

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	08/02/2018 17:40
Date Of Accident	30/01/2018 12:00
Exact Location Of Accident	NTU COMPOUND
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD3002E
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Insured/Policyholder

Name Of Registered Owner	NEWSTEAD TECHNOLOGIES PTE LTD
Co Reg No	200100468D
Email Address	BENGCHONG@NEWSTEAD.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63910076

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	2100384270-03
Cover Note Number	

Driver

Name of Driver	PUTRA AL-MATIN BIN SHAHRIN AZHAR
NRIC No	S9639670H
Date Of Birth	01/11/1996
Occupation	INDOOR
Date Of Driving Pass	04/07/2016
Driving Experience	1 YEAR AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87814941
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 125 PASIR RIS ST 11 #02-409
Postcode	510125
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	
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

VEHICLE B IN FRONT WAS SLOWING DOWN. I MISJUDGE AND CANNOT BRAKE IN TIME AND HIT ONTO MY VEHICLE B REAR PORTION.

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	SJG4709H
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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

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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:

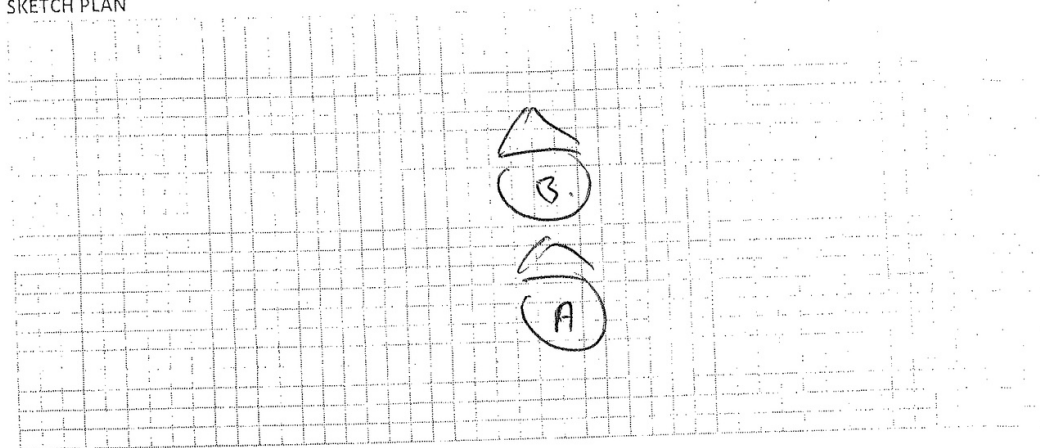
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

RECEIVED
8
BY: 1610hms

Sketch Plan #2 Pg. 1

SKETCH PLAN

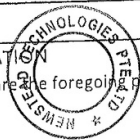


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle B in front was slowing down, I misjudge and cannot brake in time and hit onto my vehicle rear portion

DECLARATION

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



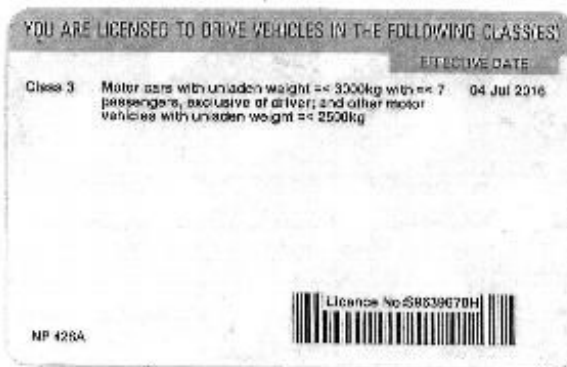
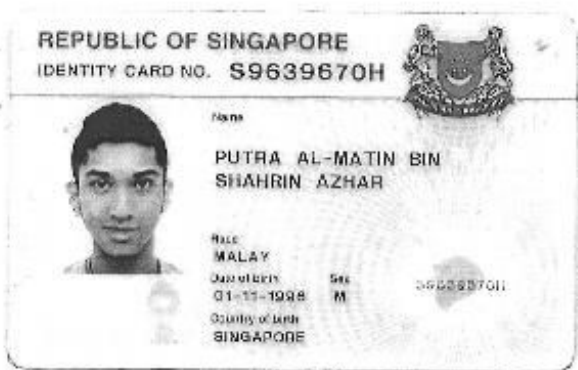
Policyholder's Signature
Date & Time:

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

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

01-01-2018 Sketch Plan Form V0

Driving License



INSURANCE



CERTIFICATE OF INSURANCE

COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Newstead Technologies Pte Ltd
Period of Insurance : 28 Aug 2017 To 27 Aug 2018
Engine No. : 1KD2428101
Chassis No. : JTFHT02P000146037

Vehicle No. : GBD3002E
Policy No. : 2100384270-03
Endorsement No. : 000000000126700
Issued Date : 24 Jul 2017

ABOUT THE COVER

Make/Model : TOYOTA HIACE 1 ton (Van)
Engine Capacity/Tonnage : 1 Tonnage
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2014
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*

Any person who is driving on the Policyholder's vehicle will be entitled to drive.
The Policy will indemnify the Policyholder or any authorized driver only if the driver meets the stated age condition.

You have to pay an additional sum of \$3,000 as Young and Inexperienced Driver Excess (YIDR) if You are or Your Authorized Driver insured is (are) newly issued the age of 20 and/or has less than 2 years driving experience.

Age Condition : All Age Condition

Limitation as to use*

1) Use in connection with the Policyholder's business.
2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
3) Use for social, domestic or pleasure purposes. This Policy does not cover: use for hire or reward, driving test, racing, speedway, roadblock trial or speed testing, and (c) use while towing a trailer except the towing of a road trailer using a mechanically propelled vehicle for use for any purpose in connection with Motor Traffic.

* Conditions stipulated are subject to Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185) and Section 95 of the Road Transport Act, 1997 (Cap. 384), and not to the conditions of the Third Insurance.

EXCESS

Section 1
Fire - \$0, Own Damage - \$800, Theft - \$0, Flood Driver - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

Any vehicle repair to the Vehicle must be carried out by one of our Approved Repairers (AR) within the first 3 years of the first registration of the vehicle in Singapore. You have the option of having the accident repairs carried out at the AR or at a workshop.
For other approvals, Reporting Centres/ARs and/or other Repairs, please contact our Claims department at +65 6338 0200. Alternatively, You may refer to AIG Motor Insurance website or AIG SG Mobile App, simply search and download AIG SG from Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: MERCEDES-BENZ FINANCIAL SERVICES (S) LTD

Make (we) verify that the policy to which this Certificate of Insurance (which is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 185) Part IV of the Road Transport Act, 1997 (Singapore) and Motor Vehicles (Third Party Risks) Rules, 1998 (Malaysia).

000235060

AVISION BUSINESS SOLUTIONS P.L.
218 ORCHARD ROAD, LEVEL 6 ORCHARD GATEWAY @ EMPRAI D
SINGAPORE 238551 AYSP-NON LIFE
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. Anik

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

557555



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

