

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	10/03/2018 13:39
Date Of Accident	09/03/2018 19:40
Exact Location Of Accident	PIE TOWARDS CHANGI BEFORE SIMS AVENUE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YK8290Y
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Insured/Policyholder

Name Of Registered Owner	CHIANG KANG ENTERPRISES COMPANY PTE LTD
Co Reg No	198304039K
Email Address	JASONLOW2003@YAHOO.COM.SG
Mobile Phone No	
Alternative Phone No	Office-62981936

Vehicle Particulars

Manufacturer	DAIHATSU
Model	V116HU5-3.7 (M)
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	THIRD PARTY
Fleet Policy	NO
Policy Number	999995015/100737983-00000
Cover Note Number	20/06/2017 TO 19/06/2018

Driver

Name of Driver	GOSH TOPEN
NRIC No	F8481772N
Date Of Birth	02/02/1975
Occupation	OUTDOOR
Date Of Driving Pass	13/08/2010
Driving Experience	7 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94685412
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	193A SIMS AVE (S)
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	
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)	3
Passenger 1	Name: : mia awlad Gender: : Male
Passenger 2	Name: : shahin Gender: : Male

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 with attach.

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	SHB833H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHANG KOK HUAH
NRIC/Passport Number	S6803018H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Accident 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:

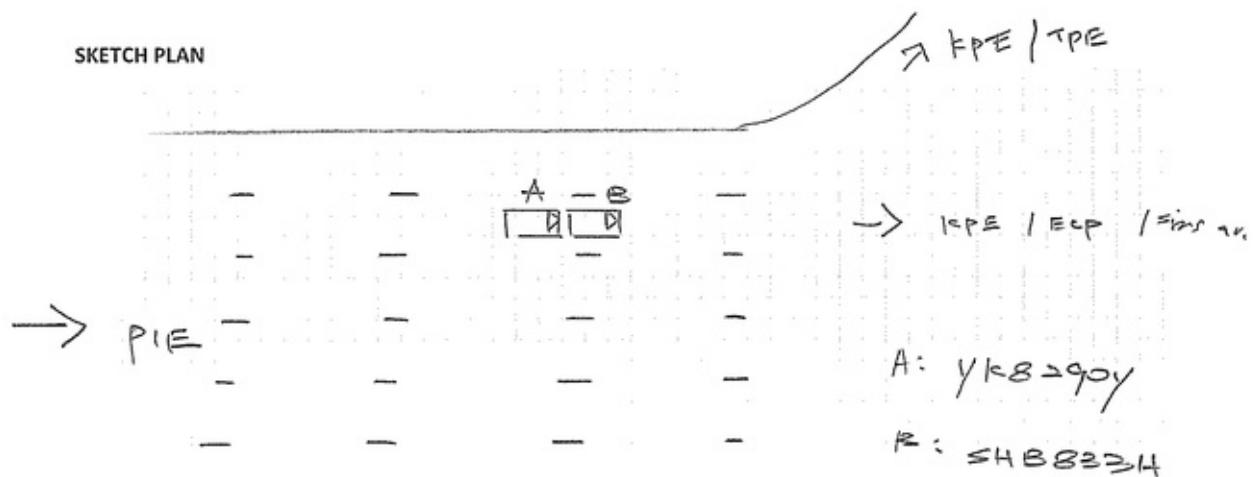
Open

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 9/3/2018 @ 14:40hrs, I was driving along
 pie towards kpe / ecp / sins ave on 5th lane.
 taxi SHB823H braked in front of me &
 I followed. As the road a bit slope &
 when I applied my brake, still can't react
 in time & rolled forward to hit the
 rear of taxi SHB823H.

DECLARATION

I, HEREBY DECLARE that:-

1. The reporting centre personnel has explained the above statement & sketch plan to me.
2. I fully understand and agree with the above statement.
3. The information given is true and correct to best of my/our knowledge and belief.

Open

Name, Signature & Company
Stamp (if applicable)

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.:

AIG ASIA PACIFIC INSURANCE PTE LTD

MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : Gosh Topen
VEHICLE NUMBER : YK 8290Y
DATE/TIME OF ACCIDENT : 9/3/2018 @ 1145hrs
PLACE OF ACCIDENT : pie towards changi before Sims
THIRD PARTY VEHICLE (IF ANY) : SH 13033H ave exit

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

from Jenter to Sims ave

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

NO

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

head to rear

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

no

Topen
Name:

I Affirmed The Above Information Is Given To My Best Knowledge.



HOTLINE TEL: (65) 6416-3000
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)

MZ301

THIRD PARTY COMMERCIAL MOTOR
CERTIFICATE NO. 999995015/100737983-00000

OWN DAMAGE EXCESS S\$1,200.00 (II)
WINDSCREEN EXCESS N/A
(for policies with effect from 1st November 2002)
SUM INSURED S\$0.00
INSURING WITH COE/PARF NO

- 1) VEHICLE REGISTRATION NO. YK8290Y
- 2) NAME OF INSURED CHIANG KANG ENTERPRISES COMPANY PTE LTD
- 3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 20 Jun 2017
- 4) DATE OF EXPIRY OF INSURANCE 19 Jun 2018
- 5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Insured's order or with their 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) LIMITATION AS TO USE *

Use for the carriage of passengers or goods in connection with the Insured's business.
Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
The Policy does not cover:

- 1) Use for racing, pace-making, reliability trial or speed-testing.
- 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY NA


* 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 30 Jun 2017

AIG ASIA PACIFIC INSURANCE PTE. LTD.

