

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	27/02/2019 11:08
Date Of Accident	11/02/2019 09:30
Exact Location Of Accident	208 PANDAN LOOP PARKING AREA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ1694X
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Insured/Policyholder

Name Of Registered Owner	FEDERAL EXPRESS (SINGAPORE) PTE LTD
Co Reg No	198402740W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-69222929

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	316CDI/3550
Exact Purpose for which vehicle was being used at time of accident	DELIVERY AND PICK-UP
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	YES
Policy Number	100774004
Cover Note Number	

Driver

Name of Driver	CHEE HAN KEONG
NRIC No	S1314082J
Date Of Birth	07/10/1958
Occupation	OUTDOOR
Date Of Driving Pass	19/04/2007
Driving Experience	11 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-87211394
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 30 NEW UPPER CHANGI ROAD #11-786
Postcode	461030
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	COLLIDED INTO PARKED VEHICLE
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	2
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)	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

ON 11/02/2019 AROUND 09:29 HRS ON MY 6TH DELIVERY STOP TO 208 PANDAN LOOP . I NORMALLY REVERSED-IN, BUT TODAY I HEAD-IN TO PARK MY VEHICLE DUE TO SPACE CONSTRAINTS. AFTER DELIVERED THE PKG I REVERSED OUT AS THERE WAS A CAR MOVING ON THE SIDE. I TRIED AND CAREFULLY REVERSED, HOWEVER, DUE TO SPACE CONSTRAINTS I BANGED INTO THE STATIONARY CAR ON THE LEFT.

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	SJP4870B
Vehicle Make/Model/Colour	-
Details Of Properties	LEFT REAR BUMPER DENTED
Vehicle Category	PRIVATE CAR

Name of Driver	ROHMAT HIDAYAT
NRIC/Passport Number	S8500650I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

1694

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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.

Federal Express (S) Pte Ltd
90 ALPS Avenue
Singapore 498746

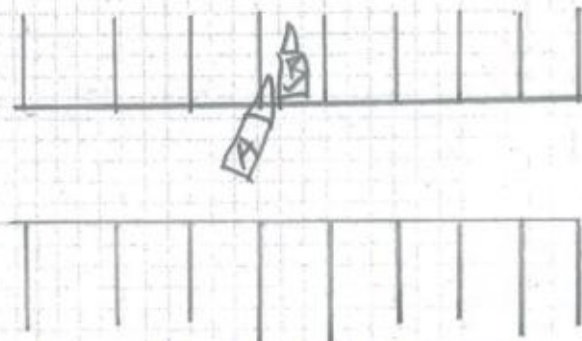
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Veh A: 62 1694X
Veh B: 8JP 4870B



208 Pandan Loop parking Area

Describe Circumstances of the Accident

On 11/02/2019 around 09:29hrs on my 6th delivery stop to 208 Pandan Loop. I normally reversed-in, but today I head-in to park my vehicle due to space constraint. After delivered the pkg I reversed out as there was a car moving on the side. I tried and carefully reversed, however, due to space constraints I banged into the stationary car on the left.

Declaration

We declare the foregoing particulars are true in every respect.

Federal Express (S) Pte Ltd
90 ALPS Avenue
Singapore 498746

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

CERTIFICATE OF INSURANCE



HOTLINE TEL: (65) 6419-3000

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)

442300

THIRD PARTY COMMERCIAL MOTOR	OWN DAMAGE EXCESS	SS\$0.00
CERTIFICATE NO. 999994337/100774004-00000	WINDSCREEN EXCESS	N/A
	(for policies with effect from 1st November 2002)	
	SUM INSURED	SS\$0.00
	INSURING WITH COE/PARF	NO
1) VEHICLE REGISTRATION NO.	GZ1694X	
2) NAME OF INSURED	FEDERAL EXPRESS (SINGAPORE) PTE LTD	
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT	2 Oct 2018	
4) DATE OF EXPIRY OF INSURANCE	1 Oct 2019	
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 *		
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	NA	
* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 93 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 11 Dec 2018

AIG ASIA PACIFIC INSURANCE PTE. LTD.

093082-000
MARSH (SINGAPORE) PTE LTD
8 MARINA VIEW #09-02
ASIA SQUARE TOWER 1
SINGAPORE 018950

Authorized Representative

ORIGINAL

SSPJFO

DRIVER-NRIC-BACK



DRIVER-DL-FF



DRIVER-DL-BACK

USED TO DRIVE VEHICLES IN THE FOLLOWING

FedEx

ID NO. 513140520

TEL NO. 87211394

VEH NO. GZ8305Z

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1314082J



Name
CHEE HAN KEONG

朱 汉 强

Race
CHINESE

Date of birth
07-10-1958

Sex
M

Country of birth
SINGAPORE





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

