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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 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 15/02/2018 10:50  
Date Of Accident 14/02/2018 23:00  
Exact Location Of Accident LOR 6 TOA PAYOH EXIT SLIP RD INTO BRADDELL RD  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number GBG1950R  
**Insured/Policyholder**  
Name Of Registered Owner SENG FOODSTALL  
Co Reg No - 53271452X  
Email Address NOEMAIL  
Mobile Phone No  
Alternative Phone No OFFICE-91121871  
**Vehicle Particulars**  
Manufacturer NISSAN  
Model NV200  
Exact Purpose for which vehicle was being used at time of accident COMMERCIAL USE  
Are you claiming under your own insurance policy for repair to your vehicle? NO  
If No, Please state action to be taken THIRD PARTY  
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 1700021715  
Cover Note Number  
**Driver**  
Name of Driver SENG LYE HOCK  
NRIC No S0064151J  
Date Of Birth 27/10/1954  
Occupation OUTDOOR  
Date Of Driving Pass 07/10/1976  
Driving Experience 41 YEARS AND 4 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-91121871  
Fax Number  
Contact Number  
Email Address NOEMAIL

Address BLK 292 BISHAN ST 22  
#18-71

Postcode 570292

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

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? YES

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) 2

Passenger 1 NAME: : NG GIAN CHOO  
GENDER: : FEMALE

#### 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

I STOP MY VEH AT THE GIVEWAY LINE AT LOR 6 TOA PAYOH EXIT SLIP RD INTO BRADDELL RD TO GIVEWAY FOR ONCOMING VEH. SUDDENLY VEH B CAME FROM BEHIND AND HIT ONTO MY REAR PORTION OF MY VEH.

#### Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLE3971J

Vehicle Make/Model/Colour MITSUBISHI

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TIMOTHY LIEW MUN WAE

NRIC/Passport Number S9448551G

Contact Number 83884154

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	SENG LYE HOCK
Approximate Age	
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	GBG1950R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	NG GIAN CHOO
Approximate Age	
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	GBG1950R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## SKETCH PLAN

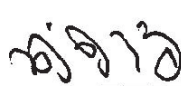
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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) 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.

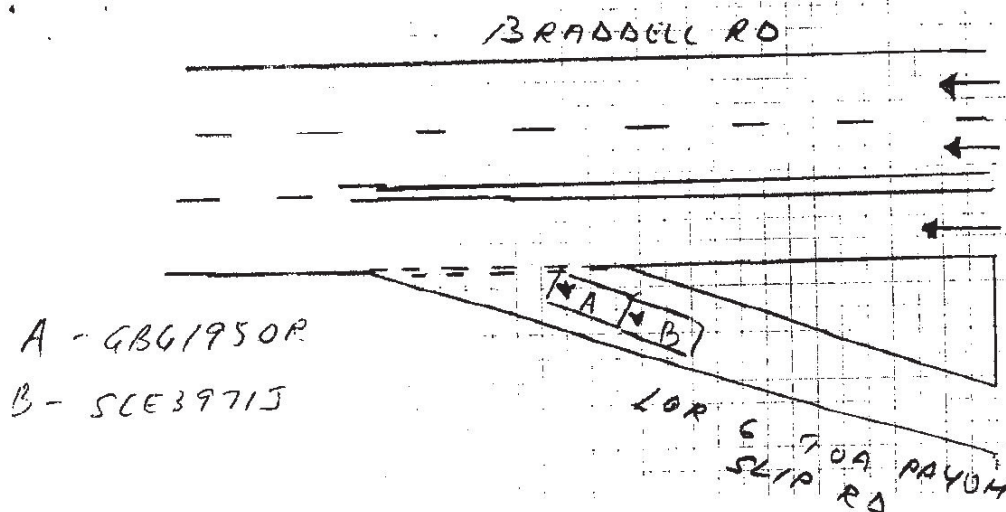
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

 15/02/18  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the statement.

### 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: 15/02/18  
NRIC/FIN No.:

83884154

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0064151J



NAME  
SENG LYE HOCK

成 嶼 福

RACE

CHINESE

Date of Birth

27-10-1954

Sex

M

Country of Birth

SINGAPORE

084151J

REPUBLIC OF SINGAPORE DRIVING LICENCE



0 1 3 2 4 7 3



NRIC No S0064151J

Blood Group

A+

Date of issue

19-10-1991

Address

APT BLK 292 BISHAN STREET 22 #18-71  
SINGAPORE 570292  
NRIC No: S0064151J Date: 13-12-1987 No: 2407521

REPUBLIC OF SINGAPORE DRIVING LICENCE (CLASSIFIED)

CLASS	DESCRIPTION	EXPIRY DATE
Class 2A	Motor Vehicle (not exceeding 2000 cc)	26 Jul 1977
Class 2B	Motor Vehicle (not exceeding 2000 cc) and 2000 cc	26 Jul 1977
Class 2	Motor Vehicle (not exceeding 2000 cc)	26 Jul 1977
Class 3	Motor Vehicle and Motor Vehicle (not exceeding 2000 cc)	07 Oct 1978
Class 4	Motor Vehicle (not exceeding 2000 cc) and Motor Vehicle (not exceeding 2000 cc)	20 Nov 1978

MP 428A



**Name of Policyholder** : Seng Foodstall  
**Period of Insurance** : 28 Jun 2017 To 27 Jun 2018  
**Engine No.** : HR16085224D  
**Chassis No.** : VM20104243

**Vehicle No.** : GBG1950R  
**Policy No.** : 1700021715  
**Endorsement No.** :  
**Issued Date** : 11 Jul 2017

## ABOUT THE COVER

**Make/Model** : NISSAN NV 200 PETROL  
**Engine Capacity/Tonnage** : 0.8 Tonnage  
**Driver Restriction** : NA

**Sum Insured** : Market Value  
**Off Peak Car** : No

**First Year of Registration** : 2017  
**Insuring with COE/PARF** : Yes

### Person or Classes of Persons Entitled to Drive\*

\*Any person who is licensed to drive a motor vehicle of the same class as the vehicle insured and who is not under the age condition of the policy shall be entitled to drive the vehicle.

\*The policyholder or any person who is licensed to drive a motor vehicle of the same class as the vehicle insured and who is not under the age condition of the policy shall be entitled to drive the vehicle.

**Age Condition** : All Age Condition

### Limitation as to use\*

\*Use is limited to the use of the vehicle for the purpose of the policyholder's business.

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## EXCESS

**Section 1**  
 Excess for claims for damage to the vehicle insured

**Section 2**  
 Excess for claims for damage to third party property

**Windscreen** : NA

**Named Driver and Licence** : NA

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

\*Approved Reporting Centres/Authorised Repairers (ARCs) are listed on the website of the Insurance Corporation of Singapore (ICSS) at [www.icss.gov.sg](http://www.icss.gov.sg).

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## IMPORTANT NOTES

**Hire Purchase Company/Employer's Loan** : NA

\*The policyholder is advised to read the Conditions of Motor Vehicle Third Party Risks and Compensation Act (Cap. 189), Part IV of the Road Transport Act (Cap. 374) and the Motor Vehicle Third Party Risks and Compensation Rules 1959 (Malaysia).

061 8314148

TAN CHONG MOTOR CENTRE  
 911 BUKIT TUAH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 69622 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**  
 AUTHORISED REPRESENTATIVE