

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	10/08/2018 09:15
Date Of Accident	21/07/2018 12:00
Exact Location Of Accident	ALONG COMMONWEALTH AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD3645P
Insured/Policyholder	
Name Of Registered Owner	MOTORIMAGE ENTERPRICE PTD LTD
Co Reg No	198702032R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-NOPHONE

Vehicle Particulars

Manufacturer	NISSAN
Model	UD CMF88-6.9 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORK
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	MOTOR TRADE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	JAMAL BIN SALIKIN
NRIC No	S1549068C
Date Of Birth	23/01/1962
Occupation	INDOOR
Date Of Driving Pass	09/04/1987

Driving Experience	31 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98732388
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 196A PUNGGOL FIELD #03-513
Postcode	821196
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 - CHANGE/CROSS LANE
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

PLEASE REFER TO ATTACHED DOCUMENTS

Attachment(s)

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

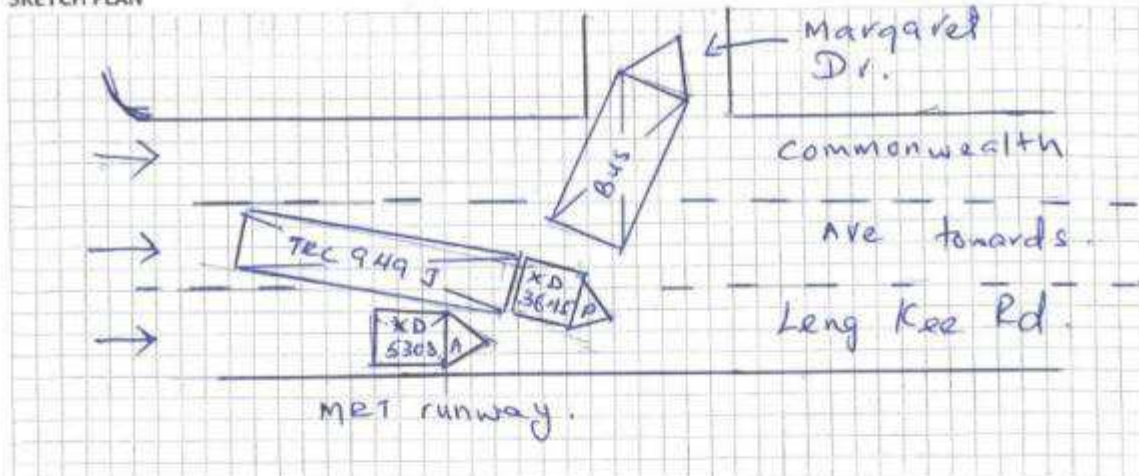
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD5308A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 210718 @ 1100 hrs I was driving ~~along~~ m/lorry XD 3645P with car carried TRC 949 J loaded with 5 cars along Commonwealth Ave towards Leng Kee Rd. A bus was turning into Margaret Dr. and it stopped due to some hindrance. The bus stopped occupying the left and centre lane of Commonwealth Ave. As I was on the centre lane I had to stop when I reached the bus. I looked right through my rear view mirror and saw the right lane was clear from moving vehicles. I signalled and filter slowly when suddenly a m/lorry came from that lane very fast, I had to stopped and the m/lorry also stopped because it cannot passed through. When I saw it stopped I moved on and filtered back to ~~my~~ the centre lane. The m/lorry moved behind my vehicle.

On reaching Leng Kee Rd I put on hazard light and stopped at the side of the road to unload ~~my~~ the 5 cars that my vehicle was carrying. The m/lorry moved on and turned right into Hoy Fatt Rd. About 10 days later my manager gave me a letter which indicated that I had an accident which I was not aware of.

I tried to recall back and remember this incident. At that time I did not feel any impact or jerked to my vehicle. I presumed there was no contacts to our vehicles. And also the m/lorry driver did not stopped me as I was travelling at 40km/h or approached me when I stopped at Leng Kee. That's all

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: 1/8/18

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

Accident Sketch Plan

SKETCH PLAN


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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) 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.:

LETTER FROM LKK



Auto
Consultants
Pte Ltd

51 UBI AVE L #04-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Our Ref: CC6/AIG18013375/Uea3

27th July 2018

Motor Image Enterprises
(ATTN: THEIN YIN)
911 BUKIT TIMAH ROAD
SINGAPORE 589622

EXT 8252

BERNARD TEO

: DRIVER: JAMAL
PRIME MOVER - XD3645P
CAR TRAILER - TRC949J

Dear Sirs,

ACCIDENT INVOLVING XD 3645P AND XD 5308A ON 21.07.2018 ALONG / AT
LENG KEE ROAD TOWARDS COMMONWEALTH AVE WEST

We, LKK Auto Consultants Pte Ltd has been appointed to act on the behalf of your insurer, AIG Asia Pacific Insurance Pte Ltd (AIG) to settle a THIRD PARTY claim against you for an accident which happened on the above-mentioned date and location.

Kindly proceed to lodge your GIA report within five (05) working days of receipt of this letter, giving the version of the accident amongst other things related to the accident. The GIA report can be lodged at any of AIG reporting centres. You may refer to your Certificate of Insurance for the list of the reporting centres.

If you have any information to add or any amendments to make, please contact the undersigned within five days from the date of this letter.

Please note that the standing of your insurance policy such as NCD, premium & etc would be affected.

Yours faithfully,

Asher Sng
Claims
Tel : 6841 6051
Fax: 6741 4108
Email : AsherSng@lkkauto.com

c.c. Claims Manager
AIG Asia Pacific Insurance Pte Ltd
(Motor Claims Dept)

INSURANCE CERT



HEADLINE TEL: (65) 6419-3000
FAX: (65) 6415-3721

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1967 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

MZ 390

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994722/100856989

OWN DAMAGE EXCESS S\$300.00 (1)
WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2002)

SUM INSURED S\$1.00

INSURING WITH COE/PARF Yes

TRC949J

MOTOR IMAGE ENTERPRISE PTE LTD

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT 1 Jan 2018

4) DATE OF EXPIRY OF INSURANCE 31 Dec 2018

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the insured's order or with their permission.

An Elderly Young and Inexperienced Driver (EYIDR) Excess of S\$2,500 (unless otherwise stated) applies to any drivers (named and unnamed) who is above age 60, below age 26 or has less than 2 years driving experience. If the EYIDR is not named in the policy, an additional S\$500 unnamed driver excess will be imposed.

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.

LOSS OF USE NOT INCLUDED

* NAMED DRIVER N/A

HIRE PURCHASE COMPANY N/A

* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169) and Section 95 of the Road Transport Act, 1967 (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 169) and Part IV of the Road Transport Act, 1967 (Malaysia).

Issued In Singapore 23 Mar 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD

500610-000

TAN CHONG CREDIT PTE LTD

811 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589622 A

Authorised Representative

ORIGINAL

SSC08K

INSURANCE CERT



HOTLINE TEL (65) 6419 3000
FAX (65) 6335 3323

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT/CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1990
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

WZ300

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999994722/100856990

OWN DAMAGE EXCESS S\$2,500.00 (1)
WINDSCREEN EXCESS S\$100.00

(for policies with effect from 1st November 2002)

SUM INSURED S\$1.00

INSURING WITH COE/PARF Yes

XD3645P

MOTOR IMAGE ENTERPRISE PTE LTD.

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Issued In Singapore: 23 Mar 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD

500510-000

TAN CHONG CREDIT PTE LTD

911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 59622 A

Authorised Representative

ORIGINAL

53008K

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

