





### 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 liability.
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	15/01/2019 16:50
Date Of Accident	13/01/2019 09:30
Exact Location Of Accident	ALONG TUAS SOUTH BOULEVARD AT LAMPOST 40/9
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD9770B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	ANIS.ASLAM@DEME-GROUP.COM
Mobile Phone No	(LOCAL) +65-87980213
Alternative Phone No	OFFICE-87980213

#### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 AD GLS (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	999994316
Cover Note Number	

#### Driver

Name of Driver	ANIS ASLAM
Passport No/FIN	G3153816K
Date Of Birth	13/08/1969
Occupation	INDOOR
Date Of Driving Pass	19/01/2016
Driving Experience	2 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87980213
Fax Number	
Contact Number	OTHERS-87980213
Email Address	ANIS.ASLAM@DEME-GROUP.COM

Address	370H ALEXANDRA ROAD #08-01 THE ANCHORAGE
Postcode	159961
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	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20190113/2060

#### Attachment(s)

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

## SKETCH PLAN


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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. 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.

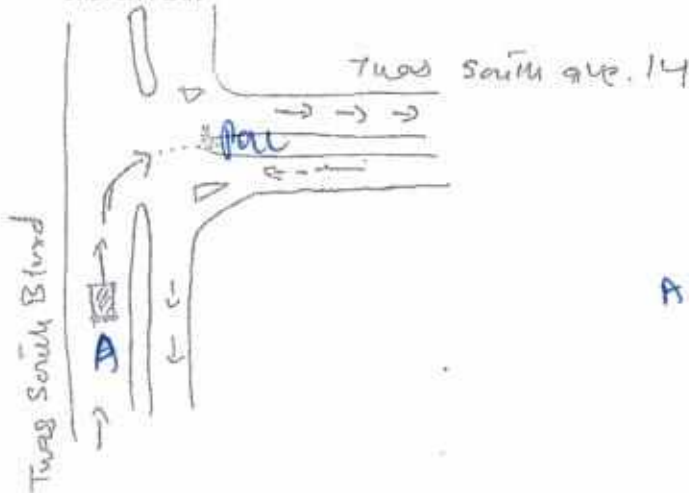
  
Policyholder's Signature  
Date & Time:

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

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



# SKETCH PLAN



A) SMD 9770B.

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ATY THE 13/JAN/19, at about 0930hrs, I was driving my vehicle along Twas South Boulevard heading right onto Twas South Ave. 14. My vehicle's front right tyre got punctured and I lost control of the vehicle. My vehicle then mounted the kerb and hit onto the centre divider light post and came to a stop. There was no other vehicle involved and no body got injured including me. I then called Goldsell rental cars and also police. Police came to scene and a report was lodged.

Police Report 1/2019 113/2060

## 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.:



**SINGAPORE  
POLICE FORCE**



T/20190113/2060

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

1 of 3

Report No. T/20190113/2060

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/01/2019 14:44	Vide Report No.: J/20190113/0075	Station Diary No.: 57
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<b>Informant's Particulars</b>			
Name of Informant: ANIS ASLAM		Address: APT BLK 370H ALEXANDRA ROAD #08-01 THE ANCHORAGE SINGAPORE 159961	
ID Type / ID No.: FIN NO / G3153816K		Contact No.: Home/Office: Mobile: 87980213	
Nationality: INDIAN		Email:	
Sex: Male	Age: 49	Date of Birth: 13/08/1969	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: PLANNING ENGINEER		Driving Licence Information: Class: 3 Date of Expiry: 18/01/2021	

<b>General information of the Accident</b>				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/01/2019 09:30	Type of Location: T-Junction
Location: Along Road 1 TUAS SOUTH BOULEVARD  Along Tuas South Boulevard, at L/P 40/9				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMD9770B	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT (AMS)	Silver	Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20190113/2060

2 of 3

Police Station Of Origin:

