

## 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	14/08/2018 13:41
Date Of Accident	13/08/2018 12:00
Exact Location Of Accident	CARPARK (BDB93)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH5208U
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### Insured/Policyholder

Name Of Registered Owner	JUST BUILD PTE LTD
Co Reg No	A201709146G
Email Address	STEVE@JUSTBUILD.COM.SG
Mobile Phone No	
Alternative Phone No	Office-90369034

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV350-2.5 5AT 5DR EURO V (A)
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	1800076829
Cover Note Number	28/06/2018 - 27/06/2019

### Driver

Name of Driver	MOHAMED SAHFET BIN MOHAMED ALI
NRIC No	S8123957F
Date Of Birth	26/07/1981
Occupation	OUTDOOR
Date Of Driving Pass	03/04/2017
Driving Experience	1 YEAR AND 4 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-90369034
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 174D HOUGANG AVE 1 #03-1619
Postcode	S539174
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	2
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

Refer to attached sketch plan

#### 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 Witness 1

Name	KASON SEE
Phone Number	91883798
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL8474H
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

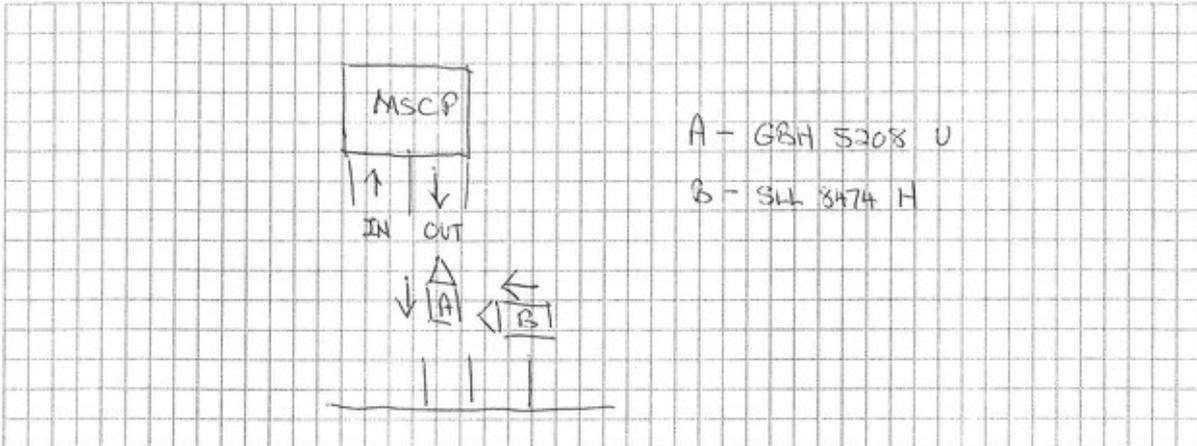
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN



A - GBH 5208 U  
 B - SLL 8474 H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS ABOUT TO PARK MY VAN WITH MY HAZARD LIGHT ON. I REVERSED MY VEHICLE AND HIT ONTO VEHICLE (SLL 8474 H), WHO WAS FOLLOWING VERY CLOSELY BEHIND ME.

<p><b>Important:</b>                  You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a <b>FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE</b> within the stipulated time frame from the day of the occurrence.</p>		- Reporting Only
		- Claim OD
		- Claim TP
		- Claim OD/ TP at other workshop

DECLARATION

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

  
 \_\_\_\_\_

Policyholder's signature  
 Date & Time

  
 \_\_\_\_\_

Driver's Signature  
 (if driver not the policyholder)  
 Date & Time

   
 \_\_\_\_\_

Reporting Centre Personnel's Signature  
 Name:  
 Nric/Fin No.

## 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:



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



## CERTIFICATE OF INSURANCE

### NISSAN COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

Name of Policyholder	: Just Build Pte Ltd	Vehicle No.	: GB16206J
Period of Insurance	: 28 Jun 2018 To 27 Jun 2019	Policy No.	: 1800075829
Engine No.	: YD25007411B	Endorsement No.	:
Chassis No.	: JN1MC2E26Z0030078	Issued Date	: 17 Jul 2018

#### ABOUT THE COVER

Make/Model	: NISSAN NV350 PANEL VAN	Sum Insured	: Market Value	First Year of Registration	: 2018
Engine Capacity/Tonnage	: 1.5 Tonnage	Off Peak Car	: No	Insuring with COE/PARF	: Yes
Driver Restriction	: NA				

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

\*) Any person when driving on the Policyholder's order or with their permission.  
 \*\*) This Policy will indemnify the Policyholder or any authorized driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDEX") if You are or Your Authorized Driver (named or unnamed) is under the age of 25 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 passenger (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 a use for hire or reward, driving school, driving test, racing, pace making, reliability test or speed testing and 4) use while wearing a helmet except the loading of engine installed using a mechanically propelled vehicle 5) use for any purpose in connection with Motor Trade.

#### Limit of Use (7 Days) Commercial Auto

\*) Limitations imposed respectively by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 188) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be exceeded under these headings.

