional to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years! driving experience.

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 or any enactment or regulation in that behalf from driving the Motor Vehicle

6.) LIMITATION AS TO USE \*

Use in connection with the Insured's business.
 Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.

Use for social, demestic or pleasure purposes
 The Policy does not cover—a) Lise for hire or reward or for racing, pace-making, reliability trial or speed-testing,
b) Use whilst drawing a traiter except the towing of any one disabled mechanically propelled vehicle.

APPROVED REPORTING CENTRES / NISSAN AUTHORISED REPAIRERS
1. Tail Chong Mrt Sales - 913 Bt Timah Rd (Tel. 64694091/2/3) 2. Tan Chong Mrt Sales - 17 Lor 8 Toa Payoh (Tel. 63570753/4)
3. TC AnioClinic - No. 1 Sixth Lok Yang Rd (Tel. 62622212) 4. Autolution Industrial - 19 Ubi Rd 4 (Tel. 64909666)
5. TC AutoClinic - 25 Leng Kee Rd (Tel. 67038511/2/3)

MIN DRIVER AGE=

LOSS OF USE Loss of Use 7 Days (Un to 1.7 tons) Refer to policy wordings for details

NAMED DRIVER NA

HIRE PURCHASE COMPANY MayBank / EMPLOYER'S LOAN

Limitations randered 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).

Issued At Singapore

20 Jun 2017

AIG Asia Pacific Insurance Pte. Ltd.

500610-339 TAN CHONG CREDIT PTE LTD-LHO 911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

SSCGUK

Req. No. 2010094944A

00/13

Service