502806-000
LIEW OOI LIN MAY
AIG BUILDING
78 SHENTON WAY #07-16
SINGAPORE 079120


Authorized Representative

ORIGINAL

SSPYTP



長江企業(私人)有限公司

Chiang Kang Enterprises Co. (Pte.) Ltd.



TAX INVOICE

No. 4 Petain Road, Petain Court Singapore 208086 Tel: 6298-1936, 6284-0246 Fax: 6298-3864

RENTAL OF CARS, VANS, PICK-UPS & LORRIES

出租：汽車、廣告車、必甲與輕重型羅厘

GST Reg. No. 19-8304039-K

HIREE'S PARTICULARS

If Different From Section (I)

S. Tel: 9489 3452

hereinafter called "the Hirer" hereby confirm having agreed to hire this day from CHIANG KANG ENTERPRISES CO. (PTE.) LTD. hereinafter called "the Owner" the undermentioned Vehicle at the rental fees as shown below, and I further agree that I shall be held responsible for:

a) THIRD PARTY ONLY MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$5000 to cover for any third party damage or injury claims and also bear the full cost of any damage caused to the hired Vehicle resulting from any single accident including loss from inability to let the same Vehicle out on hire or loss resulting from theft and destruction of the Vehicle.

b) COMPREHENSIVE MOTOR VEHICLE COVERAGE

the Excess which is the maximum amount of \$2000 for any damage caused to the hired Vehicle from any single accident or any loss resulting from third party damage claim, injury claim, theft or destruction of the Vehicle.

c) Only persons above 21 years of age with more than 2 years driving experience, authorised licensed and signing this agreement may drive the vehicle.

Whether or not such damage or loss is by person/persons known or unknown to me or by negligence or any breach by me of the Terms and Conditions of Hire, hereinafter mentioned and printed at the back hereof.

Vehicle Regn No. 車輛註冊號碼: <u>9006-14-2</u>		Rental Agreement 合同號碼 No. A <u>90707</u>	
Section (I) Hirer's And/Or Driver's Particulars 租車者/駕駛員個人記錄		租出日期及時間 Date & Time: <u>24/03/2018</u> to <u>25/03/2018</u>	
姓名 Name: <u>Mr. 9006-14-2</u>		交車日期及時間 Date & Time IN: <u>24/03/2018</u>	
地址 Address: <u>Mr. 9006-14-2</u>		Chargeable Rates Amount	
國民證/護照號碼 I/C No./Passport No.: <u>9006-14-2</u>		Days @ \$ <u>766.29</u>	
駕駛執照號碼 Driving License No.: <u>9006-14-2</u>		Week @ \$ <u>2000</u>	
國民證/護照有效期間 Validity: <u>9006-14-2</u>		Month @ \$ <u>ADD 7% GST</u>	
出生日期 Date of Birth: <u>9006-14-2</u>		Place of Issue: <u>9006-14-2</u>	
三級保險金 \$1500 / \$3500		三級保險金 \$2000 / \$5000	
a) Third Party Only Policy Excess \$1500		b) Comprehensive Policy Excess \$2000	
車輛必須歸還車主於 Vehicle Must Be Returned To Owner's Office By: <u>24/03</u>		Total Charge <u>9006-14-2</u>	
備註與付款記錄 Remarks & Payment Records		Security Deposit <u>9006-14-2</u>	
出車油箱 Fuel Tank OUT		收車油箱 Fuel Tank IN	
車牌號碼 Vehicle No.: <u>9006-14-2</u>		租費不包括汽油 Rates Do Not Include Fuel Refuelling	
車牌號碼 Vehicle No.: <u>9006-14-2</u>		Total Additional Charges <u>9006-14-2</u>	
工具 Tools		Grand Total <u>9006-14-2</u>	
車輛發出人 Vehicle Issued By: <u>9006-14-2</u>		車輛接收人 Vehicle Collected By: <u>9006-14-2</u>	
NOTE: 租車者或司機必須對所有停車及違反交通法例負起一切責任。 HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING AND TRAFFIC VIOLATIONS.			

租車者或司機必須對所有停車及違反交通法例負起一切責任。 HIRER AND/OR DRIVER IS LIABLE FOR ALL PARKING AND TRAFFIC VIOLATIONS.

日期 Date: 24-02-18

租車者簽名 Signature of Hirer: 9006-14-2

driver's work permit & license

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
TONG HUP FRAME CONTRACTOR PTE. LTD.

Sector: CONSTRUCTION

Name
GOSH TOPEN

Occupation
CONSTRUCTION WORKER

Work Permit No.
O 61767916

Date of Application
18-06-2015

Date of Issue
30-06-2017

Date of Expiry
27-06-2019

L8079704

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: F8481772N

Name:
GOSH TOPEN

Birth Date: 02 Feb 1975

Issue Date: 13 Aug 2015

Valid Till: 12/08/2020

002461114D

driver's work permit & license

VISIT PASS
Immigration Regulations

Name
GOSH TOPEN

Date of Birth **Sex** **Nationality**
02-02-1975 M BANGLADESHI

FIN **Date of Issue** **Date of Expiry**
F8481772N 30-06-2017 27-06-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

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

EFFECTIVE DATE

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 13 Aug 2010

Licence No: F8481772N

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