Queenstown N.P.C

3 Queensway #01-03 SINGAPORE 149073

Tel No: 1800-4719999

Report No. T/20190113/2060

**CONTINUATION OF REPORT**

**Brief Details.**

On the 13/1/2019, at about 0930hrs, I was driving my vehicle, SMD9770B, along Tuas South Boulevard turning right onto Tuas South avenue 4. My vehicle's front right tyre got punctured and I lost control of the vehicle. My vehicle then mounted the kerb and hit onto the center divider light post hence came to a stop. There were no traffic at the point of time and I was not injured. I then called for the Police. Police then came to scene and requested me to go lodge a physical report, reference #J75 under Traffic Police IO Maria.



**SINGAPORE  
POLICE FORCE**



T/20190113/2060

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

3 of 3

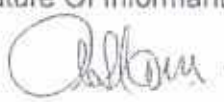

Report No. T/20190113/2060

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: D / Sgt 3 NG YONG XIN, ALESTER	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 13/01/2019 14:44
Officer In Charge Of Case: TP / GIT / SI MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246	Classification Of Case:
Authentication Stamp NP158	 SIGNATURE





aw 15/01/2019



gw 15/01/2019



# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

1. Complete and submit this form to the Authorized Reporting Centre (ARC) for filing.
2. Please report correctly the details of the accident to speed up the claims process.
3. This Form must be completed by the Policyholder and/or the Authorized Driver.
4. 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 liability.
5. The insurance and acceptance of this Form by insurance companies is not an admission of the policy liability on the part of the insurance companies.
6. Any false reporting may be referred to the Traffic Police Department for investigation.

## ACCIDENT STATEMENT

Date and Time of Accident	Date: 13-JAN-2019	Time: 09:30 AM
Exact Location of Accident	TUAS SOUTH BOULEVARD (ALONG ROAD 1)	
<b>DETAILS OF OWN VEHICLE</b>		
Vehicle Registration Number	SMD 9770B	
<b>INSURED / POLICYHOLDER (OWN VEHICLE)</b>		
Name of Registered Owner (See Insurance Cert.)		
Personal Identification - NRIC (Singaporean/PR)		
- FIN/Passport Number		
- Not Applicable		
<b>VEHICLE PARTICULARS (OWN VEHICLE)</b>		
Vehicle Make / Model	Manufacturer:	Model:
Type of Vehicle	<input type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> M/cycle <input type="radio"/> Others	
Exact Purpose for which vehicle was being used at time of accident	BUSINESS	
Are you claiming under own insurance policy for repair to your vehicle?	<input checked="" type="radio"/> Yes <input type="radio"/> No (If No, P/s select Third Party <input type="radio"/> Reporting)	
<b>INSURANCE COMPANY (OWN VEHICLE)</b>		
Name of Insurance Company		
Type of Policy	<input type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only	
Fleet Policy	<input type="radio"/> Yes <input type="radio"/> No	
Policy Number		
Motor CI		
<b>DRIVER</b>	<input type="radio"/> Same as Insured above	
Name of Driver	ASLAM ANIS	
Personal Identification - NRIC (Singaporean/PR)		
- FIN/Passport Number	G3153816K	
Date of Birth	13/dd	08/mm 69/yy
Driving Date Pass	19/dd	08/mm 16/yy
Year of Driving Experience	24 Year(s) Month(s) Month(s)	
Occupation		
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female <input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor	
Contact Number / Mobile Phone / Fax No.	87980213	



