Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 13/08/2018 16:51

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

aforesaid.	and to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	13/08/2018 10:26
Date Of Accident	09/08/2018 19:10
Exact Location Of Accident	OPEN SPACE CARPARK AT 2-12 BRADDELL ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GW8512H
Insured/Policyholder	
Name Of Registered Owner	YIT FATT ENGINEERING PTE LTD
Co Reg No	200817299C
Email Address	YITFATT@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	Office-64810715
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HIACE DIESEL 1.6 TON
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	2100261192-06
Cover Note Number	
Driver	
Name of Driver	CHOONG CHEE SENG
NRIC No	S1474337E
Date Of Birth	20/06/1961
Occupation	OUTDOOD

OUTDOOR

13/05/1985

33 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91398176

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 195 KIM KEAT AVENUE

#10-316

Postcode 310195
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

venicie

Insurance Company of Driver's Own Vehicle

_

NO

1

NO

NO

General Information of the Accident

Type Of Accident SIDE SWIPE
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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SFL1196C

Vehicle Make/Model/Colour VOLKSWAGEN RED

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TEO JUN XIANG SIDNEY

NRIC/Passport Number S9339661H

Contact Number

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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.

Policyhother Signature Date & Tinge AUG 2018

10:26 Am

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

13 AUG 2018

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Fun Kwee Choo S6840583A

SKETCH PLAN 12-12	SFL1196C. Bradden Road	
	raddell Rd Rd	
	appened on 9/8/2018	of 7.60 pm around ,
I revused m	4 vehide (GW 8512H)	and hit the vehicle
(SFL 1196C)	on the right side si	ightly dested.
My vehicle (Gw 8512H) slightly de	sted on left.
The vehic	le-SFL 1196C: Driver's Advois	Name: Teo Jun Xiang, Sidney Neix: 59339661 H.
		رو و ۱۰۰۰ د من
DECLARATION I/We declare the foregoing partice	ulars are true in every respect.	G. Car
	ulars are true in every respect.	
	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:



CERTIFICATE OF INSURANCE

COMMERCIAL AUTO THIRD PARTY FIRE AND THEFT COMMERCIAL VEHICLE

Name of Policyholder : Yit Fatt Engineering Pte Ltd : 20 Nov 2017 To 19 Nov 2018

Engine No. Chassis No.

: 5L5385889 : LH1721036219 Vehicle No. Policy No.

: GW8512H : 2100261192-06

Endorsement No. Issued Date

: 07 Nov 2017

ABOUT THE COVER

Make/Model TOYOTA HIACE DIESEL 1.6 ton [Van]

Engine Capacity/Tonnage ; 1.6 Tonnage

Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2003 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

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

or This Policy will indemnify the Policyholder or any authorised driver only if he/sine meets the specified age condition.

Age Condition

: All Age Condition

Limitation as to use* :

Lith intellitors do to use:

1) Use in connection with the Policyholder's business.

2) Use for the carriage of passanger (other than for hine or reward) in connection with the Policyholder's business.

3) Use for the carriage of passanger (other than for hine or reward) in connection with the Policyholder's business.

3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hine or reward, driving business, diving lest, racing, pace-making, reliability brist or speed-testing and by use whilst drawing a trader except the towing of anyone disabled using a mechanically propelled vehicle, or use for any purpose in connection with Motor Trade.

* Limitations randored inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be inducted under these headings.

Windscreen: NA

Named Driver and Excess (where applicable)

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

Any accident repairs to the Vehicle can be corned out at the repairer of Your choice (unless specifically encluded by Us).
For exproved Reporting Centres/NS Acthorised Reperture, plaster contact our 24-hour accident emergency holiste at +65 858 8200, Alternatively, you may refer to AIG website www.sig.com.sg or AIG SQ Souther expression and directions (AIG SQ Introduced Play).

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

IMNe hereby certify that the policy to which this Certificate of insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act. 1967 (Maleyste) and Motor Vehicles (Third Party Risks) Rules, 1969 (Maleyste).

0623004000 . .

KWEK JEN CHEOW

BLK 894D WOODLANDS DRIVE 50 #08-33

SINGAPORE 733894 SP-MARTIN

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE







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

EFFECTIVE DATE

Class 3 Motor Cars = 3000kg with = <7 passengers, exclusive 13 May 1985 of the driver, and other motor vehicles = < 2500kg

NP 428A

Accident Photo















CHASSIS NUMBER

