

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 withholding 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.
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 Report	17/01/2018 17:32
Date Of Accident	17/01/2018 11:45
Exact Location Of Accident	ENTERPRISE ONE LEVEL 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF8492E
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Insured/Policyholder

Name Of Registered Owner	ADVANCE CHEMICAL TREATMENT PTE. LTD.
Co Reg No	201017340K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-67429972

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR-3.0 5M/T ABS 2DR 2WD EURO 5 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100505812
Cover Note Number	

Driver

Name of Driver	LOH GUAN HIN
NRIC No	S1147632E
Date Of Birth	23/03/1955
Occupation	OUTDOOR
Date Of Driving Pass	07/11/1977
Driving Experience	40 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98428099
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 633 PASIR RIS DRIE 3 # 06-408
Postcode	SINGAPORE 510633
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

REFER TO ATTACH STATEMENT RECORDED BY JIA MIN - PROGRESSIVE AUTOMOTIVE PTE LTD TEL 67415336

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJQ3328C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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.
- (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.



Policyholder's Signature
Date & Time:

[Signature]

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

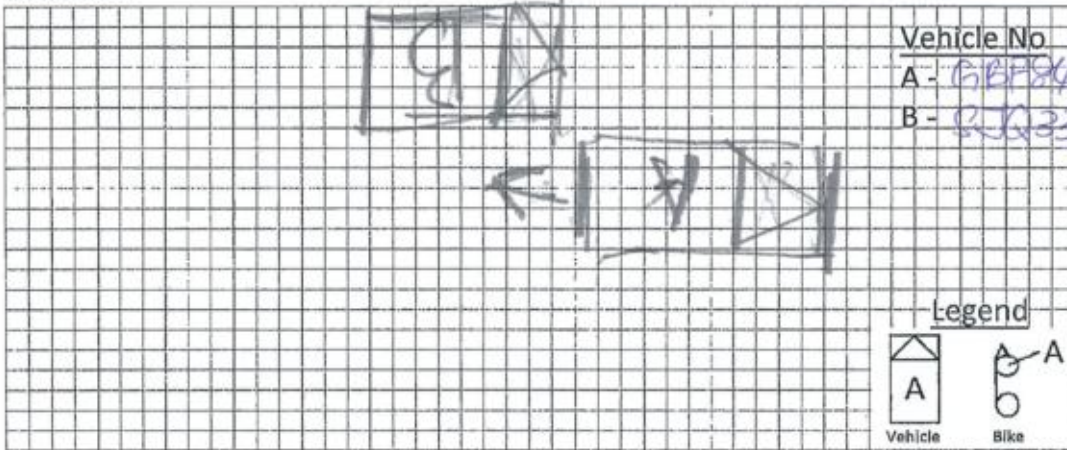
[Signature]

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

[Signature]

Jia Min

SKETCH PLAN



Vehicle No
A - 6BF8492E
B - 8JN328C

Legend
A
Bike

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/1/18 around 1145am, I was driving on Enterprise One Level 4. When I make reversing parking suddenly I hit on car B.

DECLARATION

We declare the foregoing particulars are true in every respect.
Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

Policyholder's Signature

Date & Time:

GIARMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

DRIVER NRIC & LICENCE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of Loh Guan Hin

Licence Number: S1147632E
Name: LOH GUAN HIN

Birth Date: 23 Mar 1955
Issue Date: 10 Sep 2003

Barcode: 000818453F

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1147632E

Portrait of Loh Guan Hin

Name: LOH GUAN HIN
Race: 羅源興
CHINESE
Date of Birth: 23-03-1955
Sex: M
Country of Birth: SINGAPORE

Barcode: 000818453F

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: 07 Nov 1977

Licence No: S1147632E

Barcode: 000818453F

428A

Barcode: 000818453F

Portrait of Loh Guan Hin

Name: S1147632E

Blood Group: O+
Date of Issue: 27-02-2002

Address: APT BLK 633 PASIR RIS DRIVE 3
#06-408
SINGAPORE 510633

GBF GBF8492G

3022A 01-85

8492


 HOTLINE TEL: (65) 8419 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, 1980
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M2.300

NISSAN COMMERCIAL AUTO PROTECTOR

OWN DAMAGE EXCESS S\$800.00 (T)

WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2002)

CERTIFICATE NO. 2100505812-00000

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

GBF8492E

Advance Chemical Treatment Pte Ltd

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

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

29 Mar 2017

4) DATE OF EXPIRY OF INSURANCE

28 Mar 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person provided he is in the Insured's employ and is driving on their order or with their permission.
 A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition 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 of any enactment or regulation in that behalf from driving the Motor Vehicle.

6) LIMITATION AS TO USE *

- 1) Use in connection with the Insured's business.
 - 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.
 - 3) Use for social, domestic or pleasure purposes.
- The Policy does not cover: a) Use for hire or reward or 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.

APPROVED REPORTING CENTRES / NISSAN AUTHORISED REPAIRERS

1. Tan Chong Mtr Sales - 913 Bt Timah Rd (Tel: 64694091/2/3) 2. Tan Chong Mtr Sales - 17 Lor 8 Toa Payoh (Tel: 63570753/4)
3. TC AutoClinic - No 1 Sixth Lok Yang Rd (Tel: 62622212) 4. Autolution Industrial - 19 Ubi Rd 4 (Tel: 64909666)
5. TC AutoClinic - 25 Leng Kae Rd (Tel: 67938511/2/3)

MIN DRIVER AGE=

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

NAMED DRIVER NA

HIRE PURCHASE COMPANY / EMPLOYER'S LOAN HL Bank

* 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.

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 7 Apr 2017

AIG Asia Pacific Insurance Pte. Ltd.

 590610-309
 TAN CHONG CREDIT PTE LTD-CHH
 911 BUKIT TIMAH ROAD TAN CHONG MOTOR
 CENTRE SINGAPORE 599622 ANSP-MOTOR

AUTHORISED REPRESENTATIVE

ORIGINAL

SCOPY

Accident Photo



Accident Photo



Accident Photo



Accident Photo