Address of Driver	3704, ALEXANDRA ROAD
Email Address	08-01, THE ANCHORAGE SINGAPORE 159961
Was Driver An Employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input type="radio"/> No
Vehicle Registration Number of Driver's Own Vehicle (if applicable)	
Insurance Company of Driver's Own Vehicle (if applicable)	
<b>GENERAL INFORMATION OF THE ACCIDENT</b>	
Type of Collision (Eg. Chain Collision, Head-On Collision, Side Swipe, Front to Rear)	HITTING CURB (NO OTHER VEHICLE)
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others
<b>OTHER INFORMATION</b>	
a. Was anybody injured in the accident?	<input type="radio"/> Yes <input type="radio"/> No
b. Was any other vehicle or property damaged? (Including Witness)	<input type="radio"/> Yes <input type="radio"/> No
<b>DETAILS OF POLICE ACTION</b>	
Was the Accident reported to the Police?	<input checked="" type="radio"/> Yes <input type="radio"/> No (if Yes, please state which Police Station.)
Police Station Name	QUEENSTOWN NPC
Police Station Address	3, QUEENSWAY #01-03 SINGAPORE-149073
Police Station Contact	Tel No. 1800-4719999 Fax No.
Was notice of Intended Prosecution given?	<input type="radio"/> Yes <input type="radio"/> No (if Yes, against whom?)
<b>DETAILS OF OTHER VEHICLE/ PROPERTY 1</b>	
Vehicle Registration Number	Traffic Light pole.
Vehicle Make/ Model/ Colour	
Details of Properties	
Name of Driver	
Personal Identification - NRIC (Singaporean/PR)	
- FIN/Passport Number	
Contact Number	
Vehicle Make/ Model/ Colour	
Address of Driver	
Name of Insurance Company	
No. of Passenger (Including Driver)	
(Note - Please use page 6 if you need to add more vehicles)	



**EMPLOYMENT PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
DREDGING INTERNATIONAL ASIA PACIFIC PTE LTD



Name  
**ANIS ASLAM**  
Occupation  
**PLANNING ENGINEER**

FIN  
**G3153816K**

Date of Application  
**12-12-2017**  
Date of Issue  
**09-01-2018**  
Date of Expiry  
**09-04-2021**



**L8556221**



**VISIT PASS**  
Immigration Regulations

Name  
**ANIS ASLAM**



Date of Birth  
**13-08-1969** Sex  
**M** Nationality  
**INDIAN**  
FIN  
**G3153816K** Date of Issue  
**09-01-2018** Date of Expiry  
**09-04-2021**

**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.**



**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **G3153816K**

**ANIS ASLAM**

Birth Date: **13 Aug 1969**  
Issue Date: **19 Jan 2016**  
Valid Till: **18/01/2021**

002520118E

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

	<b>EFFECTIVE DATE</b>
<b>Class 3</b> Motor cars with unladen weight $\leq 3000\text{kg}$ with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	<b>19 Jan 2016</b>

NP 426A

Licence No: G3153816K





# CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M 2-400

Comprehensive Commercial Motor  
CERTIFICATE NO. 999994316

(The below excess is subject to GST)

POLICY EXCESS S\$1,200.00 \*\* (I)

WINDSCREEN EXCESS S\$100.00

SUM INSURED Market Value

INSURING WITH COE/PARF Yes

SMD9770B

Goldbell Car Rental Pte Ltd

1) VEHICLE REGISTRATION NO.

2) NAME OF POLICYHOLDER

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE  
FOR THE PURPOSES OF THE ACT

01 January 2019

4) DATE OF EXPIRY OF INSURANCE

31 December 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

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

Additional Excess of \$1000 applies to all claims for Drivers below 23 years old and/or with Driving Experience less than 12 months.

Additional excess of \$500 applies to all claims for accident outside Singapore

\*\* Policy Excess vary according to Vehicle Usage. Refer to Policy for more details.

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 for social, domestic, pleasure purposes and business purposes of Insured
- 2) 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.
- 4) Use for any purpose in connection with Motor Trade.

LOSS OF USE Not Included

HIRE PURCHASE COMPANY DBS Bank Ltd

\*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 in Singapore 14 Jan 2019

AIG Asia Pacific Insurance Pte. Ltd.

030123-000

Acom International Network Pte Ltd

48 Changi South St 1 Level 3

SINGAPORE 486130

AUTHORISED REPRESENTATIVE

ORIGINAL

SSPRWJ