#### EXCESS

Section 1  
Fire - \$0, Own Damage - \$100, Theft - \$5, Flood Cover - \$0

Section 2  
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

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

1. Tan Chong Motor Sales, Add: #13, Bl Trench Road Singapore 689620 64864000 64864000 64864000

2. TD Auto Clinic, Add: #1, 5th, Loh Yang Road Singapore 670899 63521212

3. Tan Chong Motor Sales, Add: 12, Lor 8, Tan Pagar Singapore 310254 63070753 63070754

4. Automation Industries, Add: 10, Ulu Road 4 Singapore 409523 64005988

5. TD Auto Clinic, Add: 25, Lomp Lee Road Singapore 180097 67028611 67028612 67028613

For other Approved Reporting Centres/Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6358 0200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG 5D Mobile App. Simply search and download "AIG 5D" from iTunes or Google Play.

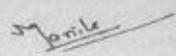
#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HI Bank

This hereby certifies 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. 188), Part VIII of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1989 (Malaysia).

9530615470

TAN CHONG CREDIT PTE LTD - 012  
 311 BLUNT TRENCH ROAD TAN CHONG MOTOR CENTRE  
 SINGAPORE 689223 ANSP-MOTOR  
 Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

  
 AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORIZED REPRESENTATIVE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



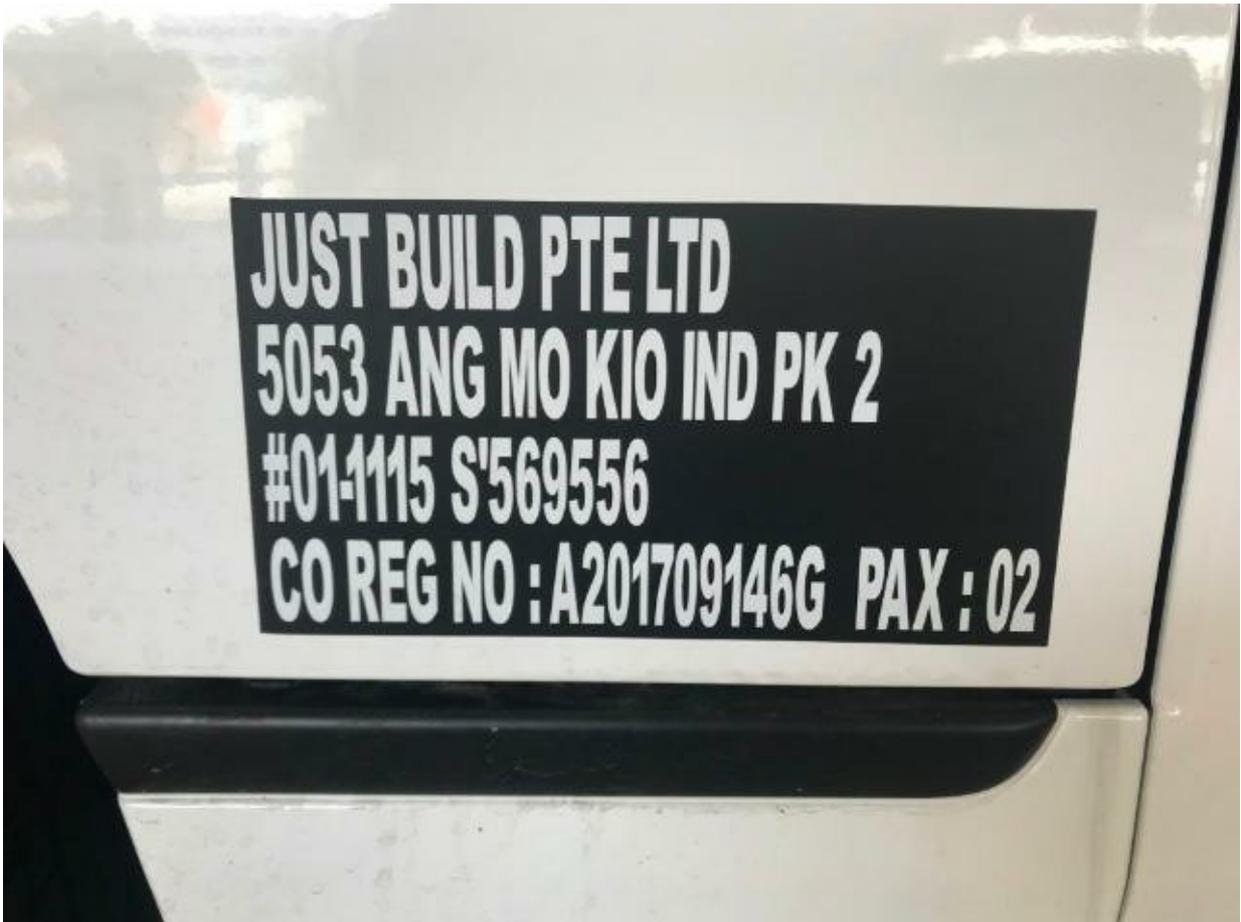
Accident Photo



Accident Photo



Accident Photo



**JUST BUILD PTE LTD**  
**5053 ANG MO KIO IND PK 2**  
**#01-1115 S'569556**  
**CO REG NO : A201709146G PAX : 02**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card



# Driving License



Accident Photo

